



**Washington State
2016 Annual Progress
and Services Report**

**Children's Administration
Department of Social and Health Services
June 30, 2015
*Amended September 15, 2015***

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Section I – General Information

Collaboration

CA collaborates with tribes, stakeholders, courts, and a variety of invested local organizations and governmental entities to determine unmet client needs and plan for efficient service delivery. CA also works with the regional service networks administering mental health services and community-based service providers to provide quality services to meet the unique needs of families.

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

The following committees or advisory groups are among those that provide regular and ongoing collaboration and consultation to CA:

- Children, Youth and Family Services Advisory Committee
- Supreme Court Commission on Children in Foster Care
- Foster Parent 1624 Consultation Team
- Birth to Six Interagency Coordinating Council
- Indian Policy Advisory Committee
- Foster Parents Association of Washington
- Veteran Birth Parents Advocacy Committees
- Court Improvement Advisory Committee
- Foster Parent Hubs and Regional Foster Parent Meetings
- Washington State Racial Disproportionality Advisory Committee
- Superior Court Judges Association sub-committee for children and families
- The Casey Family Program
- Catalyst for Kids
- Passion to Action Youth Advisory Committee
- Alliance for Child Welfare Excellence
- Provider groups
- Private Agencies

CA engages with multiple stakeholder groups on an ongoing basis and the work of stakeholders was incorporated to inform and develop the 2015-2019 Child and Family Services Plan as well as the 2016 APSR. Examples of engagement related to items included in the 2016 APSR include work done by the external permanency CQI team and engagement with tribal partners in the development and planned implementation of the statewide ICW case review. Additional collaboration is identified and embedded within the assessment and planning sections of the APSR. In addition, the Indian Policy Advisory Committee reviewed the [Consultation and Coordination between States and Tribes](#) section of the APSR and was invited to provide input.

CA continues to strengthen its Continuous Quality Improvement (CQI) processes, including the ongoing use of statewide and local teams to improve child welfare practice and achieve improvements as identified in the APSR. Existing committees and advisory groups are an important part of these processes; reviewing data and providing input and feedback regarding performance and progress. Individual representatives of tribes, stakeholder groups, and community partners will continue to be provided opportunities to participate on time-limited work groups focused on system, practice, and service improvements. In the coming year, CA will continue to strengthen and clarify communication regarding connection between the input and feedback and the APSR. These efforts will be critical as CA continues to move forward in preparation for the CFSR in 2018.

Section II – Assessment of Performance

Part 1: Child and Family Outcomes

[Safety Outcomes](#)

[Permanency Outcomes](#)

[Well-being Outcomes](#)

Part 2: Systemic Factors

[Information System](#)

[Case Review System](#)

[Quality Assurance System](#)

[Staff Training](#)

[Service Array](#)

[Agency Responsiveness to Community](#)

[Foster and Adoptive Parent Licensing,](#)

[Recruitment, and Retention](#)

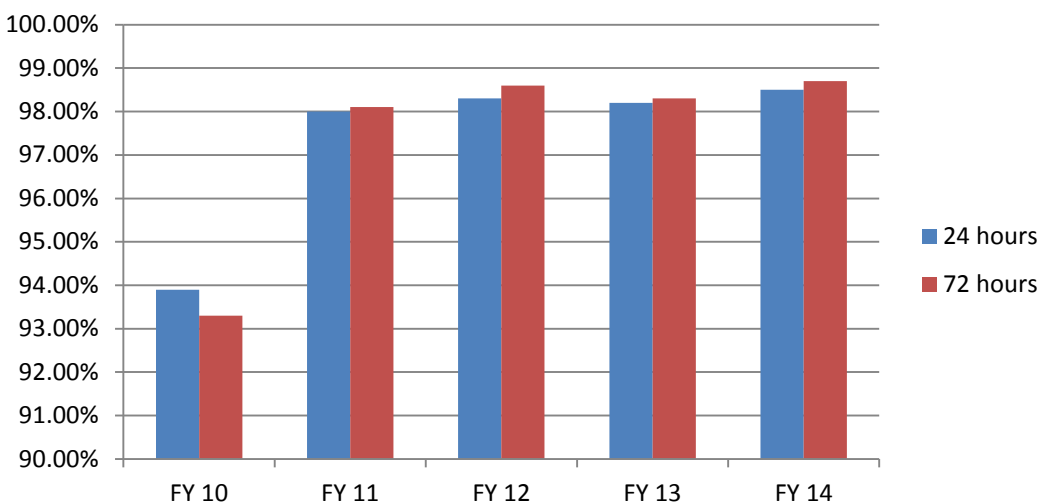
Assessment of Performance

CA routinely uses data in the assessment of performance and development of performance improvement strategies. In the fall of 2014, CA successfully completed the Performance Improvement Plan (PIP) developed after the 2010 CFSR. Since the fall of 2014, CA has been transitioning to and integrating the CFSR round 3 data indicators. Access to the syntax for these indicators will be helpful to this process. Understanding trends and assessing performance using case level detail will be critical pieces of this work. In the coming year, additional assessment will be completed and infrastructure established across the measures and systemic factors in anticipation of the Round 3 CFSR in 2018.

Safety Outcomes

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

Item 1: Timeliness of initiating investigations of reports of maltreatment



Data source: FamLink run data 5/5/2015

Initial face-to-face visits with alleged victims of child abuse and neglect continue to be an area of strength for Washington state. Data regarding performance is reported at both summary and detail levels and is available to staff at all levels of the organization to identify alleged victims that have been seen as well as those that still need to be seen.

Repeat Maltreatment

Washington state performance on the May 26, 2015 (based on data submissions as of July 10, 2014) CFSR Round 3 Recurrence of Maltreatment data indicator is 7.8%, which meets the national standard.

A qualitative review of a sample of victims who experienced recurrence between July 1, 2013 and June 30, 2014 was completed in 2015 with the goal of better understanding the reasons for recurrence. The sample included 74 intakes assigned for CPS investigation involving 33 cases and 36 victims. Some cases included multiple incidents of recurrence. Reviewers found that there was no recurring maltreatment in 26% of the intakes reviewed and the incident dates in intakes were incorrectly entered in 45% of the intakes translating to a larger incidence and percentage of recurrence than actually occurs.

Recommendations from the review included training intake staff on entering the correct incident date on intakes and discussing entering the correct incident date with all intake supervisors. This action item is due to be completed by summer 2015. Refresher training for intake staff began in May, 2015 and will continue through July, 2015.

Absence of Maltreatment in Foster Care

FFY 2011	FFY 2012	FFY 2013	FFY 2014*
99.81%	99.67%	99.68%	99.89%

*Data Source: State generated FFY2014 data profile based on federal syntax. CFSR Round 2 indicator.

Washington state performance on the May 26, 2015 CFSR Round 3 data indicator based on data submissions as of July 10, 2014 for Maltreatment in Foster Care is 7.83 victimizations per 100,000 days in care. While this exceeds the National Standard of 8.5 victimizations, it does not meet Washington’s risk adjusted performance requirement of 6.8 victimizations.

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

Washington state’s Central Case Review data provides feedback for informing decisions made by leadership. This data also supports the ongoing practice improvements of the statewide and regional CQI teams to support ongoing practice improvements.

Item 2: Services to the family to protect child(ren) in the home and prevent removal or re-entry into foster care

Central Case Review Questions	CY 2013 Statewide Results	CY 2014 Statewide Results
Q: <i>The child was removed from the home without first providing services, and the removal was necessary to ensure the child’s safety.</i>	100% 80 cases	99% 75 of 76 cases
Q: <i>The family was provided or offered services targeted at the risk and safety threats to protect the child and safely prevent removal or re-entry.</i> For 2014: In-Home Cases were 82% (120 of 146 cases) Out-of-Home cases were 92% (99 of 108 cases)	78% 198 of 253 cases	86% 219 of 254 cases

Data Source: CA Central Case Review

Specific areas noted by the Case Review Team for practice improvement were: identifying services to address specific risk and safety threats, primarily regarding mental health, substance abuse, and domestic violence; providing services to both parents in the home; and providing services in a timely fashion.

Since implementation, CPS Family Assessment Response (FAR) has seen an approximate two-percent placement rate across the state which gives some indication that children are being maintained in-home when safety threats can be managed. CPS FAR staff continue efforts to access community resources and paid contracted services to provide for the needs of families, but at times struggle to identify services that can both meet the needs of families and fit within the timeframes of CPS FAR. Another challenge to implementation of CPS FAR is access to services in rural parts of the state where there is limited capacity for contracted services. In those areas, staff is working to develop strong community relationships as they rely heavily on the support of community resources when contracted providers are limited.

Washington state performance on the 2014 CFSR Round 3 re-entry into Foster Care data indicator is 4.4%, exceeding the National Standard of 8.3%

Item 3: Risk Assessment and Safety Management

Central Case Review Questions	CY 2013 Statewide Results	CY 2014 Statewide Results
Q: <i>The CPS investigation was sufficiently comprehensive to determine if the child(ren) was safe, and all risk and safety threats were adequately addressed.</i>	65% 196 of 301 cases	70% 232 of 334 cases
Q: <i>Safety threats to the child(ren) were adequately identified, assessed and addressed.</i> For 2014: In-Home Cases were 77% (116 of 151 cases) Out-of-Home cases were 88% (276 of 314 cases)	81% 363 of 450 cases	84% 392 of 465 cases
Q: <i>All safety and risk concerns regarding the child's out-of-home caregiver were adequately addressed, and unlicensed caregivers were assessed prior to placement.</i>	97% 289 of 299 cases	96% 299 of 313 cases

Data Source: CA Central Case Review

Safety item 3 was also included in the successfully completed PIP. The PIP strategy for improvement was the implementation of the CSF. The decrease in performance noted by Central Case Review regarding CPS cases is related to:

- Not addressing all concerns with victims and/or subjects; or
- Not completing collateral contacts with individuals who would have information relevant to the family circumstances.

In 30 of the cases reviewed, the safety assessment was found to not have adequate information documented to accurately assess if the child was safe or unsafe.

The passage of the "Preventing Sex Trafficking and Strengthening Families Act" (PL 113-183) highlighted CA's progressive approach to sexually exploited youth. CA established policy in 2010 to address safety concerns, protect sexually exploited youth, and provide services and treatment. CA's [policy 4550, Children Missing from Care](#), requires a debriefing interview with the youth when he or she returns to care to evaluate health and safety concerns and develop a run prevention plan.

In October, 2014, policy and procedures were developed and implemented statewide to improve infant safety, including implementation of the Period of Purple Crying (PPC) program, Infant Safe Sleep and increased emphasis on the Plan of Safe Care. The Alliance for Child Welfare Excellence, in conjunction with CA, developed two training modules for Infant Safety and Care; a four hour eLearning to be completed prior to the six hour classroom training. The classroom training is offered at several sites throughout the state.

In 2014, the practice area of addressing safe sleep for families with infants was added to the Central Case Review.

Central Case Review question: *When there were concerns regarding infant safe sleep, there was a discussion with the parent/guardian regarding how to create a safe sleep environment and the sleep environment was made safe.*

2013 State	2014 State	Region 1 North	Region 1 South	Region 2 North	Region 2 South	Region 3 North	Region 3 South
Not measured	47% (37 of 79)	33% (4 of 12)	33% (1 of 3)	62% (8 of 13)	31% (4 of 13)	33% (4 of 12)	62% (16 of 26)

Data Source: CA Central Case Review

The data from 2014 is considered baseline as the updated policies and practices had not rolled out statewide during the full period under review.

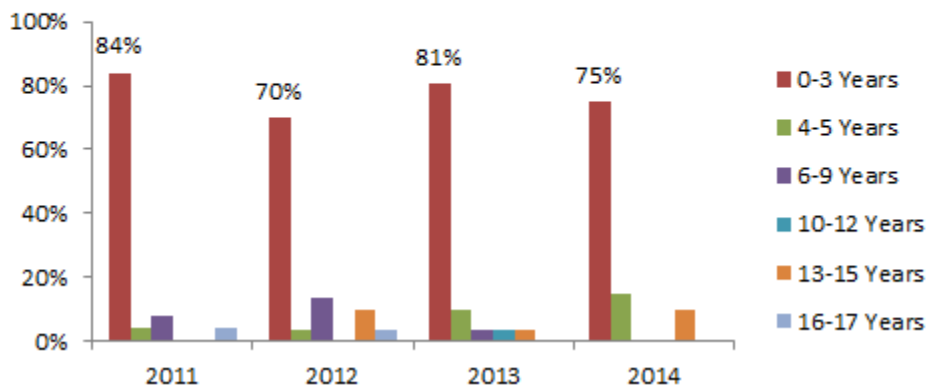
Historical targeted case reviews focused on the CSF revealed challenges with achieving an accurate analysis to determine whether an in-home or out-of-home safety plan was needed; gathering adequate information to make fully informed assessments; expanding analysis beyond an incident focused CPS investigation; application of the safety threats; and development of effective safety plans. The same reviews revealed an improvement over time for all program areas in safety plans that controlled safety threats.

In August 2014, a CSF workgroup was established that focused on providing field staff across the state with refresher training around the CSF with a focus on child safety and risk assessment, comprehensive family assessment, and safety and case planning. The objectives of the CSF workgroup were to review current CSF tools and guides to refine, clarify, and ensure guides are congruent with online tools; to assess the current CSF training, make suggestions for training changes, supplement and implement the training across the state; to include a Quality Assurance process around the CSF as needed; and to provide coaching and consultation to staff on actual cases using the CSF. Recommendations from the CSF workgroup are being incorporated into a statewide process to streamline work across all programs.

In February 2015, a targeted case review was conducted for the CPS FAR cases. The review found areas of strength and challenges related to the CSF, but overall, when compared with the data from the Central Case Review, the CPS FAR cases scored higher than the state average for cases from all program areas in the majority of the safety domains. Identified areas of improvement for CPS FAR were consistent with identified areas of improvement in investigations and include: gathering sufficient information related to assessing safety; completing comprehensive initial-face-to-face interviews with children; collateral contacts; and assessing all individuals in the home.

Child Fatalities and Near Fatalities

Child Fatalities & Near Fatalities with Allegations or Suspicion of Child Abuse and/or Neglect by Age Group
CA Fatality/Near-Fatality Review Log
2011 - 2014



The Critical Incident Case Review unit reviews child fatalities and near-fatalities attributed to child abuse or neglect across Washington state for incidents involving victims who had received services from CA within the previous 12 months. Fatality and near-fatality review committees are comprised of community professionals who are experts in fields such as: law enforcement; pediatrics; child advocacy; parent education; mental health; chemical dependency; domestic violence; Indian child welfare; and infant safe sleep.

Children under age three continue to be the most vulnerable to serious injury or death from abuse. In FY 2014, 90% of children who died or suffered near fatal injuries from abuse or neglect were five years old and younger. Eighty-five percent of child fatalities and near fatalities occurred while the child's case was open. Sudden Infant Death Syndrome / Sudden Unexplained Infant Death was the most common cause of death for infants and toddlers age birth to three and was the most common cause of death resulting from child maltreatment. Often, co-sleeping or bed sharing with a parent was a contributing factor in these child fatalities.

CA's efforts to reduce child fatalities in CY 2014 include the following:

- Lessons Learned training was revised and rolled out across the state in 2014. This training focuses on lessons learned from cases involving child fatalities and near fatalities. Whenever possible this training is presented to small work units of 10 to 15 staff. The focus is on small groups to encourage active participation by the staff involved.
- New policy was issued in 2014 to help reduce the risk of injury and death for children birth to one year old. This new policy affects all staff who work with families with newborns. The policy requires case workers to complete a Plan of Safe Care for substance affected newborns. Case workers must verify if parents and caregivers have received the Period of Purple Crying booklet and DVD. Caseworkers must complete a Safe Sleep assessment for families with children less than 12 months of age and the worker must engage the parent or caregiver in the creation of a safe sleep environment if one does not exist.
- Policy updated in 2014 and 2015 targets the most vulnerable child populations 0 – 5 years old. An intake must screen in for CPS investigation if it meets the following criteria:

- Allegations regarding a child (birth to 5 years old) reported by a licensed physician or medical professional on "the physician's behalf", that meets the legal definition of child abuse and neglect or
- A non-mobile infant (birth to 12 months) with bruises, regardless of the explanation for how the bruises occurred.
- All intakes alleging physical abuse of children ages 0-3 must be screened for a 24 hour investigation.

CA uses the following sources of information relating to child maltreatment fatalities and reports this data to NCANDS:

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

Assessment of Safety Outcomes

Strengths

- Timely face-to-face visits with alleged victims of child abuse and neglect for both emergent and non-emergent intakes.
- CA met the Washington PIP performance targets for services to family to protect child(ren) in the home and prevent removal or re-entry into foster care and Risk Assessment and Safety Management.

Concerns

- Provision of services to target safety threats is stronger for children placed in out-of-home care than for in-home cases.
- Inconsistent utilization of the Structured Decision Making (SDM)[®] Risk Assessment tool which guides decision making.
- Challenges in gathering adequate information to make fully informed assessments, expanding analysis beyond an incident focused CPS investigation, application of the safety threats, and development of effective safety plans across the life of a case.

Areas of focus for 2015 - 2016

- Continued implementation of CPS FAR in remaining offices assuming adequate state funding for the 2015-17 biennium. However, given that the legislature has not yet passed a biennial budget, CA has "paused" implementation of CPS FAR pathway until the budget passing.
- Strengthen understanding and utilization of the SDM[®] Risk Assessment tool.
- CSF targeted case reviews or other assessments to identify areas of strength, improvement and determine the impact of CSF changes and updates.

- Strengthen CA workers' skill in assessing and addressing safety threats and risks across all programs.
- Strengthen resources and skills to address safety threats and risks for children ages birth to three.
- Improve data reports to provide summary and detail level data that will include age, race/ethnicity, geographic location, and other critical information.
- Improve use of tools and clinical assessment to determine appropriate services for children and families.
- Strengthen Missing from Care policy related to debriefing interviews of youth returning from a run to identify youth who are at risk or are sexually exploited and to identify appropriate services.

Permanency Outcomes

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

Item 4: Placement Stability

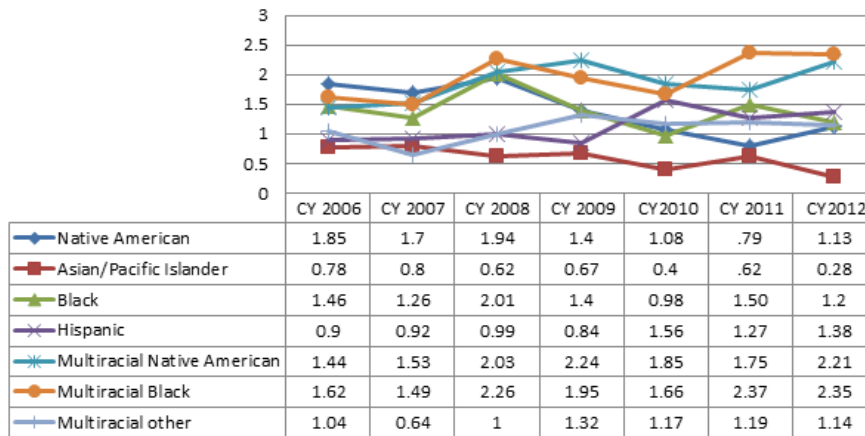
Placement Stability: Percent of Children with 2 or fewer placement settings					
Time in Care	Federal Standard	Washington's Performance			
		FFY 2011	FFY 2012	FFY 2013	FFY 2014*
Less than 12 Months	86.0%	83.2%	84.8%	82.4%	80.9%
12 to 24 Months	65.4%	67.5%	67.7%	68.0%	66.5%
24 Months or more	41.8%	37.4%	39.8%	41.1%	42.3%

Data Source: FFY2013 Data Profile

*Data Source: State generated FFY2014 data profile based on federal syntax. CFSR Round 2 indicator.

CA performance on the CFSR Round 3 Placement Stability data indicator is 4.63 moves / 1000 days in care; above the national standard of 4.12 moves.

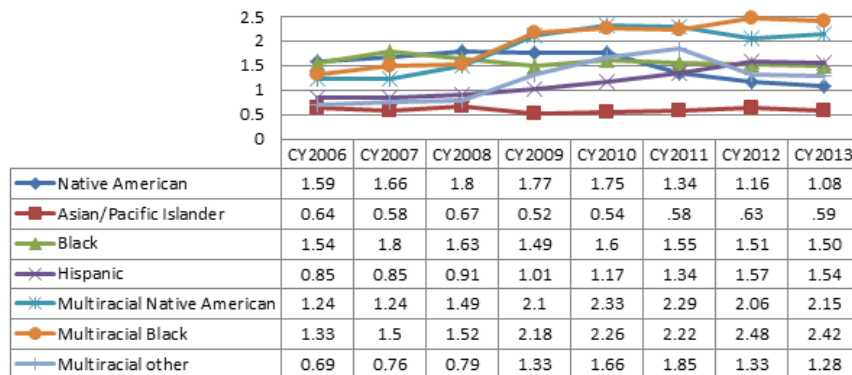
*Figure 8. DIAI: Children Moved twice or more during first 12 months of Placement



Source: FamLink Data Warehouse for Annual Disproportionality Reporting

*For children entering care during the reporting year, the measure identifies children with 2 or more moves during the first 12 months of placement and calculates the DIAI for these children.

*Figure 10. DIAI: Ongoing (In)stability: Children In Long-term Care who Moved Within Last 12 Months



Source: FamLink Data Warehouse for Annual Disproportionality Reporting

*For total children in care during the reporting year, the measure identifies children in long-term who moved within the last 12 months, and calculates the DIAI for those children.

Children of color experience greater placement instability than white children. CA is continuing to expand its data reporting capabilities at both the summary and detail levels to more consistently include race and ethnicity. This expansion will allow for improvement strategies that can be tailored to the population of families served by a local area. Including data that reflects the experience of overrepresented populations in the development and assessment of strategies to improve practice is essential to improving outcomes for all children and families.

Limited placement resources for initial or emergent placements and moves to place children with relatives or siblings impact placement stability outcomes. CA continues to involve foster parents and relative caregivers in Family Team Decision Making meetings to strengthen consistency and participation in the placement decisions of children in care. Practice improvement for Family Team Decision Making meetings has included a focus on their use to stabilize current placements rather than solely for placement moves. This continued proactive approach will help to improve placement stability.

Quality assurance efforts related to this area of practice include monthly reviews for provision of the Child Information and Placement Referral form for both new placements and placement changes. The Child Information and Placement Referral form contains information regarding the child’s behavior, medical, developmental and educational needs. In March, 2015, 912 placements were reviewed and caregivers were provided the Child Information and Placement Referral form within the required timeframes 94% of the time. CA also reports performance related to the provision of the Child Information and Placement Referral form semi-annually in response to the Braam Revised Settlement and Exit Agreement.

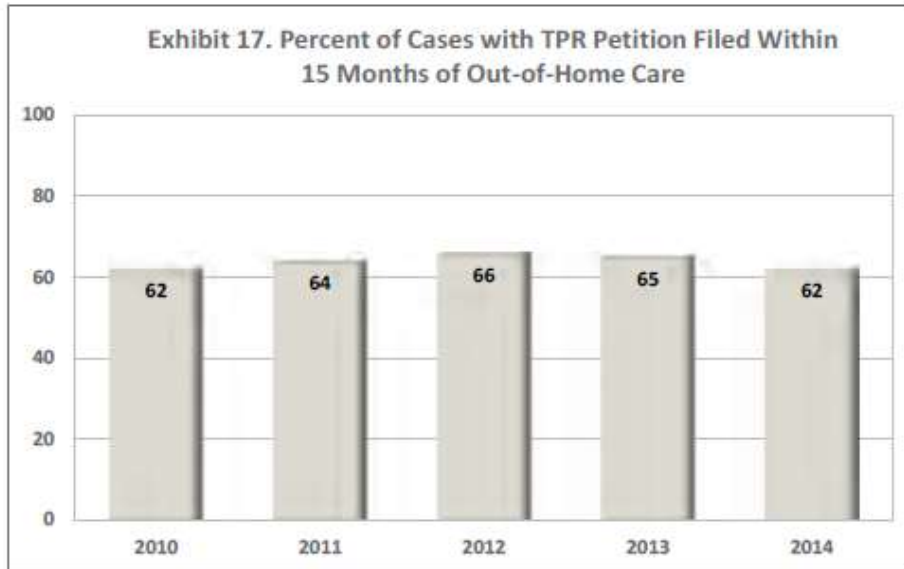
Item 5: Establishment of an appropriate permanency goal for the child in a timely manner

Central Case Review Question	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Q1: <i>Were all permanency goals appropriate to the child’s Individualized needs, and were they established in a timely manner?</i>	95% (253 cases)	90% (268 cases)	97% (304 cases)

Data Source: CA Central Case Review

Central Case Review Question	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Q2: <i>Was a petition to terminate parental rights filed if the child was in out-of-home placement for 15 of the most recent 22 months, or compelling reasons documented in the current Court Report?</i>	78% (120 cases)	69% (124 cases)	77% (102 cases)

Data Source: CA Central Case Review



Data Source: *Dependent Children in Washington: Case Timeliness and Outcomes 2014 Annual Report*

Timely filing of termination petitions increased in 2014 as reported through the Central Case Review while the data available from the Administrative Office of the Courts (AOC) shows that only 62% of termination petitions were filed timely. Discrepancies in the data are related to the different sources and samples. Case review included a random sample of cases in the reviewed offices and the AOC data is from administrative data entered by courts statewide. This measure is a complex one involving CA staff and other partners in the legal system. Timely filing continues to be an area for practice improvement and it is anticipated there will be improvement as CA focuses on improving the quality and quantity of shared planning meetings, increased training on permanency and concurrent planning and CQI activities with court partners.

Item 6: Achieving Reunification, guardianship, adoption or Another Planned Permanent Living Arrangement

Measure	FFY 2011	FFY 2012	FFY 2013	FFY 2014*
Percentage of exits to reunification in less than 12 months	70.4%	64.0%	64.4%	68.0%
Median length of stay	5.1 Months	8.3 Months	7.8 Months	6.5 months
Percentage of all children entering foster care for the first time and reunified in less than 12 months	31.7%	21.2%	23.8%	28.5%

Data Source: *FFY2013 Data Profile*

**Data Source: *State generated FFY2014 data profile based on federal syntax. CFSR Round 2 indicator.*

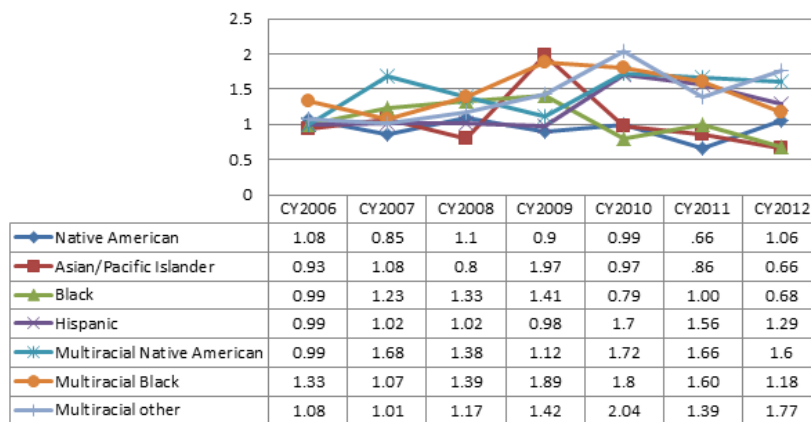
CFSR Round 3 Data Indicator	National Standard	Washington Performance*
Permanency in 12 months for children entering foster care	40.5%	32.3%
Permanency in 12 months for children in care 12-23 months	43.6%	42.6%
Permanency in 12 months for children in care 24 months or more	30.3%	37.3%

*Data source: *CFSR Round 3 Statewide Data Indicators – Workbook May 26, 2015 based on data submissions as of July 10, 2014*

Central Case Review Question	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Q: If the primary permanency goal was reunification, were actions taken to achieve the goal in a timely manner?	87% 71 cases	83% 143 cases	87% 151 cases	90% 150 cases
Q: If the primary permanency goal was third party custody or guardianship, were actions taken to achieve the goal in a timely manner?	29% 17 cases	35% 23 cases	73% 33 cases	77% 24 cases

Data Source: CA Central Case Review

*Figure 9. DIAI: Children Reunified Within 12 Months of Placement



Source: FamLink Data Warehouse for Annual Disproportionality Reporting

*For children entering care during the reporting year, the measure identifies children reunified within 12 months of placement and calculates the DIAI for these children.

Washington has continued to show improvements to achieve timely permanency outcomes of reunification, guardianship, and third party custody as measured by the Central Case Review. The outcome data for reunification from the case review differs from the Data Profile in that the timeliness measure under the case review takes into account case specific circumstances and does not limit the time frame to 12 months. Timely exits to reunification will be an area of focus in the coming years.

Over the last year CA evaluated the use of permanency roundtables and decided to focus permanency efforts on improving and strengthening the use of Shared Planning Meetings early in and throughout the life of a case. CA field staff participated in a Lean A3 process across the state to address barriers to using Shared Planning Meetings and is actively engaged in the creation of statewide policy and procedures to ensure consistency in the use of these meetings. This event identified a need for a shared planning policy update; training for staff and community stakeholders; and an internal look at the processes in field offices that support an understanding of expectations and the value the meetings offer families statewide. CA believes there is a more active role for stakeholders in permanency work and an external CQI permanency workgroup has been established. This workgroup includes representatives from the following: Administrative Office of the Courts, Court Improvement Training Academy, Office of Public Defense, Attorney General’s Office, Court Administrators, Office of Civil Legal Aid, Casey Family Programs, tribal representatives, and the CA Disproportionality lead.

It is unknown at this time what impact the implementation of CPS FAR will have on lengths of stay and timely reunifications. As fewer children enter care and those that do enter represent children and

families with more complex issues, it is possible that the median length of stay or time to reunification could increase. Tri-west will be looking at placement rates as part of their independent evaluation of CPS FAR. CA intends to launch CPS FAR in the remaining 15 offices once state funding is available.

Timeliness for achieving permanent outcomes other than reunification or adoption improved from 2013 to 2014. There are currently 174 subsidized relative guardianships (R-GAP) statewide. The number of completed R-GAP guardianships has increased yearly since implementation in 2010. Increased understanding of permanency options and the process to finalize them will support improved timely permanency outcomes through guardianship. R-GAP policy was updated in January, 2015 in response to federal legislation passed in 2014 that allows for successor guardians to be named and to receive R-GAP subsidy.

Washington state does not discharge youth from foster care to relatives without the legal structure of adoption, 3rd party custody, or guardianship.

- **Timeliness of Adoptions of Children Discharged from Foster Care**

Measure	FFY 2011	FFY 2012	FFY 2013	FFY 2014*
Percentage of exits to adoption in less than 24 months	29.3%	38.2%	30.7%	29.3
Median length of stay	31.5 Months	27.5 Months	28.7 Months	29.4 months

Data Source: FFY2013 Data Profile

*Data Source: State generated FFY2014 data profile based on federal syntax. CFSR Round 2 indicator.

- **Progress Toward Adoption for Children in Foster Care for 17 Months or Longer**

Measure	FFY 2011	FFY 2012	FFY 2013	FFY 2014*
Percentage of children in care 17 months or more, that are adopted at the end of the year	31.4%	26.7%	28.3%	29.4%
Percentage of children in care 17 months or more achieving legal freedom within 6 months	14.6%	14.9%	15.9%	18.1

Data Source: FFY2013 Data Profile

*Data Source: State generated FFY2014 data profile based on federal syntax. CFSR Round 2 indicator.

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

Measure	FFY 2011	FFY 2012	FFY 2013	FFY 2014*
Of all children who became legally free for adoption in the 12 month period prior to the year shown, what percent was discharged from foster care to a finalized adoption in less than 12 months of becoming legally free?	64.7%	78.7%	66.8%	65.8%

Data Source: FFY2013 Data Profile

*Data Source: State generated FFY2014 data profile based on federal syntax. CFSR Round 2 indicator.

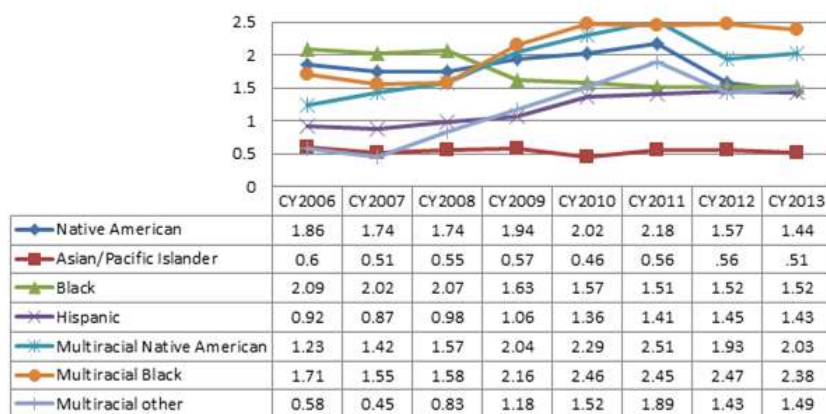
Central Case Review Question	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Q: If the primary goal was adoption, were actions taken to achieve the goal in a timely manner?	68%	70%	71%	76%

Data source: CA Central Case Review

Timely completion of adoptions continues to be an area of focus for Washington state. Statewide adoption training was conducted in FY 2014 to standardize the adoption process, identify barriers to adoption and facilitate solutions.

Adoption staff reports an increase in appeals of orders of termination of parental rights, which delays finalization of adoptions. It is anticipated that these measures will continue to improve as CA improves performance with timely filing of petitions to terminate parental rights, improved shared planning processes, and identification of concurrent permanent plans.

*Figure 6. DIAI: Children In Care for more than 2 Years



Source: FamLink Data Warehouse for Annual Disproportionality Reporting

* For total children in care during the reporting year, the measure identifies children in care more than 2 years and calculates the DIAI for those children.

Children of color more likely than white children to remain in care more than two years. This disparity is highlighted in CA's strategic plan and addressing disproportionate representation of children of color within the child welfare system will continue to be an area of focus across all areas of practice.

CA implemented the Unified Home Study in September 2012. The number of adoptions completed has increased since the Unified Home Study implementation. While the Unified Home Study standardizes expectations for all caregivers and streamlines the home study process, an increase in the time it takes to complete adoptive home studies was an unintended consequence and has impacted timely permanence. Department of Licensed Resources (DLR) is aware of the delays and is actively working to improve the completion times.

Over the past few years there has been a strong focus on implementation of the CSF within CPS investigations. CA has identified the need for ongoing CSF training and is in the process of developing strategies to strengthen the integration of the CSF into permanency work with a focus on how the framework can positively impact timely permanency.

Measure	FFY 2011	FFY 2012	FFY 2013	FFY 2014*
Percentage of children in care for 24 months or more exiting to permanency prior to their 18 th birthday	40.5%	35.4%	39.1%	39.5%
Percentage of children with parental rights terminated exiting to permanency	95.7%	96.6%	97.2%	97.4%

Data Source: FFY2013 Data Profile

*Data Source: State generated FFY2014 data profile based on federal syntax. CFSR Round 2 indicator.

Measure	FFY 2011	FFY 2012	FFY 2013	FFY 2014*
Percentage of children who age out of care without a permanent plan	54.1%	51.6%	52.2%	51.4%

Data Source: FFY2013 Data Profile

*Data Source: State generated FFY2014 data profile based on federal syntax. CFSR Round 2 indicator.

Central Case Review Question	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Q: Were timely efforts made to achieve the permanency goal, or a concurrent goal of long-term foster care, or a plan for independent living for youth 14 years and older?	100%	89%	93%	100%

Data source: CA Central Case Review

In response to federal legislation, state law was enacted during the 2015 legislative session prohibiting “Another Planned Permanent Living Arrangement” as a permanency goal for children under age 16, unless the court finds compelling reasons why it is in the child’s best interest to not pursue return home, adoption, guardianship or relative placement. CA will focus on youth at the age of 14 in developing transition plans that support the youths’ desires and goals for future planning. This also includes the youth’s ability to invite two supports they choose to their shared planning meetings. This new federal legislation will be implemented in the policy rollout in July 2015.

There are currently over 300 youth participating in the Extended Foster Care (EFC) Program for youth who are still in foster care when they turn 18. EFC supports include transitional living, supervised independent living, and ongoing foster care placements. The intent of EFC is to continue to support permanency and lifelong connections and successfully transition youth to adulthood.

Central Case Review Question	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Q: Were services offered to successfully transition the youth from out-of-home care to adulthood in a developmentally appropriate way for youth 15 years and older?	72% 25 cases	65% 26 cases	84% 27 cases	82% 22 cases

Data source: CA Central Case Review

Independent Living (IL) providers are able to enter information into FamLink regarding activities and youth participation. FamLink is Washington’s Statewide Automated Child Welfare System (SACWIS). FamLink replaced the state’s previous legacy system, CAMIS, in 2009.

FamLink provides information on location, goals, legal status, and demographics for each child in foster care. This application supports consistent social work and business practices statewide to assure that children and their families will receive the same level of quality services in every community in Washington. The statewide IL program manager has been working with providers to support timely, complete documentation of activities. An area for improvement is provision of skills and services to youth who decline to participate in structured IL services or for whom services are not available in their area. CA will be conducting targeted case reviews and after reviewing the findings will develop strategies to address the issues.

Data reported from Independent Living Providers

Youth Services by *Contracted Year				
	2011 Statewide	2012 Statewide	2013 Statewide	2014 Statewide
Number Children That Received Independent Living Services	970	1,198	1,334	921
Number Children That Received Transitional Living Services	1,333	1,464	1,368	1,421
Total number of youth	2,303	2,662	2,702	2,342

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

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

Item 7: Placement with siblings

Washington State continues its commitment to place siblings together in out-of-home care. Ongoing training to caregivers and CA workers and efforts in recruitment, retention and placement services coordination increase the awareness of the importance of placing siblings together and maintaining sibling relationships.

Quality assurance activities continue regarding sibling placement and in looking at data from December, 2014, performance for sibling placement was 81%.

Item 8: Visiting with siblings in foster care

	FY 2011 Statewide	FY 2012 Statewide	FY 2013 Statewide	FY 2014 Statewide
Percent of Siblings placed apart who had 2 or more monthly visits/contacts	50%	32%	79%	96%

Data source: FY 2011 – FY 2014 Children's Administration Administrative Data; FY 2012 – FY2014 Braam Revised Settlement and Exit Report Targeted Case Review Results

The number of siblings placed apart having twice monthly visits or contact continues to be an area of focus for CA. The increase in performance is a result of efforts which include: training CA workers in the importance of sibling connections; the creation of a sibling visit documentation template to be used in FamLink; and ongoing monthly quality assurance case reviews.

Item 9: Preserving Connections

Central Case Review Questions	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY2014 Statewide Results
Q: Was inquiry made with both sides of the family to discover if the child had American Indian/Alaska Native/Canadian Indian status?	85% 319 cases	72% 493 cases	77% 587 cases	78% 635 cases
Q: If the parent or relative indicated American Indian/Alaska Native/Canadian Indian status, was the Tribe(s) or the Bureau of Indian Affairs (BIA) contacted to determine the child's Indian status?	73% 97 cases	75% 133 cases	73% 183 cases	76% 163 cases

Central Case Review Questions	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY2014 Statewide Results
Q: <i>If the Tribe determined the child to be American Indian/Alaska Native/Canadian Indian, were there ongoing active efforts to include the Tribe(s) in case planning?</i>	82% 28 cases	84% 44 cases	77% 60 cases	86% 50 Cases
Q: <i>If this was a Limited English Proficiency (LEP) or American Sign Language (ASL) family, were translation and/or interpreter services provided?</i>	55% 20 cases	29% 42 cases	55% 40 cases	43% 37 cases

Data source: CA Central Case Review

Proximity of foster care

Percentage of children experiencing a change in schools at the time of initial out-of-home placement	2010 (SY2008/09)	2011 (SY2009/10)	2012 (SY2010/11)	2013 (SY2011/12)	2014 (SY2012/13)
OSPI and FamLink Information	17.3%	15.1%	11.7%	9.4%	10.2%

Data Source: OSPI & FamLink

Washington state has continued its commitment to maintaining school stability when youth first enter care and throughout the school year while in out-of-home care. Performance has increased due to ongoing training and quality assurance. Efforts have been made to increase the awareness of the importance of maintaining school placements through training for CA workers and collaborative work with OSPI, individual school districts and the judicial system.

Item 10: Relative Placements

Percentage of youth in relative placement	2011 Statewide	2012 Statewide	2013 Statewide	2014 Statewide
FamLink (State Fiscal Year) July 31st of the year	38.1%	39.5%	40.4%	41.3%

Data source: CA FamLink, point in time data

Washington continues to emphasize, support and identify relatives and address barriers to relative placement. Staff that search for relatives and conduct research into Native American status for children and families have been centralized to support more thorough, effective and consistent search processes. CA's focus on strengthening shared planning meetings to support comprehensive planning will positively impact permanency outcomes. CA is currently working on updating the data reports and accuracy and quality of documentation for meetings which will improve access to data regarding meeting participation and decisions. CA also continues to focus on the integration of the CSF across all programs. The continued integration and understanding of the CSF will support appropriate identification of safety threats and steps needed to mitigate the threats which will continue to improve placement stability following reunification.

In 2014, the Alliance for Child Welfare Excellence developed a three hour course devoted to the Comprehensive Family Evaluation and Court Report. This course is available at various times and

locations throughout the state on an on-going basis and supports ongoing practice improvement in assessment and information gathering.

Item 11: Maintaining relationships between the child in out-of-home care and his or her parents

CA recognizes the importance of parents participating in activities with and about their children in addition to scheduled visitation. This includes participation in medical, educational and extracurricular activities when it is safe and appropriate to do so. Parents have opportunities to participate in therapy with children as recommended by the therapeutic provider and engage in EBPs such as Parent-Child Interaction Therapy (PCIT), and Triple P (Positive Parenting Program) as a part of visitation.

Several CA policies, practice guides and training embed guidance to staff on the importance of parents participating in activities in addition to the structure of scheduled visitation to maintain the relationship between the child in out-of-home care and his or her parents:

- The Social Worker Practice Guide Visits Between Parent(s)-Child(ren) and Sibling encourages workers to supplement visits by encouraging parents to participate in medical appointments and counseling appointments and to supplement visits with letters, telephone calls and email.
- The Social Worker Guide to Education encourages workers to have the parent participate in education planning and to have parents attend school meetings, IPE meeting and parent/teacher conferences.
- The “[Fathers Matter](#)” site for CA staff includes resources to engage fathers.
- “Parent Mentoring Program” is a structured program utilizing specifically selected and trained foster parents to assist parents toward reunification.
- [1710 Shared Planning Policy](#)
- [43022 Outside Communication for Children in Out-of-Home Care](#)
- Caregiver Core Training
- Parent-Child Visitation Training

There is currently no performance measurement related to these activities. The case review tool will be updated for calendar year 2016 and measurement of these activities will be incorporated. Strategies regarding practice will be developed as needed following further assessment of practice.

Assessment of Permanency Outcomes

Strengths

- Washington has a low rate of re-entry into care.
- Caregivers are provided information regarding children in their care.
- Timeliness of adoptions and achieving legal freedom within 6 months for children in care 17 months or more, as well as finalization in less than 12 months from becoming legally free are all strengths.
- Siblings placed together and siblings having 2 or more monthly visits and contacts continue to improve.
- Over 40% of children in out-of-home care are placed with relatives.
- In 2014, CA established an internal statewide CFWS/Permanency Leads team that meets monthly to review permanency data, innovations in the field, policy updates and challenges.
- In 2015, CA established an external Permanency CQI team composed of CA, Administrative Office of the Courts, Office of Public Defense, Attorney General’s Office, Tribes, CASA, Office of Civil Legal Aid, Racial Disproportionality Advisory Committee and Casey Family Program.

Concerns

- Timely filing of termination petitions and identification of appropriate compelling reasons to not file continues to be an area of challenge.
- Timely permanency across all plans needs to remain an area of focus.
- Children of color continue to be more likely than white children to remain in care more than two years.

Areas of focus for 2015-2016

- Increase timely filing of termination petitions, identification of compelling reasons.
- Improve data reports to provide summary and detail level data that will include age, race, ethnicity, geographic location, and other critical information.
- Strengthen integration of CSF throughout the life of a case.
- Improve use of Shared Planning Meetings and documentation of these meetings.
- Continue improving CA worker's understanding and implementation of concurrent planning for all children in out-of-home care.

Well-Being Outcomes

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

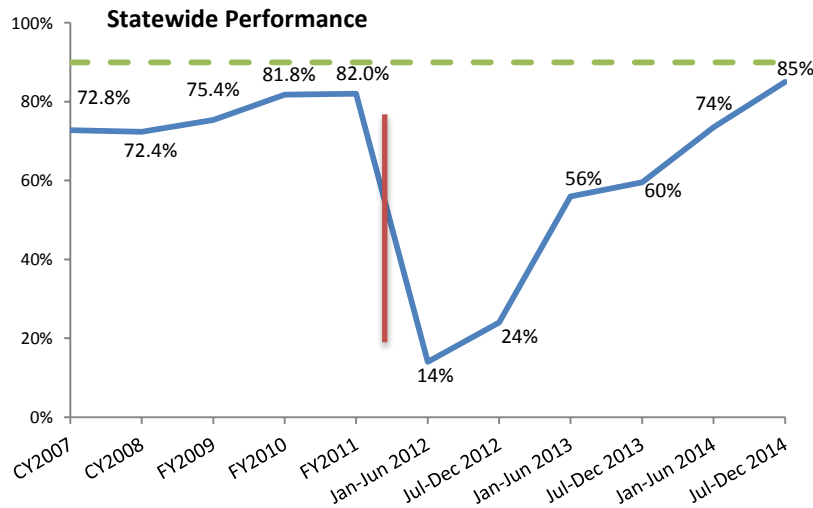
Item 12: Needs and services of child, parents and foster parents

<i>Central Case Review Questions</i>	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
<p><i>Q: Were actions taken to assess the mother’s needs and offer or provide appropriate services to address her needs?</i></p> <p><i>Q: Were actions taken to assess the father’s needs and offer or provide appropriate services to address his needs?</i></p>	<p>Overall average: 79%</p> <p>Mothers: 86%</p> <p>Fathers: 71%</p>	<p>Overall average: 68%</p> <p>Mothers: 75%</p> <p>Fathers: 60%</p>	<p>Overall average: 68%</p> <p>Mothers: 74%</p> <p>Fathers: 59%</p>	<p>Overall average: 76%</p> <p>Mothers: 82%</p> <p>Fathers: 68%</p>

Data source: CA Central Case Review

CA continues to stress the importance of assessing needs and offering services to both the mothers and the fathers. This item as measured in the case review includes sufficient efforts to locate parents. The lack of efforts to locate parents accounts for the cases that were not compliant; when the parents were located the needs were assessed and appropriate services were offered. The distinction between efforts to locate and assessment of needs is not clear from prior annual reports. Locating and engaging a parent is critical for assessing their needs. As with other measures, this data has been available in summary form. Additional analysis to assess for differences in location of parents and assessment of needs based upon race and ethnicity will need to be incorporated into future planning and strategy development.

Foster Parent Information



Data source: July-December 2014 Braam Semi-Annual Performance Report, Caregiver Information

Licensed and unlicensed caregivers receive information about children in their care in a number of ways including: the Child Placement Information and Referral form which is provided at or around the time of placement; participation in staffings; and monthly caseworker visits with children and caregivers. This

information is critical to supporting foster parents and determining the services needed to support the child in placement and the caregivers' ability to meet the needs of that child.

Provision of information to caregivers has been measured for the Braam Settlement and Exit Agreement since 2004. In 2011, the measurement shifted from a survey to the provision of the Child Placement Information and Referral form as measured through a targeted case review. Since the first review in 2012, performance has continued to improve, reflecting increased understanding of the need to provide the form in a timely way and accurately document that it was provided.

Item 13: Child and family involvement in case planning

Central Case Review Questions	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Q: Were efforts made to involve the mother in the case planning process on an ongoing basis?	Overall average: 76% Mothers: 83%	Overall average: 67% Mothers: 75%	Overall average: 68% Mothers: 73%	Overall average: 72% Mothers: 78%
Q: Were efforts made to involve the father in the case planning process on an ongoing basis?	Fathers: 66%	Fathers: 49% Child: 74%	Fathers: 55% Child: 76%	Fathers: 59% Child: 79%
*Q: Were efforts made to involve the child in the case planning process on an ongoing basis?				

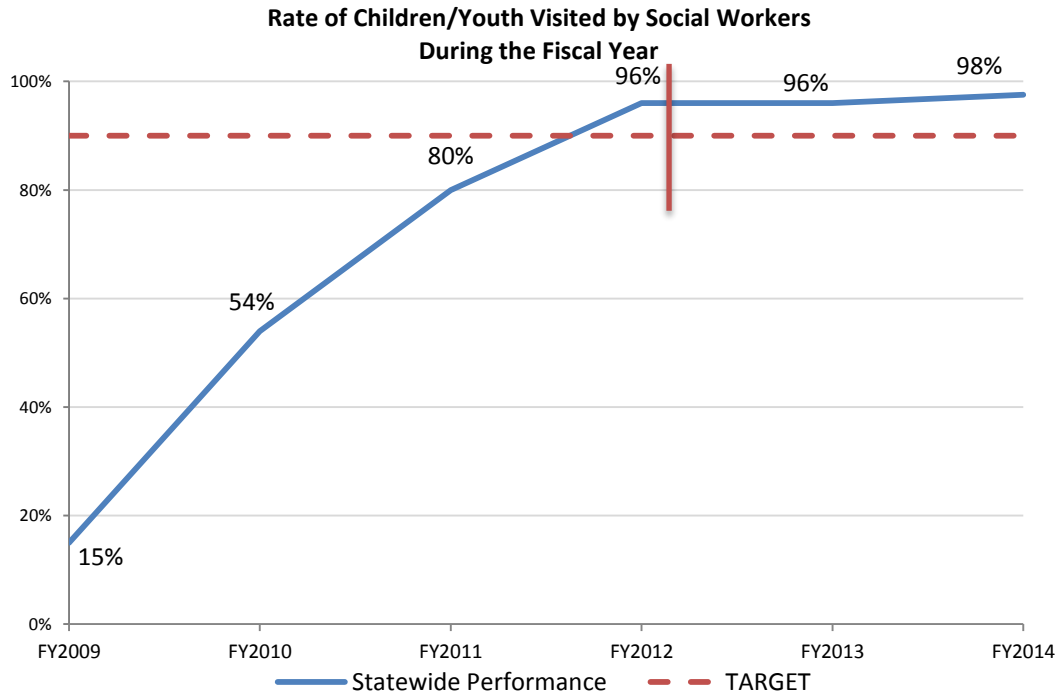
Data Source: Children's Administration Central Case Review

Engaging parents in the development of the family's case plan supports improved child safety and achievement of timely permanency. As with other measures, identification and location of parents is a critical first step. CA continues to be more involved with mothers than with fathers. Engagement with both parents continues to be a critical area for focus and improvement for CA. "Guidelines for Reasonable Efforts to Locate Children and/or Parents" was updated in December 2014 to include language directed at CFWS workers and the need to make continued efforts throughout the dependency to locate parent(s).

To support improved engagement, the "Requirements for Monthly Social Worker Visits with Parents" desk guide for the caseworker to use during the case planning process with parents was updated spring 2015.

CA continues to explore additional strategies to improve father engagement while continuing its "Fathers Matter" outreach program to help engage fathers in the lives of their children involved with the child welfare system. While the case review captures the qualitative nature of involvement in case planning, there are efforts to develop FamLink reports that reflect visits with parents and participation in shared planning. These reports will help provide additional focus for areas of improvement. Review of the central case review data shows that performance for this item is impacted by a lack of ongoing efforts to locate a parent.

Item 14: Social Worker visits with child



Data Source: FamLink run date 4/28/15

*FY2009 – 2011 measured the percentage of children who received a visit from an acceptable worker in every prior full calendar month they were in care. This measure requires a visit in each month of the 12 month reporting period.

Monthly CA worker visits with children are recognized as critical for assessing child safety and well-being and supporting permanency. Monthly reports have been enhanced allowing a real time look at monthly visit status to support completion of the visits in a timely way. These reports are available at summary and detail levels. In addition, the supervisory review tool allows a supervisor to see when the last monthly visit occurred and includes hyperlinks to the actual case note to allow for a review of content.

Item 15: Social worker visits with parents

Central Case Review Question

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

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

	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Social worker visits with Mother	38% 335 cases	44% 368 cases	39% 417 cases
Quality of visits with Mother	81% 297 cases	84% 319 cases	86% 360 cases
Social worker visits with Father	22% 257 cases	27% 285 cases	25% 300 cases
Quality of visits with Father	77% 185 cases	82% 198 cases	84% 218 cases

Data source: CA Central Case Review

This measure, for purposes of case reviews, required monthly visits every month with each parent per CA policy. If one month during the six month period was missed, the case was considered non-compliant. When monthly visits with parents were documented, the quality of those visits was strong. Data for monthly visits with parents can be extracted from FamLink, but the report requires ongoing validation. In addition, the process for documenting visits to ensure accurate reporting is a cumbersome one so it is not used consistently by field staff. CA continues to work on improving the reporting process for this measure.

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

Item 16: Educational needs of the child

<i>Central Case Review Question</i>	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
<i>Q: Were actions taken to assess the child's educational needs and offer appropriate services when needs were identified?</i>	91%	91%	95%	96%

Data Source: CA Central Case Review

Under the Braam Exit and Settlement Agreement, the status of educational planning is also measured. For this measurement, a targeted case review of 100 cases is completed every six months. The identified goal of the review is as follows: *Caseworkers will take the required steps to meet the educational needs of children in out-of-home care.* Performance has remained strong under both measures.

Child Health & Education Tracking (CHET) - Education Domain

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

FY 2011	FY 2012	FY 2013	FY 2014
93.0%	96%	93%	94%

Data source: CHET Statewide database

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

Item 17: Physical health of the child

<i>Central Case Review Question</i>	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
<i>Q: Were actions taken to assess the child's physical health needs and offer appropriate services?</i>	88%	72%	76%	67%

Data Source: CA Central Case Review

Efforts to improve performance include:

- All CA workers received an electronic message about the importance of health and safety visits. The message displayed automatically when workers logged into their computers.

- Reminders to foster parents/caregivers via the Caregiver Connection newsletter regarding the importance of addressing the physical health needs of children placed in their home.
- Stressing the importance of on-going and regular review of a child’s well-being with the successful bidder for the Apple Health Foster Care (AHFC) managed care plan. AHFC will have responsibility for communicating with CA workers and foster parents/caregivers to ensure access and coordination to meet the physical and mental health care needs of the child.
- Revisit effective strategies from previous years to examine applicability to current and upcoming reviews.

EPSDT within 30-days

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

FY 2011	FY 2012	FY 2013	FY 2014
93.0%	96%	95%	95%

Data source: CHET Statewide database

Annual EPSDT

The data below represents the percentage of children who received at least one EPSDT during a calendar year.**

CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
65.5%	66%	67.5%	72.7%

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

CA has strong processes in place to support case workers and caregivers in meeting the educational and physical health needs of children in care. Ongoing collaboration with medical providers and local school districts to meet the needs of individual children helps to achieve these outcomes. The education plan is created from information entered in FamLink by the CA worker and submitted as an attachment to the court report every six months. The education plan requires current information to be documented in FamLink. Continued efforts are needed to support accurate documentation of ongoing medical care. For the majority of cases that were determined non-compliant in the case reviews conducted for CY 2014, the annual well-child or dental check occurred, but was not documented in FamLink. Talking with caregivers and documenting the results of medical exams and the status of recommendations made by health care providers will support improved outcomes in this area.

Item 18: Mental/behavioral health of the child

Central Case Review Question	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
Q: Were actions taken to assess the child’s mental/behavioral health needs and offer appropriate services?	80%	81%	92%	87%

Data Source: CA Central Case Review

The decrease in performance is of concern to CA and efforts to improve this number will include:

- Reminders to CA workers about the importance of addressing mental health needs of the child at health and safety visits via “Practice Tips” pop-ups which display daily upon logon.
- Reminders to foster parents/caregivers via the Caregiver Connection newsletter regarding the importance of addressing the mental health needs of children placed in their home.
- Stressing the importance of on-going and regular review of a child’s well-being with the successful bidder for the Apple Health Foster Care (AHFC) managed care plan. AHFC will have responsibility for communicating with CA workers and foster parents/caregivers to ensure access and coordination to meet the physical and mental health care needs of the child.
- Increasing awareness of CA workers of to the results of the Ongoing Mental Health re-screening reports uploaded in FamLink in order to address the mental health needs of the child by making appropriate mental health referrals.
- Increasing awareness of the Central Case Review Team regarding the availability of data that reflects mental health screening and recommendations for services of children who re-screened every six months by the Ongoing Mental Health Screening program.

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

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

FY 2011	FY 2012	FY 2013	FY 2014
97.0%	98%	96%	98%

Data source: CHET Statewide database

CA continues to focus on the assessment and provision of services to meet the mental and behavioral health needs of children in care. CA collaborates with the DSHS Behavioral Health and Service Integration Administration (BHSIA) and DSHS Juvenile Justice and Rehabilitation Administration (JJRA) to help ensure that those youth with high levels of need receive the necessary services.

A new trauma tool was added to the suite of validated tools that the screeners utilize. Implemented in July 2014, the Screen for Childhood Anxiety and Related Emotional Disorders (SCARED) is administered to all 7 -17 year olds who stay care for 30 days or longer. In our early findings from data of July 2014 through December 2014, 30% of the children and youth are scoring in the clinical range for Anxiety and Post Traumatic Stress Disorder indicating to the social worker that a mental health referral is warranted.

Ongoing Mental Health Screening

In 2014, CA implemented an Ongoing Mental Health Screening (OMH) program. OMH uses the CHET mental health screening tools to re-screen children and youth every 6 months for mental health symptoms. Tools used in the re-screen are: ASQ-SE, PSC-17, and SCARED for children ages 3-17. Data is collected to monitor on-going needs and progress of children and youth who are in care. The re-screening process also identifies children and youth who may need mental/behavioral health services or need to have their current services re-evaluated.

Of all the children’ re-screened between July and December 2014, 28% had clinical indications for trauma related Anxiety or Post-Traumatic Stress Disorder. These additional screens provide the opportunity to understand the on-going mental health needs of children and youth in care. For those screening in the clinical range, recommendations for a referral to mental health for services is made.

Psychotropic Medication Review for 0 – 5 Year Olds

CA completed a psychotropic medications targeted case review for children age birth to five in April, 2015 for the purpose of: Identifying children ages birth to five in out-of-home care on psychotropic

medication; and determining if the identified children are engaged in psychosocial interventions in conjunction with medication treatment.

Case Review Sample: Children in out-of-home care between January 1, 2014 and June 30, 2014 prescribed any psychotropic medication.

Case Review Overview:

- There were 5,756 children birth to 5 in out-of-home care during the review period. Less than 1 % (81) of these children was prescribed psychotropic medications.
- Children with complex medical issues (chronic illness or medically fragile) who are prescribed psychotropic medications, were included in the care review population.
- All but one of the children in the case review who were prescribed psychotropic medications for mental health reasons also received medical follow-up or psychosocial intervention in conjunction with the medication treatment.
- Psychotropic medications administered to children birth to two were specifically prescribed to treat medical/physiological conditions not for mental health or behavioral health concerns.

Assessment of Well-Being Outcomes

Strengths

- CA provides information to caregivers regarding children in their care.
- Monthly health and safety visits with children in out-of-home care remains strong.
- Quality of contacts with parents is good.
- CA has strong processes in place to support meeting the education and physical health needs of children in out-of-home care.
- Interagency collaboration supports meeting the mental and behavioral health needs of children in out-of-home care.

Concerns

- Locating and engaging parents continue to be areas of improvement for CA. These activities are key components for accurately assessing needs and providing services.
- Engaging parents and children in the development of the case plan and shared planning processes continues to be an area of improvement.
- Engagement with fathers continues to be an area of focus.

2014 Summary of Progress Toward Goals and Objectives

Activity	Status
1. Based on the recommendations from the report, <i>An Education Success Strategy for Washington State's Youth in Care & Alumni</i> , CA will update the Social Worker Guide for Youth Transitioning from Care to include information on high school completion requirements, college eligibility requirements and options for post-secondary success.	Completed
2. Implement Quality Assurance activities for the Education Report to support staff in documenting education strategies, current educational status and efforts towards educational success.	Ongoing

Activity	Status
<p>3. Continue implementation of the Birth to Five Early Childhood Development framework, highlighting the importance and the consequences of not providing nurturing, secure attachments for children placed in out-of-home care. Activities include:</p> <ul style="list-style-type: none"> • Gather input from key staff in regions including Regional Administrators, FTDM Facilitators, Supervisors, Area Administrators, and Placement Coordinators. Make recommendations to management regarding policy and practice changes. • Provide extensive targeted and ongoing training for CA workers and caregivers through collaborations with the Alliance for Child Welfare Excellence, Casey Family Foundations, Department of Early Learning Department of Health and Thrive by Five. • Psychotropic medication case review of 0 – 5 year olds 	<p>Ongoing</p> <p>Completed November 2014</p> <p>Completed – Dec. 2014</p>
<p>4. Development of Request for Proposals (RFP) to create a managed care plan for dependent children and youth. Partnered with Health Care Authority, community physicians, DSHS administrations (Developmental Disabilities Administration, Aging and Long-Term Care Administration), and the Federation of State Employees.</p>	<p>Developed and completed in April 2015. Responses due in July 2015.</p>
<p>5. On-going Mental Health screening program developed and implemented to re-screen all children ages 3 – 17 who received a CHET screen from January 2014 forward. Children are re-screened every six months while they remain in care.</p>	<p>Implemented: July 2014 and continuing</p>

Areas of focus for 2015-2016

- Increase identification of and engagement with mothers and fathers
- Streamline the shared planning meeting continuum to improve shared planning processes and opportunities for engagement with children and families
- Improve data reports to provide summary and detail level data that will include age, race/ethnicity, geographic location, meeting participants, and other critical information.
- Strengthen engagement with fathers
- Implement a managed health care program for children and youth in out-of-home placement. The managed care plan will provide health and mental health care oversight and coordination.
- The Fostering Well-Being Care Coordination Unit receives a monthly list from the Health Care Authority of all children ages 0 – 5 who are prescribed a psychotropic medication. The children will receive care coordination until they turn six years of age.
- Implementation of an informed consent form for youth who are prescribed a psychotropic medication.

Systemic Factors

Information System

FamLink is Washington’s Statewide Automated Child Welfare System (SACWIS). FamLink provides information on location, goals, legal status, and demographics for each child in foster care. This application supports consistent social work and business practices statewide to assure that children and their families will receive the same level of quality services in every community in Washington.

Updates and Progress (FY 2015) – Statewide Information System

FY 2015 Activity	Description/Purpose	Status
Data System Enhancements and Accountability Tools		
Agile software Development	CA has implemented a new approach in software development by adopting an Agile methodology. Changing to an iterative and incremental development approach allows us to provide a more rapid and flexible response to change in order to support the legislative, policy, and practice driven changes in a timelier manner.	Implemented/ Ongoing
AFCARS Improvement Plan	WA continues to work toward completion of our AFCARS Improvement Plan. A number of corrections have already been accomplished, however due to numerous modifications in addition to our conversion of the extraction code from COBOL to SQL Stored Procedures, we have taken the approach to roll back to a slightly earlier version of our COBOL code and convert to a stored procedure using SQL before implementing other code and mapping changes. Taking this scaled, deliberate approach will ensure that we are able to carefully test each change individually, watching for and understanding any changes that may occur in the data that impacts outcomes. In addition a Federal data reporting matrix is being developed to map all logical data elements so that any FamLink enhancements can be proactively assessed against the matrix to accommodate or anticipate impacts to Federal reporting in the modification to the SACWIS.	Continues/ Ongoing
SACWIS Improvement Plan	Washington continues to work with the Children’s Bureau, ACF, on the development of our SACWIS Improvement Plan after our SAR review. In addition to a number of Change Requests identified in the plan, all items	Continues/ Ongoing

FY 2015 Activity	Description/Purpose	Status
	included in this APSR will also contribute to our ability to address changes needed for our SACWIS improvement.	
Infrastructure Upgrade – Hardware and Virtualization Software Upgrade	<p>Upgrade and refresh of the infrastructure platform that supports FamLink. These upgrades modernized the environment to a virtualized platform and upgraded all server operating systems and database servers (DBMS).</p> <p>The server design will virtualize application and database servers and upgrade software to SQL Server 2012, JBOSS 7.1.1 and Java JRE to 1.7. Once the design is fully implemented, the DTT service currently provided by CTS will be ended and DTT will be maintained from the CATS location in Lacey, Washington. This effort is being made to increase manageability, scalability and overall reduced cost to CA.</p> <p>Software updates include: Windows Server 2012, IE11, SQL2012 for Production and UAT, and COBOL Batch conversion to SQL Stored Procedures.</p>	Completed FY2015
End User Training	<p>Improvements in the creation and delivery of training materials to support statewide consistency.</p> <ul style="list-style-type: none"> • The Alliance – CA has contracted with the University of Washington to conduct user training including initial training to new Case workers, as well as, ongoing training for staff when new functionality is rolled or when the Quality Assurance or other state staff recognize a training need. • Online help – FamLink originally had online help incorporated into the application, however due to resource issues, the online help was not maintained. Efforts are underway to modify and update FamLink online help. FamLink Pro will have Online Help functionality to assist users in their day to 	Continues/ Ongoing

FY 2015 Activity	Description/Purpose	Status
	day work in the application.	
CPS Family Assessment Response (FAR) Implementation and System modifications to support Statewide Implementation.	Washington passed legislation implementing a differential response for CPS cases meeting defined criteria at intake. This new response, CPS FAR, began implementation in January 2014 and continues to be phased in statewide as offices become staffed and trained. CPS FAR has now been implemented in over half of the state. Due to the phased in approach, a number of system modifications have been identified to support the new practice. Using Agile methodologies in development, FamLink modifications have been made to enhance the system's ability to support this new practice and practice tools.	Complete
Case Plan and Court Report	The new CA court report was designed and developed using the Comprehensive Family Evaluation and case plan. This court report has now been implemented statewide.	Complete
State maintained system	<p>In October 2014, CA released our contracted Vendor, and now independently maintains and develops the FamLink system without Vendor support. Cost savings realized by releasing vendor services has allowed us to hire state staff necessary for continued independent maintenance and operations of the system.</p> <p>Children's Administration Technology Services (CATS) is now fully supporting all of CA's technology needs and requirements for new development, maintenance and operations of the SACWIS system. Cost savings from the release of the vendor staff has been appropriated to add necessary FTE's to the division to support CA's technology future independent of contracted/vendor staffing.</p>	Complete
Video Conferencing Equipment and Rooms Statewide	Enhancing statewide communication, collaboration, and participation. Video conferencing equipment and rooms have been set up on all CA offices throughout the state. This has been helpful in reducing travel needs/costs while supporting statewide participation in numerous	Complete

FY 2015 Activity	Description/Purpose	Status
	projects/workgroups.	
FamLink Search Improvement	Search modifications/improvements added to Provider search to include searching ability for Historical names and “aka’s”. We will continue to work on improvements to Search functionality throughout the FamLink system, and in developing FamLink Pro.	Continues/ Ongoing
Text Box sizing	Text box expansion on a number of existing FamLink text boxes was an issue identified in several previous assessments of the FamLink system. CATS is utilizing textbox expansion on several identified text boxes throughout the system. This functionality will be used as a standard in future development.	To be implemented by the end of FY2015.

Planned Activities (FY 2016) – Statewide Information System

FY 2016 Activity	Description/Purpose	Target Date
Data System Enhancements and Accountability Tools		
FamLink Pro	FamLink Pro will gradually replace the current FamLink JAVA code. It will be a .Net web service application that will better meet the agencies multiple user needs. FamLink Pro will utilize a front office client, back office, and a middle tier for web service proxies. FamLink Pro will be built using Responsive Web Design allowing users to interface with the application using a desktop, laptop, tablet, or other mobile device.	Several year project with development beginning (FY2016)
Discovery Tool	A discovery tool is being developed to assist in consistent, thorough production of public disclosure requests and legal discovery required for Torts and Lawsuits.	FY2016
Child Health and Education Tracking (CHET)	CHET is required to be completed on every child that is placed into the foster care system. Developmental testing, medical and educational record requests, and caregiver interviews are included in the CHET requirements. CHET is required to be completed within the first 30 days of out of home placement. CHET staff utilized an Access database that has	FY2016

FY 2016 Activity	Description/Purpose	Target Date
	<p>a one way interface from FamLink, to complete their work. Information is entered in to the Access database for reporting requirements, and CHET staffs also enter some information in to the FamLink system. CHET will be the first tool to be developed in FamLink Pro.</p>	
Office of the Superintendent of Public Instruction (OSPI) Interface	<p>Education information is gathered on children in care to ensure that their educational stability and well-being is addressed while in out of home care. Currently, workers manually enter all educational information gathered in to FamLink. This is a workload issue identified as a high priority change from our field users and was identified in prior system evaluations as an area needing improvement.</p> <p>CA continues to work with OSPI on a Memorandum of Understanding and Data Share Agreement. However, due to differing interpretations of what can be shared and retained, Assistant Attorney Generals representing both agencies are currently involved in working out an agreement that will allow us to move forward in this work.</p>	FY2016
Financial System Replacement – Social Service Payment System Replacement	<p>CA is in the process of defining business requirements necessary to develop and release an RFQ for a financial payment system. FamLink currently interfaces with the Social Service Payment System (SSPS), which is an antiquated mainframe system that was used by several administrations within the WA Department of Social and Health Services as a payment system. Options for an alternate payment system will be explored upon the completion of requirements.</p>	FY2016 until completed
Mobile Technology Solutions	<p>Mobile Technology Solutions include:</p> <ul style="list-style-type: none"> • Architect the middle tier of FamLink to support mobile computing technology (FamLink Pro). • We will also be developing smaller native iOS mobile applications that will allow workers to utilize mobile devices during field work, even if they do not have 	FY2016 until complete

FY 2016 Activity	Description/Purpose	Target Date
	<p>access to the FamLink system at the time. The information from the mobile application will sync with the FamLink application when connections are available.</p>	
<p>Disaster Recovery Plan Improvements</p>	<p>The Disaster Recovery Plan (DRP) is a component of the Business Continuity Plan (BCP). The DRP is a living document that should be incorporated into the organizations change management process and routinely updated as changes within the organization occur. The DRP also has elements similar to what you will see within various components of the BCP (i.e. Emergency Response Plan, Contingency Plans, Functional Recovery Plans, Communication Plan, etc.). However, the DRP is designed for IT Staff and administration.</p> <p>CATS is preparing logistics for a Failover Site on the Eastern side of the state in case of catastrophe in Western Washington. This Failover Site will become part of the State Continuity of Operations Plan.</p>	<p>FY2016</p>
<p>Enterprise Content Management (ECM) upgrade and enhancement</p>	<p>CA will upgrade and enhance the current Enterprise Content Management (ECM) system, EMC Application Xtender to include full text search capabilities as well as upgrading to the latest version. This commercial software will be key to modernizing our platform in preparation of mobile content in addition to consolidating CA records for records management improvements and efficiency in long term retention and retrieval of CA records.</p>	<p>FY2016</p>
<p>Workload Reduction</p>	<p>CA will continue to identify Lean projects and opportunities to streamline work and system requirements. An initial workload reduction taskforce has been convened and will identify opportunities to assist in workload reduction, while ensuring that child safety, permanence, and well-being continue to be kept in the forefront of practice.</p>	<p>FY2016</p>

Case Review System

Written case plan

Case plans are required to be completed within 60 days of a child's removal and are updated at a minimum every 6 months. The CFE captures key individual and family information in FamLink and is used to prepopulate the court report. This process assures that the required information is captured and available for assessment and planning. Included in the evaluation are individual and family level objectives for all participants.

Case plans are updated with the child and the child's family through individual meetings with participants and the following shared planning meeting processes:

- Family Team Decision Making Meetings
- Dependency case conferences
- Permanency Planning staffings

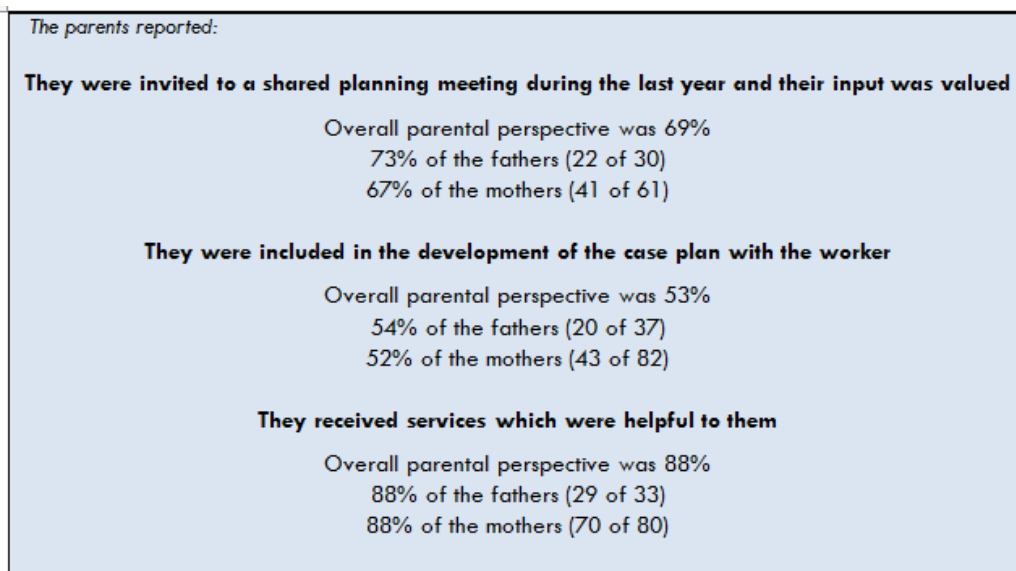
At this point in time CA does not have data regarding the percentage of cases with a case plan developed or updated within required timeframes.

Data regarding the percentage of cases that have review hearings or permanency planning hearings within timeframes is available from the Administrative Office of the Courts (AOC). These hearings require a case plan.

The process to ensure written case plans are developed for children and families is comprehensive, using shared planning meetings and actively involving key participants including parents' attorneys, child attorneys, guardians ad litem, Court Appointed Special Advocates (CASA), and court oversight.

Policy and state law requires staff to engage families in the development of their plans. The court report generated from the CFE requires CA workers to document the parent's status, participation and progress, and involvement in developing the case plan. Current available processes do not exist to consistently track parent involvement in development of the plan outside of narrative documentation. Enhancements to the meetings report in FamLink which would allow identification of participants in key shared planning meetings are being explored.

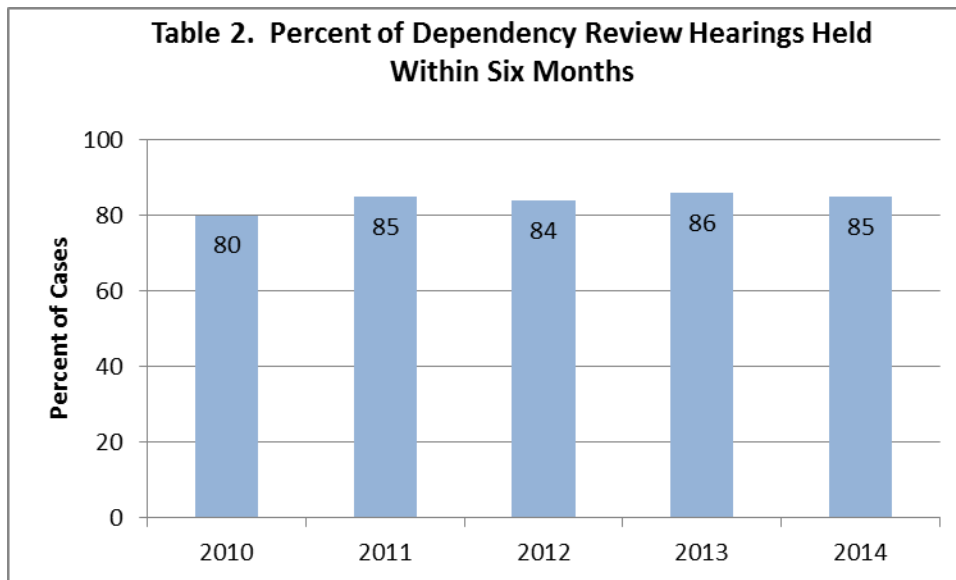
Parent interviews are conducted as part of the Central Case Review. Summary results for these interviews in 2014 were:



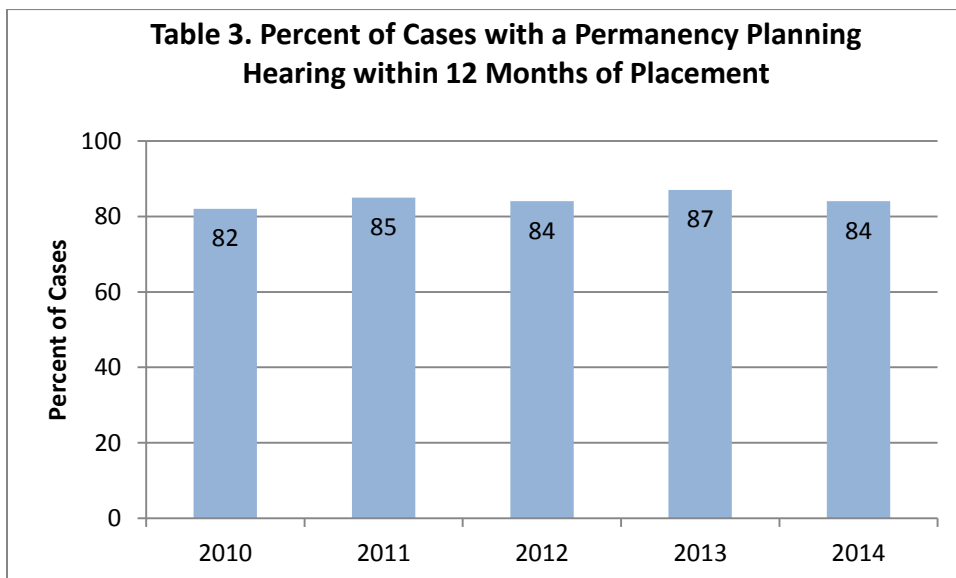
Periodic reviews and Permanency Planning hearings

State law requires that the case of every dependent child be reviewed by the juvenile court at least every six months and that permanency planning hearings occur by the 12th month of placement for all children in out-of-home care and then annually. Additionally permanency planning hearings must occur following 90 days of service delivery after disposition if parents have failed to make progress or engage in services to resolve the issues that brought the child into care

CA policy and procedures exist to assist CA workers in meeting the requirement to review the status of children in care every six months. AOC compiles data and reports on the timeliness standards as shown above. This data is shared with court partners at the individual jurisdiction level to inform local court practices and improvements. There is ongoing work between AOC and CA to ensure accuracy of data.



Data source: *Dependent Children in Washington: Case Timeliness and Outcomes 2014 Annual Report*



Data source: *Dependent Children in Washington: Case Timeliness and Outcomes 2014 Annual Report*

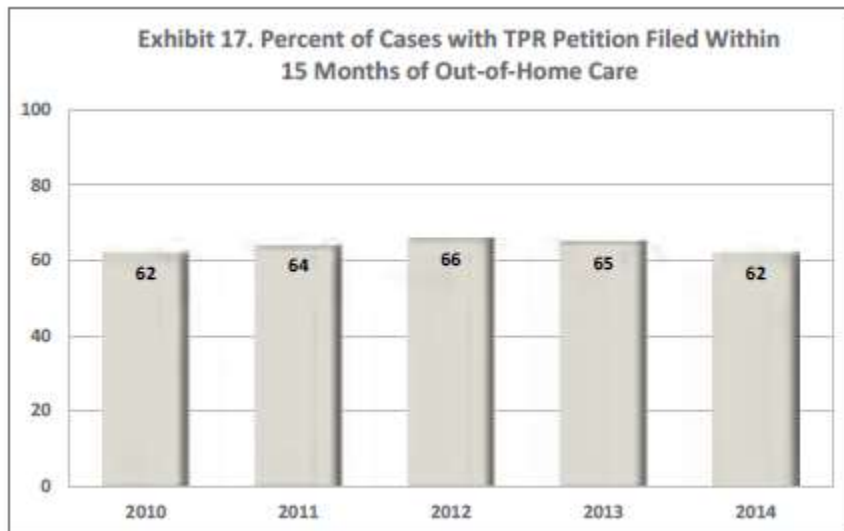
The Court Improvement Training Academy (CITA), sited at the University Of Washington School Of Law, provides training for the courts and child welfare community. CITA has supported Tables of Ten

(multidisciplinary groups of 10 individuals from a given county interested in improving the local child welfare system) in several counties. These bring together child welfare professionals and key stakeholders to reach solutions that improve outcomes for families. Many of the Tables of Ten have used the program to improve case resolution time frames and develop local initiatives to improve the local child welfare legal systems.

Additional analysis and collaboration with court partners in local jurisdictions is needed to understand the reasons for hearings not held within required time frames and to develop strategies to improve performance.

Termination of parental rights

CA policy requires a referral for termination of parental rights to be made if a child has been in out-of-home care for 12 of the last 19 months. This process supports the required filings under the Adoption and Safe Families Act (which is to file a TPR if the child has been in care during 15 of the last 22 months). CA continues to struggle with timely filing of termination petitions as reflected in the data from AOC and the CA case review:



Data source: *Dependent Children in Washington: Case Timeliness and Outcomes 2014 Annual Report*

Q2: Was a petition to terminate parental rights filed if the child was in out-of-home placement for 15 of the most recent 22 months, or compelling reasons documented?	CY 2011 Statewide Results	CY 2012 Statewide Results	CY 2013 Statewide Results	CY 2014 Statewide Results
	81% 73 cases	78% 120 cases	69% 124 cases	77% 132 cases

Data Source: *CA Central Case Review*

CA continues to communicate case filing requirements to CA workers. In addition, local offices are focusing on collaborating with court partners including the Assistant Attorneys General, parents’ attorneys, and judicial officers to improve the filing and documentation processes. Included in the measure of timely filing of termination petitions is understanding and clearly documenting compelling reasons not to file when they exist.

Notice of hearings and reviews to caregivers

CA continues to work toward automating the notification of hearing and reviews to caregivers. As was noted in the PIP, challenges to accurately tracking this activity included the ability to provide written notification to caregivers outside of FamLink. As a result, data does not accurately reflect performance.

During the past year, CA has focused on strengthening the infrastructure for supporting permanent outcomes for children, including activities related to caregivers and the court system. The core activities in this area were completed during the past year and the development of a QA plan, validation of the Caregiver Notification Report and other activities detailed in this section have been reprioritized for 2015-2016.

Over the next year CA will reengage in these activities with the following expected completion dates:

- Presentation of the QA plan for caregiver notification to leadership – August 2015
- Meet with CQI team to review data, plan and regional and statewide strategies – Fall 2015
- Validation of the Caregiver Notification report – November 2015
- Development of messaging and tools to support the field in use of the electronic system – December 2015

Additional activities that are in process include:

- Communication about hearings, attendance, notifications and expectations through frequently asked questions posted on the foster parent web page.
- Communication through the monthly Caregiver Connection newsletter informing caregivers to inquire about the next court hearings at monthly health and safety visits.
- Health and Safety subscriptions have been implemented to remind staff about health and safety visits and a list of topics to be covered by the worker at the monthly meeting with caregivers, including notification of court hearings.

Quality Assurance System

CA continues to build and improve its Quality Assurance (QA) and Continuous Quality Improvement (CQI) system. Improvement efforts are aligned with the five QA/CQI components defined in the Information Memorandum ACYF-CB-IM-12-07.

In 2014-2015, notable improvements have resulted from CA's continued commitment to QA/CQI efforts at every level of the organization. QA/CQI activities have resulted in CA successfully achieving the Round 2 CFSR Program Improvement Plan outcomes. Positive results were also noted in CA's response to alleged victims associated with emergent Child Protective Services intakes and decreasing the percentage of children in out-of-home placement 5 years or more. QA/CQI activities continue for the remaining Braam resettlement agreement outcomes.

Results from CA's central case review also indicate practice improvements. In 2013, the case review team reviewed cases from 23 local offices. Results from the case review are used by local offices to develop action plans to implement practice improvement strategies. Practice improvements related to child safety have the highest priority for action planning. CA's QA/CQI staff actively participates in the development and monitoring of the action plans. When statewide performance in 2014 was compared to the 2013 case review results, statewide improvements were identified in the following areas of practice:

- Providing services to the family to prevent initial removal or re-entry into care
- Assessing and addressing safety of children in out-of-home cases
- Assessing and addressing domestic violent in out-of-home cases
- Child Protective safety assessments accurately identified safety threats
- Quality of in-home safety plans
- Compliance with health and safety visits with children in out-of-home cases
- Locating, assessing and providing services to mothers in in-home and out-of-home cases
- On-going engagement with mothers in in-home cases
- Compliance with shared planning meetings
- Actions to achieve timely permanency
- Efforts to achieve timely reunification
- Serving youth in care with permanency goal of long term foster care
- Meeting educational and mental/behavioral needs of children
- Ongoing collaboration with a child's tribe
- Quality of supervisory reviews
- Assessing and addressing DV in CPS Investigation Only Cases
- Assessing and addressing safety of children in in-home cases
- Compliance of supervisory reviews
- Quality of CPS investigations
- Assessment of other adults living in the household
- Compliance with health and safety visits with children in in-home cases
- Locating, assessing and providing services to fathers
- Efforts to achieve timely termination of parental rights and adoption

The following is a summary of CA's current strengths and areas of improvement for each of the five QA/CQI components:

Foundational Administrative Structure

An active QA/CQI system accessible to all levels of the organization remains a core value of CA leadership. CA continues to dedicate staff at both regional and statewide levels to support its QA/CQI system. In late 2014, because of organizational changes, primary responsibility for QA/CQI moved to a new division. CA's QA and CQI policy was updated in 2014. As a reflection of the value of staff contributions from all levels of the organization, staff is encouraged to participate in practice improvement workgroups, targeted case reviews, development of action plans to improve practice, local office CQI teams and submit work improvement suggestions to CA's leadership. CA continues to use Lean tools to support its CQI efforts.

CA's CQI Advisory Committee continues to provide guidance to CA's CQI activities. In 2014-2015, the CQI Advisory Committee provided recommendations on a number of topics including the following:

- Safety assessment and planning;
- Incorporating information from gained from critical incident reviews into practice improvement efforts;
- Improving the user experience with CA's information management system;
- Updates to the central case review tool and reports;
- Incorporating survey results in improvement efforts;
- Using automated e-mail messages to notify social service specialists about key elements of practice; and
- CQI activities to improve a variety of practice areas.

In 2014, six regional and statewide managers completed a CQI training academy offered by the Children's Bureau. Information and material obtained from the CQI academy is used to develop in-service training for the QA/CQI managers. In 2015, the QA/CQI training competencies were revised. Competencies are used to develop curriculum and learning objectives. The following are the QA/CQI competencies for supervisors:

- Ability to access and analyze data to improve practice
- Ability to identify how continuous quality improvement is used to improve agency processes and outcomes
- Ability to understand the principles and differences between quality assurance and continuous quality improvement.

In 2014-2015, the following QA/CQI-related training was provided to CA staff:

- QA/CQI training for each cohort attending core supervisory training.
- Informal training by the National Child Welfare Resource Center for Organizational Improvement to CA leadership and QA/CQI managers.
- A series of trainings on how to use data and reports from CA's information management system.
- The Children's Bureau provided a presentation on CQI to CA's CQI advisory committee.
- An updated training was provided to staff on practice strengths and areas of improvement identified from cases involving child fatalities and serious injuries.
- Lean for Leaders was offered to CA managers.

In 2015-2016, CA would like to use capacity-building resources available from the Children's Bureau to provide training on root-cause analysis, and the development of action plans to address areas of improvement identified during case reviews. CA is also interested in technical assistance with Item 25 (Quality Assurance) of the CFSR assessment instrument.

Quality Data Collection

Quality data collection is a continual effort lead by CA's Data Management and Reporting Section. The section works continually to ensure data is of the highest quality and used appropriately in reporting to reflect practice. In the past year, there has been a focus on improving the quality of administrative data relating to CPS response, placement, permanency, tribal affiliation, and legal status. The Data Management and Reporting Section works closely with the QA/CQI managers and program managers to ensure data and reports are valid. This work is considered on-going and adapts to the data needs of the organization. In 2014-2015, new data reports for CA's differential response were developed.

QA/CQI managers continue providing technical support and staff training on data entry into CA's information management system, FamLink.

In 2014, representatives from CA and the Children's Bureau (CB) participated in conference calls to resolve questions about the status of NYTD data quality issues identified in 2012.

The system used by QA/CQI managers to review and correct AFCARS data errors will continue in 2015-2016. In 2015, CA provided an official response to the proposed changes to the AFCARS reporting system.

Using data from CA's information management system, reports that generate automated e-mail messages were developed in 2014 for two areas of practice. The e-mails are sent at regular intervals to social service specialists and managers as reminders to document the initial response to reports of child abuse and neglect and monthly health and safety visits.

Collecting and integrating data about initial and on-going staff training will be a focus in 2015-2016. We will also be considering ways to increase the use of data shared between Children's Administration and the Administrative Office of the Courts.

Case Record Review Data and Process

2014 Assessment results: On Track/Potential minor improvement work

CA's central case review continues to be an area of strength for CA's CQI system. In 2014, 643 cases from 23 offices were reviewed by a team of five review specialists and their supervisor. In addition to reviewing case documents and electronic records, 118 interviews were conducted with parents associated with the cases included in the reviews. The team of case review specialists continues to support targeted case reviews in specific practice areas such as Intake, Indian Child Welfare, and management requested office reviews targeted at a specific program. The standardized case review tool used by the review specialists was expanded in 2014 to include an evaluation of social work practices related to differential response cases and infant safe sleep practices.

To increase the understanding about central case reviews, an all staff meeting is held at the end of a review to talk about the preliminary results. This meeting is structured as part of the developmental process and meant to be an open question and answer conversation with the staff. The meeting helps provide clarification regarding important aspects of social work practice, and documentation of those practice areas. Areas of strength and areas needing improvement are identified following each individual office review. The office then works with their CQI team in order to develop improvement strategies which meet the individual needs of their office.

In preparation for the next CFSR, CA has participated in a facilitated conference call with case review specialists and supervisors from several other states. The case review team has also participated in conference calls between JBS International and the Children's Bureau regarding the development of the state review trainings and reports. Case review specialists have access to the CFSR training portal in order to develop the skills necessary to complete the round 3 2018 CFSR review. Currently, CA uses a state developed tool that is informed by the federal Onsite Review Instrument in the completion of Central Case Reviews. Changes to the case review process for CY2015 were limited due to CA's commitment to complete ICW case reviews. Washington state will participate in the CFSR in FY2018. In the coming year, CA will be developing a plan for the Central Case Review that will continue to move toward alignment with the federal instrument and process. Implementation of additional changes to the state process will begin with the January 2016 reviews. In addition, CA will continue to assess process and capacity for using the state case review process for CFSR purposes.

Analysis and Dissemination of Quality Data

The centralized Data Management and Reporting Section formed in 2014 continues to be primarily responsible for supporting CA's data needs. The data team works closely with the statewide and regional QA/CQI managers and CA leaders to provide data and analysis. Regional QA/CQI managers use data to prioritize and plan QA/CQI activities. Standardized reports are available through an on-line system using Sequel Server Reporting Services, and data layers are also available through the reporting portal for advanced users.

CA is fortunate to have available a rich supply of qualitative and quantitative data. Resources to create an on-line data dashboard are not yet available. Meanwhile, the data section continues to publish a monthly data report indicating key practice and business measures. The section actively seeks feedback on how to improve reports and to increase user competency with reports from CA's information management system. In 2014, a number of data reports were redesigned to improve reporting on race and ethnicity. Using an automated work-order system, the data section coordinates and tracks all requests for data from internal and external stakeholders.

Last year, CA sought assistance from a community expert to analyze data related to child fatalities and near-fatalities resulting from child abuse or neglect. The analysis of this data was presented to CA leadership to inform practice improvement. In 2014, the data section hired a data and research analyst. Data analysis is also available from Washington state's Department of Social and Health Services Research and Data Analysis Division. In 2014, 120 program managers and supervisors attended data analytics training offered by Casey Family Services. The curriculum was customized with Washington state data and reports. In the upcoming year, CA's training partner will offer additional data analytics training. In 2015, CA suggested its training partner also provide in-service staff training on using spreadsheets to organize and analyze data.

In 2015-2016, CA plans to establish a standardized approach to track the types of data used to inform practice improvement workgroups.

Feedback to Stakeholders and Decision Makers and Adjustment of Programs and Process

CA promotes a culture of data-informed decision-making. Efforts started in 2014 to further integrate results in CA's QA/CQI system continue. CA's supervisors, administrators, program managers, and leaders routinely use results to evaluate and plan for needed improvements. A monthly report reflecting a number of practice and business trends is provided to external and internal stakeholders. CA's annual strategic plan, containing performance results, is available to the public. In addition, results for the child safety and permanency goals established by Washington state's governor are available on a public

website. Regional QA/CQI managers provide specialized reports to support regional and local improvement plans.

External stakeholders and tribal partners are participating in several statewide advisory groups and provide input on performance improvements. In the coming year, CA would like to increase the number of external stakeholders and tribal partners participating regional and local CQI planning. To help achieve that objective, QA/CQI managers received training on how to engage external stakeholders and participated in a planning session.

A data sharing agreement continues to allow CA to provide data to Partners for Our Children (POC), a university-based research organization providing child welfare research in Washington state. POC uses the child welfare data provided by CA for publically accessible web-based data tools. POC also uses data supplied by CA to publish an annual report on child welfare measures. The report, mandated by state law, provides external stakeholders another source of feedback on CA's performance.

The Office of the Family and Children's Ombuds (OFCO) provides feedback on CA's response to children and families. OFCO is an independent state office charged with investigating complaints from the public about the department. OFCO also publishes an annual report with the results of their investigations and recommendations for system improvements.

In 2014, a CQI plan for CA's new differential response system was created. The plan relies on both qualitative and quantitative data to inform stakeholders as the new program is implemented. In 2015-2016, two targeted reviews of differential response cases will occur to gather qualitative data about strengths and areas of improvement and provide feedback to stakeholders.

Looking forward, CA will use input from stakeholders and tribal partners in the planning for the Round 3 CFSR. A new workgroup is being developed in partnership with the Administrative Office of the Courts to focus on improving permanency outcomes. Qualitative and quantitative data from multiple sources will be used by the workgroup to identify where to focus improvement efforts. An extensive case review of Indian Child Welfare cases will begin in August of 2015. The results gathered from the targeted review will be shared with CA's tribal partners and external stakeholders to identify areas of improvement. A targeted review of cases involving youth that have ran away from foster care is planned for 2015. Again, results obtained from the review will be used to inform internal and external stakeholders about needed practice and service improvements for this particularly vulnerable population.

Staff Training

The Alliance for Child Welfare Excellence, established in January 2012, is CA's comprehensive statewide training partnership dedicated to developing professional expertise for CA workers and enhancing the skills of foster parents and caregivers working with vulnerable children and families. The Alliance combines the resources of the University of Washington (UW) School of Social Work, UW Tacoma's Social Work Program and Eastern Washington University's School of Social Work with the expertise of the CA and Partners for Our Children, which is charged with rigorously evaluating training effectiveness over time.

By joining together, this public-private partnership will strengthen the professional expertise of CA workers, tribal child welfare workers and community providers, enhance the care-giving skills of foster, adoptive and relative caregivers, and create better futures for children and families.

Additional information about the Alliance for Child Welfare Excellence is available at the website: [About | Alliance for Child Welfare Excellence](#).

Overview of the FY 2015 Accomplishments

During FY 2015, CA and the Alliance collaborated in further developing infrastructure and trainings to best meet the needs of CA staff and its caregivers. Those accomplishments include the following areas listed below.

- **Automated Course Schedule and Catalog.** During FY 2015, a new automated Course Schedule and Course Catalog was developed, which allowed easy access and tracking of approximately 128 different trainings. This enhancement made substantial improvements in course administration and planning.
 - a. For caregivers, registration is known ahead of time instead of just prior to training date.
 - b. When registration numbers are high, it is easier to see and plan for additional training when and where needed.
 - c. The disbursement of training is more visual because it is more easily identifiable where training has not been offered and what offices need certain training.
 - d. More information is readily available about the trainings, including a course description, competencies, delivery method, and length of time.
- **Current Competencies and Curriculum.** A formal process for developing, revising, updating or keeping current all competencies and curriculum for all trainings is in place within the Learning and Development group. This process assures only the most current information is being used in trainings, and specific knowledge and skills (competencies) are identified first, and are assured in the development and delivery of training.
- **Evaluation:** The Alliance continues to build on the Chain of Evidence in the evaluation process. The Chain of Evidence incorporates five levels: Demographics Information, Satisfaction, Pre and Post Knowledge and Skills, Transfer of Learning, and Outcomes. The Alliance has continued to track information on demographics of every participant attending training. Demographics include level of education, years of experience, race/ethnicity, gender, primary language, program area, job classification, and county of employment, all of which provides a snapshot of the demographics of trainees. With the addition of the automated course catalog and registration this information is now in electronic format. In addition, satisfaction surveys are

completed at the end of each of the trainings to collect immediate satisfaction of the training environment and experience. This data has helped to evaluate the training environment and the overall participant satisfaction and reaction to the training itself. The results are being used to identify areas where the curriculum appears to be successful and those portions of the curriculum that needed changes. The Alliance has utilized pre and post knowledge quizzes specifically in the eLearning's to measure and assess the competencies and effectiveness of the training in increasing participant's knowledge and skills. A plan for measuring Transfer of Learning and Outcomes has been developed which includes interviews with volunteer participants who have attended and completed Regional Core Training, Supervisor Core Training and Caregiver Core Training.

- **Additional In-Service Trainings.** Following principles of adult learning, and enhancing the transfer of learning from training to work, 23 new in-service trainings were offered in FY 2015 to CA staff. In-Service trainings are more in-depth knowledge and skills on key training topics covered in the new worker Regional Core Training. Domestic Violence and Child Welfare, Youth Missing from Care, Infant Safety and Care, Drug Testing, Working with Clients with Limited English Proficiency as well as programmatic and policy areas of Interstate Compact on the Placement of Children, and CFWS were all offered as In-Service trainings.
- **Regional Core Training.** As of May 1, 2015, 272 of newly hired social service specialists attended Regional Core Training (RCT) this fiscal year. Curriculum updates were completed in specific areas when CA incorporated new policy, or when new FamLink improvements occurred. The RCT Field Manual also was updated to support learning with a small number of cases being assigned and learning more program-specific work. RCT continued to start on the first day of employment and lasts for the first 60 calendar days of employment. Each module contains an on-the-job application wherein the new employee is learning and applying the knowledge and skills before completing the module. Close observation and supervision occurs throughout the first two months, provided by a coach from the Alliance. The Coach and the new employee's supervisor stay in contact throughout the program with regular progress reports and communication.
- **Area Administrators Training.** A work group was established in FY 15 to explore a learning program for Area Administrators. This group of CA staff has not had a training program specifically to address the knowledge and skills needed in their job requirements. The work group completed a review of several training programs for middle managers from other states, including the Leadership Academy for Middle Managers by the National Child Welfare Workforce Institute. The work group decided to start with adapting the Core Course for Managers from the Public Child Welfare Training Academy at San Diego State University, and also start with several In-Service trainings.
- **Expanded FamLink Training.** FamLink is included in majority of trainings or courses – whatever the topic. Additionally, there were 9 “stand-alone” or FamLink trainings developed where FamLink documentation is the only topic covered. The FamLink content always demonstrates for CA staff where and how the required documentation is entered. Laptops with FamLink access are now available for all trainings so CA staff experience “hands on” learning. CA maintains two

FamLink learning environments for staff to practice during trainings. The “stand-alone” FamLink trainings included Extended Foster Care, Court Reports, Comprehensive Family Evaluation, Missing from Care, Intake, ICPC, Overcapacity Documentation, Monthly Visits, and Native American Inquiry Referral. FamLink training is also included throughout the Regional Core Training for new CA staff.

- **In-Service Trainings for Caregivers.** Parenting Plus training has been a required training for caregivers after they are licensed. This training provided additional information and skills to foster parents, and consisted of six modules. In coordination with Division of Licensing Resources, the Alliance started to update the modules and added several important trainings to the list of In-Service trainings available to foster parents. The Parenting Plus module on discipline was updated with the Positive Discipline model, and the modules on child development, sexual behavior problems, physically aggressive youth, and teaming were updated. A training on Visitation, Indian Child Welfare, Infant Safety and Care, and Missing from Care were all added In-Service trainings for caregivers.
- **Caregiver Connection.** Starting in October 2014, the Alliance continued the work that CA had completed for years on the Caregiver Connection. This monthly training newsletter informs caregivers across the state. In a joint effort, CA and the Alliance identifies topics for the training newsletter, writes, edits, finalizes the content, then CA sends to over 9,000 foster parents, relative caregivers, and partner Child Placement Agencies across the state.
- **Faculty Involved in Competency-Based Trainings.** Drawing from the three campuses, University of Washington in Tacoma, University of Washington in Seattle, and Eastern Washington University, faculty are asked to present either a one and half hour seminar or a three hour workshop on a training topic related to CA’s work. This year seminars or workshops were provided on Motivational Interviewing, DSM V for Case Referral and Case planning, Intergenerational Trauma, Social Work Practice with Boys and Men, and Writing for Professional Development, Self-Care, and Client Empowerment.
- **Enhance Coaching and Training Skills.** The Alliance implemented the Coaching Toolkit for Child Welfare Practice with the University of California at Davis. Two of the UC Davis staff trained Alliance coaches on coaching skills. The goal is to enhance and develop specific skills of all coaches by learning a model for approaching and delivering coaching specifically to public child welfare staff.
- **Child Welfare Training and Advancement Program.** CWTAP graduated 61 students in June 2015. All of the students completed their practicum in CA offices, and applied for vacant social work positions across the state.

Additional FY15 Accomplishments include:

- As of May 1, 2015, 272 Social Service Specialists completed RCT.
- A total of 59 new Supervisors completed SCT during FY15.
- There were 157 Caregiver Core Trainings (CCT) provided during FY15. As of May 1, 2,024 potential foster parents completed CCT Module 1 and 1,776 completed Module 2 for an 88 percent completion rate.

- There were 9 different FamLink courses offered 257 times throughout the state during FY15 by three FamLink coaches.
- There were 23 new In Service courses developed and delivered during FY15.
- There were 215 CA staff have completed DV and CW In Service training during FY15.
- Six different courses occurred just for Supervisors and Area Administrators.
- Each Regional Advisory Group met once per quarter throughout the year.
- The statewide Committee on Competencies and Curriculum met once per quarter throughout the year.
- On March 1, 2015 a new automated schedule and registration system was launched.

Updates and Progress on FY 2015 Activities	Target Date
1. Newly hired Social Service Specialists will be prepared to assume casework job responsibilities after completing the Regional Core Training (RCT).	Completed and On-going
2. Newly hired social work Supervisors will be prepared to assume their leadership position after completing the Supervisory Core Training (SCT).	Completed and On-going
3. Caregiver Core Training (CCT) will be provided to new and prospective caregivers, preparing them for providing services to children in care.	Completed and On-going
4. Workforce is prepared to meet documentation requirements in FamLink.	Completed and On-going
5. CA workers will be prepared to assume program-specific duties in RCT, and will gain deeper knowledge and skills in their assigned program area in Program-Specific In-Service trainings.	Completed and On-going
6. CA workers will enhance their preparation for completing their job responsibilities by attending Specialized In-Service trainings and coaching sessions that directly affect their child welfare practice.	Completed and On-going
7. On-going training on Domestic Violence and Child Welfare is provided to direct line workers, supervisors and area administrators.	Completed and On-going
8. An increase of at least 25 additional CA staff will be certified in NCAST assessments, and the current certified NCAST assessors will maintain their certification.	Recertification Only Completed
9. CA staff will have learning opportunities and resources to address the safety of infants and young children aged 0-3.	Completed and On-going
10. As Supervisors transition into their role of supervisor and lead for their unit of workers, they will have Supervisory In-Service learning opportunities specific to the program and practice during their first year as a supervisor.	Completed but more is needed
11. Caregivers will enhance their preparation to care for children and youth placed in their homes by attending Specialized Caregiver In-Service trainings.	Completed and On-going
12. Area Administrators and Supervisors will learn related knowledge and skills to	Completed but more is

Updates and Progress on FY 2015 Activities	Target Date
effectively perform their responsibilities.	needed
13. Regional Advisory Groups (RAG) provides an on-going “voice” for local professional development and training needs.	Completed and On-going
14. Statewide Committee on Competencies and Curriculum (CCC) provide continuous oversight of the competencies and curriculum for direct line workers, supervisors and area administrators, and caregivers.	Completed and On-going
15. Evaluation efforts will capture a “chain of evidence” to provide immediate short term and longer term feedback on effectiveness of training and coaching.	Completed but more is needed
16. Coaches and trainers will follow their own set of competencies and complete a Coach and Trainer Development Program to continue improving their services and work.	Completed and On-going
17. Course administration regarding all course offerings, registration, and completions, is streamlined and improved for easy access to information for caregivers and workforce.	Completed and On-going
18. Child care reimbursement is considered and provided, if feasible, to foster parents attending required In Service trainings.	Not Completed
19. Caregiver Connection will be available monthly for all caregivers on CA List Serve.	Completed and On-going

Planned Goals for FY 2016

Specific data and information on trainings is located in the attached Training Matrix.

- **Goal 1:** The Regional Core Training (RCT) for new direct line workers is delivered to every newly hired social worker. (Completion: Quarters 1-4)
- **Goal 2:** Workforce is prepared to use FamLink as the case management system. (Completion: Quarters 1-4)
- **Goal 3:** Training on Domestic Violence (DV) and Child Welfare is provided to direct line workers, supervisors and area administrators. (Completion: Quarters 1-4)
- **Goal 4:** Regional Advisory Groups (RAG) provide an on-going “voice” for local professional development and training needs. (Completion: Quarters 1-4)
- **Goal 5:** Statewide Committee on Competencies and Curriculum (CCC) provides continuous oversight of the competencies and curriculum for direct line workers, supervisors and area administrators, and caregivers. (Completion: Quarter 1-4)
- **Goal 6:** In Service and Focused courses are developed and offered to the CA workforce as refreshers and continuous professional development, including special emphasis on skills based social work practice such as Motivational Interviewing, CPS Family Assessment Response, Safety

Plans for Substance Abusing Parents, Infant Safety and Care, Indian Child Welfare, Prejudice Reduction. (Completion: Quarter 1-4)

- **Goal 7:** Evaluation efforts will capture a “chain of evidence” to provide immediate short term and longer term feedback on training and coaching. (Completion: Quarters 1-4)
- **Goal 8:** Supervisors Core Training (SCT) will prepare new supervisors to assume their role in the agency. (Completion: Quarter 1-4)
- **Goal 9:** Supervisors In Service curriculum will provide all supervisors with the knowledge and skills to learn and become proficient enough to teach and guide their workers. (Completion: Quarter 1-4)
- **Goal 10:** Caregiver Core Training is offered to every prospective and interested caregiver, preparing them to be foster parents to children in care. (Completion: Quarter 1-4)
- **Goal 11:** Caregiver In Service curriculum will provide all caregivers with the general knowledge and skills needed to care for every child in their care. (Completion: Quarter 1-4)
- **Goal 12:** Focused trainings for Caregivers will provide continuing education opportunities regarding a variety of topic or special areas related to children in their care.
- **Goal 13:** Core training for all new Area Administrators will be piloted, selected, and delivered at least two times per year.
- **Goal 14:** Coaches and trainers will follow their own set of competencies and complete a Coaches and Trainers Development Program and continue improving their services and work. (Completion: Quarter 1-4)
- **Goal 15:** A hiring and training system will support the timely recruitment, selection, and preparation of newly hired case workers. (Completion: Quarter 1-4)

Supports Needed to Implement Goals

- Develop method for capturing Intensive Initial Training for RCT
- Method and funding to reimburse foster parents for child care expenses for attending training
- Provide more Focused level trainings in the area of Motivational Interviewing, Safety Plans for Substance Abusing Parents, Safety Oriented Practice

Expansion of Indian Child Welfare Training to include new BIA Guidelines, Native American Inquiry Referral, Historical Trauma, and training for all LICWAC members.

Service Array

Washington's services are categorized into four service arrays:

- Out-of-Home Services
- Other Foster Care Services
- Family Support Services
- Evidence Based Practices

Assessment of Strengths and Challenges

CA continues to find the feedback gathered from the 2012 statewide survey of veteran parents, staff, tribes, stakeholders, and youth in foster care to be relevant in our efforts to have effective array of services. Families, caseworkers, community partners, and tribes in every community identified similar needs. CA continues to work to expand the identification and availability of needed services. The services identified through the survey were:

Concrete Resources:

- Affordable, safe housing
- Food
- Clothing resources for families
- Help paying utility bills
- Furniture/ appliances(includes repair services)
- Help paying medical bills
- Items to improve home safety (baby proofing, window and door alarms)
- Transportation assistance for families (bus passes, car repair, gas vouchers)
- Household repair/ trash removal assistance to make family homes safe

Services:

- Child care and respite for parents
- Life skills training
- Chemical dependency assessment and treatment
- Mental health assessment and treatment
- Domestic violence treatment
- Behavior management treatment
- Crisis intervention
- Family preservation services
- Evidence Based Programs (e.g. HomeBuilders or Triple P)
- Legal aid for parents to develop protective parenting plans with abusive partners
- Positive community programs to engage families and youth
- Veteran parent mentors
- Parent education developed to address the needs of families involved in the child welfare system
- In-home nurse consultations for new parents and families with children with high medical needs

Key strategies to improve the service array include:

- Working with communities to understand and develop the resources to match the needs of children and families.
- Making resources accessible in a way that facilitates caseworkers quickly matching and accessing the resources necessary to meet individual child and family needs.

CA continues to work on the following items identified last year:

Culturally Responsive Services

Culturally responsive service providers are critical to engaging the diverse families served by CA.

- Work continues to support contractors to approach families with cultural humility. CA worked with Contractors and stakeholders to update the Family Preservation Services (FPS) contract.

This updated contract includes a new requirement for on-going quality improvement targeting the use of Cultural Humility in services for families. Following implementation, this requirement will be assessed for use in other contracts.

- The Alliance for Child Welfare Excellence in partnership with DLR updated the Foster Parent training curriculum to provide additional information on serving lesbian, gay, bi-sexual, transgender, and questioning (LGBTQ) youth. DLR continues to explore additional ways to support LGBTQ youth in out-of-home care.
- CA is developing a web based library of evidence informed and evidence based therapeutic skills for contracted providers to access when serving families. This library, Washington Skills Library, includes the ability for Contractors to identify cultural modifications found successful in servicing different cultures.
- The [DSHS Cultural Competency Report](#) identifies several goals towards increasing Cultural Competencies moving forward. CA is exploring opportunities to leverage those resources to support contracted service providers effort in offering culturally relevant services.

Supporting families' access to contracted and community based services that support child safety, permanency and well-being (e.g. mental health or domestic violence treatment)

- CA Regional program managers and contracted service providers have worked to increase family's access to related or allied services.
- The Child & Adolescent Needs and Strength- Family version (CANS-F) assessment is utilized by most contracted providers to support child safety in the home. The CANS-F includes items such as violence in the home, caregiver mental health, and caregiver substance abuse and facilitates the identification of areas where additional services are needed.
- CA collaborated with BHSIA to identify strategies that support contractors working with families with mental health and substance abuse challenges. These strategies are being integrated into the electronic Washington Skills Library, which is being developed for use by FPS providers.
- CA is exploring a systemic tool to help caseworkers identify and access contracted and community based services that are locally available and support children and families. This effort will capture what is being accomplished through community engagement and outreach done through CPS Family Assessment Response (CPS FAR) implementation in addition to contracted services. Currently, this effort is being called One-Stop-Resources.

The goal is to have one place on the internet that will:

- Support critical thinking in selection of CA contracted and community services.
- Identify where services are available.
- Provide contact information to access the resource.

The initial focus will be on capturing CA contracted services with the intent to incorporate services offered by other governmental and non-governmental agencies in the future. This tool will allow a worker to identify resources anywhere in the state to meet individual child and family needs. In addition, it will provide a centralized resource for capturing availability of services and the need for service development to meet specific needs statewide.

Out-of-Home Services

Adoption Program

CA's adoption program focuses exclusively on providing adoption services to children placed in state foster care and to families interested in adopting a child from foster care. CA focuses on placing children with approved adoptive families. These children are often considered special needs and are often harder to place because they have been victims of physical, emotional, or sexual abuse or neglect, or are part of a sibling group. Adoption services include adoptive family recruitment, adoptive home studies to

determine the fitness and suitability of a family for adoption, training and pre-placement and post-placement services to the child and family. CA matches children with approved adoptive families that are best able to meet the needs of the child.

Adoption Support Program

Funding resources are available through the Adoption Support Program to assist families adopting children with special needs. Adoption Support is designed to help families offset the additional expenses involved in caring for a child with special needs. Pre-authorized counseling, medical and dental services, non-recurring adoption costs, and a negotiated monthly cash payment are some of the services that may be subsidized through Adoption Support. For adoptions after July 1, 2013, the monthly cash payment cannot exceed 80% of the foster care maintenance expense that the child would receive if he/she were in foster care.

Adoption Medical

Washington's Apple Health Adoption Support medical provides medical and dental services to state and federally eligible children in the adoption support program.

Adoption Promotion Supports and Services

- Medical and dental coverage is provided to every adopted child in Washington.
- Non-recurring costs up to \$1500 are available to families to offset adoption related expenses.
- Pre-authorized evaluation and counseling services are available to families who complete the program requirements.
- A monthly cash payment may be provided for those who qualify.
- Post adoption families have access to services provided by CA

Behavior Rehabilitation Services (BRS)

CA contracts with community agencies to provide a temporary intensive wraparound support and treatment program for youth with extreme, high-level service needs. These services are used to safely stabilize youth and assist in achieving a permanent plan or a less intensive service. These services can be provided in an array of settings and are intended to:

- Safely keep youth in their own homes with wraparound supports to the family
- Safely reunify or achieve an alternate permanent plan more quickly
- Safely increase family-based care by using a wraparound approach
- Safely reduce length of service by transitioning to a permanent resource or less intensive service

Crisis Residential Centers (CRC)

CRCs provide temporary shelter for youth ages 12 through 17 who run away from home, are in severe conflict with their parents, or foster youth in need of a crisis placement. CRCs are available twenty-four hours a day, seven days a week. Placement is limited to a maximum of fifteen days, and services are focused on assessment of needs and family reunification. In May 2015, Governor Inslee signed the Homeless Youth Act placing the oversight and management of CRC's with the Department of Commerce. CRC's will transition to the Department of Commerce and oversight of the facilities will transfer to the Office of Homeless Youth Prevention and Protection on January 1, 2016.

Secure Crisis Residential Centers (S-CRC)

S-CRCs provide twenty-four hour availability for short-term placements for runaways placed by law enforcement. The S-CRCs are either facility secure or staff secure, but otherwise operate as other CRCs,

with an emphasis on assessment of needs and family reunification. Staff secure CRCs have placement for youth for up to fifteen days. Detention CRCs can provide placement for up to five days. These facilities were mandated by the "Becca Bill" legislation passed in 1995. In May 2015, Governor Inslee signed the Homeless Youth Act placing the oversight and management of S-CRC's with the Department of Commerce. S-CRC's will transition to the Department of Commerce and oversight of the facilities will transfer to the Office of Homeless Youth Prevention and Protection on January 1, 2016.

Children's Hospital Alternative Program (CHAP)

A recent Mental Health initiative implementing Wraparound with Intensive Services created a direct provision of services formally delivered under CHAP. Therefore, the CHAP contracts were not renewed in July 2014.

Child Placing Agency (CPA)

CPAs provide licensed foster homes and other contracted services such as Parent/Child/Sibling Visitation Services, Follow-up Care Services, Borrowed Home Services, Respite Care Services, and Case Aide Services, and can help manage some case responsibilities.

Education and Training Voucher Program (ETV)

The federal CHAFEE Independence Act was amended in 2001 and authorizes funding to the states to provide financial assistance to youth who have aged out of foster care and are attending post-secondary institutions. Youth who are eligible for this program may receive assistance with their cost of education up to \$5,000 per academic year. Youth enrolled in this program before age 21 years may continue to receive this service until age 23 provided they are making satisfactory progress towards the completion of their program.

Extended Foster Care Program (EFC)

In 2011, the Washington state legislature passed a law allowing Washington to extend foster care services to youth between the ages of 18 and 21. This legislation takes advantage of the Federal Fostering Connections for Success and Increasing Adoptions Act of 2008. Youth participating in this program remain dependents of the state of Washington while they complete secondary or post-secondary education programs, including vocational or technical training, and participating in programs or activities designed to promote or remove barriers to employment. On March 1, 2015, CA expanded this program to include youth working 80 hours or more a month. The final category, youth not able to engage in any of the activities due to a documented medical condition, will be become effective on July 1, 2016.

Family Foster Home Care Services

Foster homes provide 24 hour care for children to age 18 and young adults over 18 in EFC who need temporary or extended out-of-home placement due to child abuse, neglect or family conflict. Foster care is provided by licensed foster parents, unlicensed relative caretakers or other approved suitable persons and is viewed as a short-term solution to an emergent situation. The goal of foster care services is to return each child home safely or to find another safe permanent home as quickly as possible. Foster families are assessed for their potential as a permanent resource through the Unified Home Study.

HOPE Centers

The Washington state Homeless, Youth Prevention/Protection and Engagement Act (HOPE) passed by the legislature in 1999 created HOPE Centers and Responsible Skills Living Programs. HOPE Centers are temporary residential placements for street youth. Youth can remain in a HOPE Center for up to 60 days while they receive assessment services and a permanent placement is identified. HOPE Centers are intended to stabilize an adolescent, perform comprehensive assessments of the youth's physical and

mental health, identify substance abuse problems and educational status, and develop a long-term permanent plan. In May 2015, Governor Inslee signed the Homeless Youth Act placing the oversight and management of HOPE Centers with the Department of Commerce. HOPE Centers will transition to the Department of Commerce and oversight of the facilities will transfer to the Office of Homeless Youth Prevention and Protection on January 1, 2016.

Responsible Living Skills Program (RLSP)

The Washington state Homeless, Youth Prevention/Protection and Engagement Act (HOPE) passed by the legislature in 1999 created HOPE Centers and RLSPs. RLSPs offer permanent placement settings and independent living skills to youth who are considered “street youth” and who agree to participate fully in the program. If a caseworker determines that a placement in a RLSP would be most appropriate placement given the youth’s current circumstances, the youth does not have to be considered a “street youth”. Eligible youth are between the ages of 14 and 18; however, priority is given to youth between the ages of 16 and 18. This program provides long-term housing, assessment, and life skills training to youth to help transition into adulthood. This program currently has 32 beds statewide. The RLSP may serve as a permanent placement for dependent youth who will exit from foster care into independent living at age 18. Youth must not have a permanent plan of return home.

Independent Living Services (ILS)

The federal CHAFEE Foster Care Independence Act (1999) requires states to identify youth who are likely to remain in foster care until age 18 and to provide those youth with a variety of ILS. Services include education, training, and support in the areas of educational stability and achievement, vocational training, career exploration, mentoring, employment placement and retention, daily living skills and avoidance of high risk behavior. Washington state administers these services to youth in state care through community-based and tribal contractors. ILS is funded primarily through federal grant monies.

Transitional Living Services (TLS)

The federal CHAFEE Independence Act was amended in 2001 and directs states to deliver transitional living services to young adults in EFC and former foster care recipients between the ages of 18 and 20. TLS include assistance in accessing safe and stable housing, employment training, placement and retention services, and support toward the attainment of either a high school diploma or General Education Development (GED) certificate. This service is provided through the IL Program.

Street Youth Services

Street Youth Services consist of community-based outreach and case management targeting youth engaged in life styles characterized as homeless. These youth, referred to as street youth, are living away from their homes and may be chemically dependent, actively involved in prostitution, or involved in delinquent behaviors. Services are aimed at engaging and assisting youth in reducing risky behaviors and ending their homelessness. In May 2015, Governor Inslee signed the Homeless Youth Act placing the oversight and management of Street Youth Outreach services with the Department of Commerce. Street Youth services will transition to the Department of Commerce and oversight of the facilities will transfer to the Office of Homeless Youth Prevention and Protection on January 1, 2016.

Social Security Administration Program for Children in Foster Care

CA has a specialized program that identifies children in foster care with disabilities and applies for Supplemental Security Income (SSI) on their behalf. The program also applies for SSA Title II benefits based on the retirement, death or disability of a parent. These monthly benefits are placed into trust fund accounts for the child’s personal benefit and assistance with reimbursement of the child’s foster home and group care expenses. These benefits follow children when they leave care and are frequently

part of the reunification plan. In March 2015, there were approximately 750 children in foster care who qualified for SSI benefits and 450 children who qualified for Social Security Title II benefits.

Other Foster Care Services

Interim and Receiving Care Services

Intensive emergency placement resources with contracted agencies are available for children and youth pending family reunification, less restrictive placement, or other long term permanent resource. Family receiving homes provide emergency placement services for children and youth removed from their homes because of abuse, neglect or family conflict.

Foster Care Assessment Program (FCAP)

FCAP is a statewide contracted program which provides intensive multi-disciplinary assessments of children and youth who have complex challenges and are identified by CA according to a set list of eligibility requirements. These children and youth are in need of intensive planning to help achieve stability and permanency.

Pediatric Interim Care (PIC)

PIC provides support services to the families of drug/alcohol-affected children under the age of three years. Support services to the families may include specialized group care, foster care, family support, foster family training and support, aftercare services, wraparound services and/or other services. There are currently three Pediatric Interim Care programs available in Washington state. One is a facility-based program that provides care and medical support to drug-affected infants for up to 45 days. Another provides care and intensive services to drug-affected infants and children, age birth to three years, through trained foster homes. The third program provides support services, but no placements for drug affected children aged birth to three. Services are provided directly to the child through the foster parents, relative caregivers, and/or the birth parents to promote the child's well-being and provide training to the families on the particular needs of drug-affected children.

Transportation and Supervised Visitation

Parent/child/sibling visit contracts provide transportation and supervision for visits between children in out-of-home care and their siblings and families; essential services that support family reunification.

Family Support Services

Public Health Nurses Early Intervention Program (EIP)

EIP is a home visiting nurse program that addresses health conditions, physical growth, child development, social-emotional health, parenting skills, and home safety issues for children served by CA. Trained public health nurses provide voluntary in-home services, which can prevent the need for more intrusive interventions for at-risk families with young children.

Child Care

Child care programs are available for families and children with an open case and a case plan that includes child care. Parents, unlicensed relative and suitable persons placements, and licensed foster parents are eligible for child care when the case plan includes child care as a service needed for the best interest of the child. Enrollment in Head Start and the Early Childhood Education Assistance Program, the state funded preschool, for eligible children needs to be ruled out prior to enrollment in a traditional child care program. The Department of Early Learning is implementing a quality rating tiered reimbursement system for child care programs. As this program grows it will impact how child care programs are selected for the children and families we serve. CA implemented a child care payment structure for child care provided during "non-standard" hours. The payment rates under this policy cover child care provided overnight, and on weekends and holidays.

Crisis Family Intervention (CFI)

CFI is available to families with youth ages 12 to 18 who are in conflict or who are experiencing problems with an at-risk youth. Families may request CFI services from CA. CFI is a brief, voluntary service directed to preserve, strengthen, and reconcile families or caregivers in conflict. The focus of CFI includes working with families to resolve the immediate crisis, identify community resources to support family functioning, and develop protective supports. Services include a post-service assessment using the Child & Adolescent Needs & Strengths (CANS-F) to identify families' progress.

Family Preservation Services (FPS)

FPS is available to families identified with low to moderate CA/N allegations, whose children face "substantial likelihood" of being placed outside of the home, or to assist with reunifying a child in out-of-home care with their family. Interventions focus on resolving the immediate crisis and strengthening a family's relationships through a variety of community resources. Family Support Services will be incorporated into FPS contracts by August 2015. FPS is available to families within 48 hours of referral and is delivered by a contracted service provider. Services include:

- Use of evidence informed, evidence based, or promising practices, and
- A pre- and post-service assessment using the Child & Adolescent Needs & Strengths (CANS-F).

Intensive Family Preservation Services (IFPS)

IFPS is available to families whose children are at "imminent risk" of foster care placement or to reunify a child with his/her family from out-of-home care. Contracted community agencies provide intensive in-home therapeutic services (six to 10 hours of therapy per week) for up to 40 days, and two brief booster sessions at the request of the family's CA worker to reinforce gains and support the family using the evidence-based HOMEBUILDERS® model of service. Services are available seven days a week, 24 hours a day. IFPS focuses on improving the family's ability to overcome a crisis situation and to remain together safely.

Home-Based Services (HBS)

CA workers can purchase supplemental services for families who are at risk of having their child placed in out-of-home-care or support for families with children returning to their families following placement in foster care. HBS is individualized to meet each family's need within available resources. Services may include parent aides and counseling, as well as supports for basic needs such as clothing, shelter, employment or transportation.

Evidence-Based Programs (EBP's)

CA continues to explore additional evidenced based and promising practices to determine priorities of program delivery and examine and fill service gaps around the state. CA develops yearly plans to train more providers while supporting existing providers with consultation and additional training within our reduced budget. CA has incorporated the following evidence-based practices into our service array, including:

<i>Evidence Based Program Description</i>
<p><i>Functional Family Therapy (FFT)</i></p> <p>FFT is a family therapy used for youth ages 12 to 17 and their families. The service is focused on families in which the youth is experiencing difficulties with symptoms of conduct disorder, substance abuse, violent acting out, or families with intense family conflict. The intervention lasts between 10 to 14 sessions and focuses on developing the skills necessary for success.</p>

Evidence Based Program Description

Homebuilders

Homebuilders is an IFPS program designed to prevent out-of-home placement of children. The program is short in duration, usually four to six weeks. Homebuilders' therapists respond to families 24 hours a day, seven days a week. The program focuses on teaching parents to care effectively for their children by increasing their ability to manage child behavior, utilize appropriate discipline, and provide a safe and nurturing home environment. Therapists have a low caseload (two cases at a time) allowing them to spend a greater amount of time with the family. Therapists assist parents in enrolling in other longer term services that will help the parent maintain changes. Research has shown the program to be cost effective in reducing out-of-home placement of children.

Incredible Years Program

Incredible years is a comprehensive, developmentally-based intervention with components for parents, teachers and children (age two to seven years). It is designed to prevent and treat emotional/behavioral problems in young children by promoting children's social, emotional and academic competence and strengthening parental competence and family relationships. Interventions use a group format and deliver content through multiple methods including video, discussion, activities, role playing, and home assignments.

Parent Child Interaction Therapy (PCIT)

PCIT is a parent training program that is used for children two to seven years old. PCIT employs direct coaching of the parent to positively influence the parent's interactions with his or her child and as a result, positively influence the child's behaviors. The program is conducted in two stages. The first stage focuses on establishing a warmer, more loving relationship between the parent and child. During the second stage, parents are taught skills in how to direct their children, and are coached in how to provide safe and effective discipline in response to non-compliance. PCIT provides weekly contact in the client's home and in the community.

SafeCare

This is a parent-training curriculum for parents who are at-risk or have been reported for child maltreatment. Trained professionals work with at-risk families in their home environments to improve parents' skills in several domains. This intervention lasts between 18-22 weeks. The domains are:

- Parent-child or parent-infant interaction
- Child Health
- Home Safety and cleanliness

Promoting First Relationships

This is an intervention that strengthens parent-child relationship and develops parental understanding of the child's emotional, developmental, and behavioral needs. The intervention is focused on children ages birth to three years and their caregiver. The service is delivered in the family home and lasts between 10-16 weeks.

Triple P (Positive Parenting Program)

This intervention draws on social learning, cognitive-behavioral and developmental theory, and research into risk and protective factors associated with the development of social and behavioral problems in children.

This five level program addresses family conflict, parenting styles and managing child behaviors. Levels

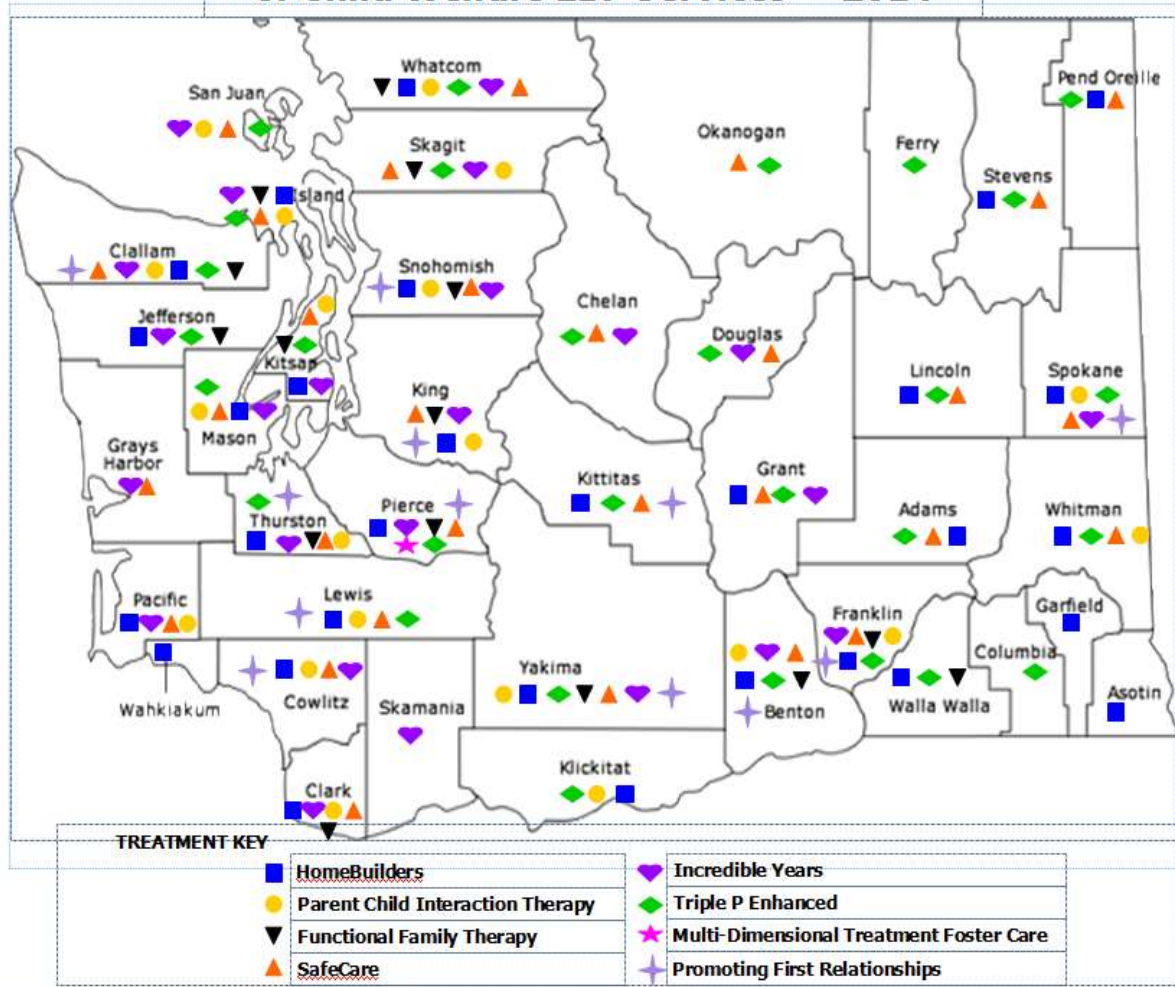
Evidence Based Program Description

four and five are used to provide intensive therapy for individual families that include relationship conflict, parental depression, and stress. Services are provided to families with children 0-18 years and depending on the needs of the family, the intervention is between 10 to 20 weeks.

Skills training includes:

- modeling
- rehearsal
- self-evaluation
- homework tasks

Washington State Availability Map of Child Welfare EBP Services – 2014



Solution-Based Casework (SBC)

CA adopted SBC as the practice model providing an overarching framework for child welfare practice. SBC was selected as the clinical model for child welfare practice in Washington state because it is a family centered practice that builds on a family’s strengths. CA workers are taught engagement skills,

interviewing techniques, family life cycle development frameworks and relapse prevention techniques. These give CA workers the skills and support they need to do their jobs well. Training and coaching is ongoing, and CA and the Alliance adjust training based on critical feedback from CA supervisors and workers.

Service Coordination

The coordination of services begins with regional program leads participating in a process, led by headquarters, of reviewing services outputs, any documentation or reports of effectiveness and any outcome data. This work is typically done at least quarterly and sometimes monthly. This work typically happens by program and involves the contracted providers delivering the service and community resource partners including other state agencies providing services. This service coordination work is organized and directed at HQ across all programs and agencies to ensure that improvement efforts contribute to the integration efforts described below. The development of the service array included families, internal, and external stakeholders and this engagement has continued as CPS FAR resources are developed in local communities.

CA staff use a structured information gathering process throughout the life of the case. The information gathered is used to develop, with the family, a CFE and a case plan that identifies individual and family objectives directed at addressing safety, permanency, and well-being needs. Through the CFE, the CA worker, child, and family identify the needed services to support the child and family objectives. The CA worker is responsible for authorizing the service, informing the service provider of the intervention goals, and monitoring progress of the service. If more than one service is needed, the CA worker supports the service integration and ensures services are supportive of the overall family goals. This is accomplished through efforts such as information sharing with service providers, individual meetings with parents and children, case staffings and shared planning meetings.

The CFE identifies services directly purchased by CA and services funded by other organizations (governmental and non-governmental). The CA worker works with the child and family to access all services needed and identified in the CFE. CA works to develop partnerships with organizations at a community and state level to support fluid access and coordination of support services.

Across CA's service array, there are many actively engaged stakeholders and partners. CA seeks to develop stakeholders at the local and statewide levels. Community based stakeholder input and support of families is accomplished through efforts of the local offices to bring a shared vision of supporting children and families.

A recent example of developing community based connections is the effort connected to the CPS Family Assessment Response (FAR). Through CPS FAR, CA local offices develop community based services and enlist the active partnership of local service agencies and organizations that provide services linked to child welfare outcomes.

At a state level, CA continues to seek to develop Memorandums of Agreement or initiatives with key partners to clearly identify how collaboration and service coordination will best serve families. CA is part of the Frontiers of Innovation (FOI) statewide initiative focusing on children birth to five in partnership with the Center on the Developing Child at Harvard. The Department of Health, Department of Early Learning, Office of the Superintendent of Public Instruction, Health Care Authority and DSHS are all partners in this work. FOI has afforded all the partners engaged in the work to focus on collaboration and alignment of services for young children and their families. Enrollment prioritization in early learning programs administered or overseen by Department of Early Learning has been one of the results of the FOI initiative.

CA will continue to look for opportunities to develop agreements at the local and state level that support integration and coordination of efforts to service children and families.

Service Description

The services detailed below are supported by IV-B funding.

Services supported by IV-B Subpart 1 funding include:

- *Crisis Family Intervention (CFI)* - CFI is available to families with youth ages 12 to 18 who are in conflict or who are experiencing problems with an at-risk youth. Families may request CFI services from CA. CFI is a brief, voluntary service directed to preserve, strengthen, and reconcile families or caregivers in conflict. The focus of CFI includes working with families to resolve the immediate crisis, identify community resources to support family functioning, and develop protective supports. Services include a post-service assessment using the Child & Adolescent Needs & Strengths (CANS-F) to identify families' progress.
- *Early Intervention Programs* – Services provided through local Health Departments to children and families.
- *Foster Care Support Goods/Services* – Concrete goods or services needed to support safe, stable placement or help maintain placement in foster care. Examples include bedding/furniture, car seats, safety locks.
- *Evaluations and Treatment* – Evaluations and treatment include services to assess and address mental health and behavioral needs to support improved safety, stability and permanency.
- *Child Protective Services Social Workers*
- *Child Welfare Services Social Workers – Foster Care*
- *Social Worker Supervisors*

Family Preservation, Family Support, Time-limited Family Reunification, and Adoption Promotion Supports and Services are available across the state and for any family who meets the service criteria. These services are supported by IV-B Subpart 2 funding:

Family Preservation

- PCIT is offered in the family home or outpatient setting and consists of live coaching in which parents are coached by the therapist through an earpiece while the therapist observes their interactions.
- FPS is offered in the family home and is designed to reinforce the strengths of the family to safely maintain children in their own homes and prevent the out-of-home placement of a child.

Time Limited Family Reunification/Family Support

- Counseling Services provides counseling, therapy or treatment services, using Evidence-Based, Promising Practice, or recognized therapeutic techniques, to assist in amelioration or adjustment of mental, emotional or behavior problems that impact child safety and stability.
- FPS is offered in the family home and is designed to reinforce the strengths of the family to safely maintain children in their own homes and prevent the out-of-home placement of a child.

Adoption Promotion Supports and Services

Medical and dental coverage is provided to every adopted child in Washington.

- Non recurring costs up to \$1500 are available to families to offset adoption related expenses.
- Pre authorized counseling services are available and follow the program requirements.

- A monthly cash payment may be provided for those who qualify.
- Post adoption families have equal access to services provided by CA.

Population at Greatest Risk of Maltreatment

CA has identified children aged 0-3 as being at greatest risk of maltreatment as reflected in the data provided in the Safety section. In the fall of 2014 Infant safety education and intervention policy was developed and implemented in response to the workgroup's findings. The policy has three components:

1. Newborn: Plan of Safe Care. This plan must be developed and documented for infants born to dependent youth and on screened in intakes where a newborn is affected by substance abuse.
2. Birth to 6 months: Period of Purple Crying. CA & DLR staff will inquire if a parent or caregiver has received information on period of purple crying and when and if the materials were received. Provide materials to the parent or caregiver and document receipt and review if they report never having received the information.
3. Birth to One year: Infant Safe Sleep. CA & DLR staff will conduct a safe sleep assessment when placing a child in a new placement setting or when completing a CPS intervention when the identified child or any other child in the home is birth to one year of age.

CA is part of the Frontiers of Innovation (FOI) statewide initiative focusing on children birth to five in partnership with the Center on the Developing Child at Harvard. The Department of Health, Department of Early Learning, Office of the Superintendent of public Instruction, Health Care Authority and the Department of Health and Social Services are all partners in this work. FOI has afforded all the partners engaged in the work to focus on collaboration and alignment of services for young children and their families. Enrollment prioritization in early learning programs administered or overseen by Department of Early Learning has been one of the results of the FOI initiative.

Evidenced based programs including Homebuilders, Incredible Years (ages 2-7), PCIT (ages 2-7), SafeCare (ages birth to 5), Promoting First Relationships (ages birth to 3 years), and Triple P (ages 2-16) are interventions for families with children within the 0-3 age range.

Additional strategies and services will continue to be developed following further analysis.

Services for Children Under the Age of Five

Children under the age of 5 have been included CA's permanency activities.

CA workers are required to assess safety, overall well-being and distinct individual developmental needs on an ongoing basis while children are placed in out-of-home care. On-going assessment is one of the tools used to match children to a permanent family with the skills and abilities to meet their short and long-term needs as well as create individualized plans to ensure referrals to appropriate services.

CA uses the CHET Program to assess all children including those from *birth to five* years old to identify well-being needs of the child within the first thirty days of entering out-of-home care. If developmental or mental health concerns are identified, a direct referral is made to local service providers. In addition, information is shared with caregivers and used by CA workers to develop an effective case plan and help identify an appropriate placement for the child.

CA workers use the following services for children birth to five to address the well-being needs and support a permanency plan:

- Early Support for Infants and Toddlers – Washington state's IDEA Part C Program that serves children birth to three when developmental concerns are identified.

- ChildFind – Referrals are made for children age three to five when developmental concerns are identified. 34 CFR 300.111 (a)(1)
- Head Start– Federally funded program available to children age three to five. The program addresses the child’s social-emotional and developmental needs and also provides family support and community resource referrals.
- Early Head Start- Federally funded program available to children birth to three that addresses children’s socio-emotional, behavioral and developmental needs. The program provides family support and community resource referrals.
- Early Childhood Education Assistance Programs – State funded pre-school program for children three to five years of age. Provides a comprehensive family and individual child assessments, support and community resource referrals as needed. If developmental concerns are identified, support and interventions are provided.
- Medicaid Treatment Child Care (Title XIX)/ ECLIPSE – Provides assessment and therapeutic interventions for developmental and mental health needs in a daycare environment. This service is no longer federally funded and has been renamed ECLIPSE. Health Care Authority is working with Department of Early Learning to reestablish the program’s ability to draw down Medicaid dollars.
- Fostering Well-Being Care Coordination Program – Provides care coordination services to children with complex health, mental health, and developmental needs
- Foster Care Assessment Program – Provides a comprehensive assessment for children experiencing challenges to permanency.
- Home Visiting-State and federally funded programs that provide home-based child and family assessment, support and community resource referrals.
- The child’s assigned worker completes a CFE/Court Plan to update the court on the child’s well-being, development, and progress towards permanency.
- EBP’s that support permanency and reunification of the family
 - PCIT
 - Incredible Years
 - Nurse Family Partnerships
 - Promoting First Relationships
 - Triple P (Positive Parenting Program)
 - Homebuilders
 - SafeCare

Services for children Adopted from Other Countries

CA provides services and supports to families of children adopted from other countries that meet the eligibility requirements for CA programs. As with families that adopt children from the child welfare system, they have equal access to services provided by CA.

Agency Responsiveness to the Community

CA continually works to increase involvement of stakeholders and community partners in child welfare work to ensure those impacted by child welfare work are included in the substantive discussions about that work.

The following committees, advisory groups, agencies and organizations are among those that provide regular and ongoing collaboration and consultation to CA:

- Alliance for Child Welfare Excellence
- Casey Family Programs
- Child Fatality and Near Fatality Review Committees
- Children’s Justice Task Force
- Foster Parent 1624 Collaboration Committee (Quarterly Statewide and Regional meetings)
- Foster Parent Association of Washington State
- Child Welfare Capacity Building Collaborative
- Partners for Our Children (POC)
- Private Agencies
- Superior Court Judges Association Subcommittee for Children and Families
- University of Washington School of Social Work
- Veteran Birth Parents Advocacy Committees
- Washington State Coalition Against Domestic Violence
- Washington State Parent Advocacy Committee
- Office of the Family and Children’s Ombuds
- Other State Agencies (e.g. AL TSA, ESA, JJRA, BHSIA, Department of Early Learning, Department of Corrections)
- Birth to Six Interagency Coordinating Council
- Catalyst for Kids
- Children Youth and Family Services Advisory Committee
- Court Improvement Advisory Committee
- Foster Parent Hubs and Regional Foster Parent Meetings
- Indian Policy Advisory Committee
- Kinship Care Oversight Committee
- Passion to Action Youth Advisory Committee
- Provider organizations
- Supreme Court Commission on Children in Foster Care
- Eastern Washington School of Social Work
- Washington Families United
- Washington State Court Appointed Special Advocates
- Washington State Racial Disproportionality Advisory Committee
- Office of Public Defense

Stakeholder Input

CA regularly requests input from many committees and stakeholders. Below are some highlights:

Indian Policy Advisory Committee (IPAC) members are delegates appointed through resolution by the 29 federally recognized tribes and by letter for the five Recognized American Indian Organizations. IPAC meets quarterly and has representatives on CA workgroups, advisory committees, and ad hoc committees to represent tribal input and concerns. IPAC children’s sub-committee meets monthly and works closely with CA on issues and policies that affect Indian Child Welfare and programs impacting Indian children and their families. [See Section VI: Consultation and Coordination between tribes and states.](#)

Children, Youth, and Family Services Advisory Committee provides input, advice, and assistance to CA regarding child safety and welfare. The Committee reviews data and provides input on potential policy and procedures and gave input on the possible effects of potential new legislation, implementation

plans for new legislation and other matters that the Assistant Secretary brings to them for review and input.

Washington State Racial Disproportionality Advisory Committee (WSRDAC) works with CA to integrate awareness of disproportionality in child welfare practices and policies. WSRDAC is regularly updated with data and information and provides advice and consultation. Specific initiatives include input into CA's practice model training, implementation of the Mandated Reporter Video Brochure focusing on racial disproportionality, enactment of a Washington state Indian Child Welfare Act (ICWA), implementation of anti-racism training (Undoing Institutional Racism) & Diversity Prejudice Reduction Model Training, (formerly Building Bridges), and evaluation of SDM Tool. Ongoing initiatives include: recommendations for the use and implementation of a Racial Equity Analysis Tool for CA policy and practices, implementation of Evidence Based Practices, and Family Support Services.

Foster Youth Advisory Board "Passion to Action" consists of 20 current and former youth recipients of CA services supported by an oversight committee, CA representatives, Casey Family Programs, and the College Success Foundation. These youth provide valuable on-going input to improve CA's ability to effectively meet the needs of children and adolescents. They are members of various committees within CA and other governmental agencies to give input on new practices and policies.

Foster Parent 1624 Collaboration Committee (Quarterly Statewide and Regional meetings) was established by legislation in 2007. Foster parents provide input on recruiting foster homes, reducing foster parent turnover rates, providing effective training for foster parents, and strengthening services for the protection of children as well as other issues. The committee works cooperatively to address issues including those raised in the foster parent survey conducted each year.

The Annual Foster Parent Survey gathers foster parent input on what is needed to properly care for the foster children in their home. The DSHS Research and Data Analysis (RDA) Unit conducts this phone survey with foster parents quarterly so information is gathered more closely to the time children were in the caregiver's home. Results are shared with CA throughout the year, so more timely responses can be made to the concerns or questions raised by the survey responses. The current survey questions focus on:

- Do you get adequate support for your roles and responsibilities as a foster parent?
- Over the last three years, how adequately has the training prepared you to care for the basic needs of the foster children placed in your home?

Foster Parent Support

Based on the FY2014 survey, most foster parents said they are supported well by Children's Administration, specific programs and offices within the Administration, and private agencies contracted by the Administration to serve foster parents.

- 79% responded positively to the question "In the past year, did you get adequate support for your roles and responsibilities as a foster parent?" (1,053 of the 1,341 who answered).
- 85% responded positively to the question "Do social workers listen to your input?" (1,115 of the 1,318 who answered).
- 81% responded positively to the question "Do you get help when you ask for it?" (1,079 of the 1,325 who answered).

Foster parents also made comments about challenges they face within the agency and were clear about their need for timely access to resources, especially health resources, financial resources, and respite care.

In the SFY 2015 survey which is still in process, many foster parents continue to offer comments about good support from the case workers, case workers listening to the caregiver's opinion and utilization of the Recruitment and Retention contractors Facebook pages for support. Challenges faced by foster parents continue to reflect timely communication, on-going need for respite and assistance in accessing services for children in care.

Foster Parent Training

The majority of foster parents are pleased with the training they receive from Children's Administration, private agencies, or specific programs.

- 87% responded positively to the question "Overall, thinking about all the training you have had in the last three years, how adequately has it prepared you to care for the basic needs of the foster children placed in your home?" (1,146 of the 1,321 who answered).
 - 85% of foster parent comments were positive about the ways foster parent training helps them care for the child
<http://ca.dshs.wa.gov/intranet/pdf/training/braam/siblingvisits2.pdf> en in their home.
- 78% of foster parents stated they valued the sense of community from interactions with their peers in training and learning from experienced foster parents.

Challenges related to training were related to: more convenient training locations and times to reduce travel and flexibility with work schedules and the availability of childcare.

The current SFY 2015 survey shows, foster parents offering comments about the broad range of training topics, instructors being "real, down-to-earth and easy to relate to" and encouraged class participation. Challenges faced by foster parents in training were related to: not so many required classes, more on-line training options and training related to developmental and behavioral challenges of children.

Casey Family Programs – CA and Casey continued their long time collaboration during 2010 – 2014 Casey staff provided technical assistance and funding in many areas of CA's work. Highlights include efforts to reduce racial disproportionality through training and hosting WSRDAC events, permanency related efforts particularly focused on finding permanent placements for long-term foster children by hosting Permanency Round Tables, planning for technical assistance to increase kinship care and subsidized guardianship, improving service support for foster children in education and early childhood development, tribal/state best practices and support, and support for CPS FAR training.

Partners for Our Children (POC) is private sector funding and is a cooperative effort between the University of Washington School of Social Work and CA focusing on areas including social work training, workforce development in child welfare, and the use of data to impact policies and services. Highlights include:

- Evaluating the practice model implementation in Washington (FY2010)
- Evaluating the link between involvement in the dependency court process and timing of permanency outcomes in Washington. POC, with the Court Improvement Training Academy, developed and implemented four-hour SBC training for judicial staff (2011)
- Developing a new training and professional development curriculum for CA as part of the Alliance for Child Welfare Excellence (2011-2012)
- Completing the development and implementation of a web based Washington state child welfare public reporting tool in conjunction with CA (2012-2013)

Parents Advisory Committee (Catalyst for Kids) CA continues to meet regularly with this Veteran Parents group, comprised of parents who have successfully reunified with their children. This parent group has

reviewed CA policies and practices and provided advice and insight into CA practices. In addition, veteran parents have met with CA executive leadership about their experiences in the child welfare system and provided feedback about the challenges faced by parents who are served by CA.

Collaboration

CA also engages in broader collaboration efforts:

- Community Child Protection Teams and Child Fatality and Near Fatality Review Teams that review cases and provide a foundation for a community response to meet client needs and improve local systems supporting families and protecting children.
- Ongoing and expanding consideration when developing policy and program changes as to who is impacted and how those who are impacted can effectively have a voice in the process.
- Increase the use and support of Evidence Based Practices.
- Implement recommendations to address findings in the Office of Family and Children's Ombuds (OFCO) Annual Reports through workgroups with community partners and stakeholders.
- Implementation of CPS Family Assessment Response.
- Continued implementation of the expansion of Extended Foster Care.
- Partnership with the Alliance to strengthen consistency of practice by enhancing the delivery of education, training, and professional development opportunities.
- Collaboration between CA, Office of the Superintendent of Public Instruction and the Courts to strengthen educational success of children and youth in foster care.
- ICW case review scheduled for fall 2015.
- Continue to implement and expand the Fostering Well-Being Program.

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

- Coordinating with the Behavioral Health and Service Integration Administration to implement WISe (wraparound with intensive services) through mental health – scheduled for July 2014.
 - Reducing racial and ethnic disparities
 - Improving the way the system identifies and responds to youth with mental health needs
 - Updated CA BRS contracts to reflect changes in children's mental health system and referral process to RSN services
- Memorandum of Understanding between CA and JJRA was revised and approved in November 2012. The MOU is designed to enhance discharge planning for youth. The MOU provides clarification of roles and responsibilities, including:
 - Clearly identify who has lead responsibility
 - Begin discharge planning at entry to JJRA facilities and county detentions
 - Create opportunities for joint involvement in shared planning meetings
- Ongoing joint DSHS meetings between Economic Services Administration (ESA), JJRA, CA, and Aging and Long-Term Support Administration (AL TSA) to more fully collaborate across administrations, work on systemic level issues such as policy and practice that cross administrations and impact one another. For example:
 - Joint staffings across administrations to ensure cross system linkages.

- Participate in System of Care efforts to increase coordination of mental health services for children and youth in foster care.
- Work with Health Care Authority on the Fostering Well-Being Program to build medical provider capacity to provide EPSDT exams for foster children, and coordinate services for children who are medically fragile or have special needs.
- Partner with the Health Care Authority to develop RFP and contract with a single Managed Care Organization to serve children and youth in foster care and adoption support programs.
- The Fostering Well-Being Program transferred to the ALTSA where they implemented many activities around EPSDT/well-child exams for foster children. Current activities include a focus on Medically Fragile children who come into care and their care coordination needs.

Agency Responsiveness Strengths and Challenges

Ongoing meaningful collaboration with stakeholders, community partners, and tribes is essential for strengthening Washington's child welfare system. Use of existing committees and stakeholder groups as well as representatives of groups and organizations on specific statewide and local region/office CQI groups will continue and expand over the coming years. CA is expanding and strengthening the use of CQI groups at the statewide and local levels. These groups, by design, include participation by community partners and stakeholders. CA has an active training and technical assistance request regarding the inclusion of community partners in local CQI processes.

CA's active engagement with a variety of stakeholder groups is seen as an area of strength. Challenges to collaboration include differing approaches across DSHS administrations, sharing information efficiently, and engaging and collaborating in a meaningful and productive way while still meeting tight timeframes for decisions and outcomes and working within budget restrictions.

Foster and Adoptive Parent Licensing, Recruitment, and Retention

Standards for Licensing

The Division of Licensed Resources (DLR) completes home studies for licensed and unlicensed caregivers for children in out-of-home care. In 2011, all home studies were centralized under DLR. This centralization allows for the completion of the unified home study process and ensures consistent application of standards for assessment. Including unlicensed caregivers in the DLR home study process allows for rapid placement of a child with a person known to them, (relative or suitable other person), while supporting consistent standards for child safety and well-being.

CA has established a standard process for all families being licensed by the state and those being certified by a private agency. There is a single licensing process that includes interviews, written narrative, and reference checks. In addition, prospective foster parents must complete required training prior to license finalization.

General licensing requirements include:

- Applicant 21 or over
- TB testing
- Background clearance
- CPR training
- First Aid training
- HIV/AIDS training
- Approved home study/facility check
- Health and safety certificate of compliance from the Department of Health and fire marshal for group care facilities and staffed residential homes licensed for 6
- Completion of caregiver core training

Once licensed, caregivers are required to be relicensed every three years. The process to be relicensed includes a home visit, renewal assessment, updated background checks, and verification of required in-service training. In addition, DLR completes health and safety visits with 10% of state licensed homes annually as required by Washington state law. DLR established a "DLR Realignment" that created a different structure. Families first being licensed or assessed are assisted by an assigned worker in the Assessment section. If the family is being licensed, this Assessment worker will continue to provide support to the family. There is another section of DLR, called the Safety and Monitoring (SAM) section. SAM workers complete DLR/CPS investigations and licensing investigations in licensed care, as well as health and safety reviews and renewals. In this way, the family maintains their original worker to provide assistance, but there are fresh eyes on the situation at time of renewal of completions of DLR/CPS investigations. In addition to the completion of caregiver core training, licensed caregivers are required to complete 36 hours of in-service training during the first three-year licensing period, 30 hours during the second three-year licensing period, and 24 hours in all subsequent three-year licensing periods. Beginning in January 2015, caregivers will be required to choose one cultural course from a list of competencies to be completed during their first two licensing periods. Foster parents caring for infants must discuss safe sleeping arrangements with their home study worker, and safe sleep and period of purple crying is also being introduced into foster parent training.

Criminal Background Checks

Background checks are required for all caregivers and household members over the age of 16. FBI fingerprints are required for those over 18. CA staff is able to access the NCIC data base in emergent

situations where there is not time to complete the national fingerprint check prior to placement with relatives or suitable others. Caregivers are required to complete the FBI fingerprinting process. Background checks completed for unlicensed caregivers can be used by DLR in the licensing process if the child remains in the home and the caregiver chooses to become licensed within a year.

DLR has a standardized process for reviewing and tracking administrative approvals and waivers. Non-safety waivers for licensing requirements such as income, sleeping arrangements, etc. can be approved. In addition, reviews for character and suitability may include criminal history, child abuse and neglect history from Washington and other states, and negative administrative actions. Information regarding reviews and decisions are documented in FamLink.

Diligent Recruitment of Foster and Adoptive Homes

Since 2012, CA has continued to contract with Olive Crest, a private provider, for wide recruitment and retention of licensed caregivers. Olive Crest's work is producing strong results in new families responding to recruitment messages and completing training. In March 2015, CA issued a Request for Proposals (RFP) to develop regional recruitment contracts that will focus on local and regional recruitment needs. Contracts are expected to begin on July 1, 2015. Details regarding these activities are included in the CA Foster and Adoptive Parent Diligent Recruitment Plan included as a separate submission with this report.

Use of Cross-Jurisdictional Resources for Permanent Placements

CA follows the Interstate Compact for Placement of Children when placing children into another state or receiving children from another state. Home studies for relatives or suitable others residing in Washington state that need to be assessed for an out-of-state child are centralized under DLR, further supporting consistency for the assessment process.

Continued focus on identification of relative resources, including out of state relatives, supports and requires the use of cross jurisdictional resources. In addition, CA utilizes a number of programs and agencies to facilitate adoptions and permanent homes for children including:

- Northwest Resource Associates
- Families Like Ours
- Adopt U.S. Kids
- Washington Adoption Resource Exchange
- Specialized Adoption Recruitment

Stakeholder Engagement

DLR engages a number of community partners to solicit input and feedback to support practice changes. As revisions were made to the WACs, DLR staff met with tribes in Washington state to obtain input. DLR also met with representatives from group care facilities and Child Placing Agencies. DLR participates in the quarterly statewide foster parent consultation (1624) meetings and meetings with tribes. Each region also holds regular Private Agency Licensing (PALs) meetings with a standardized statewide agenda. In addition to obtaining input, the meetings provide an opportunity for DLR to inform stakeholders of changes and updates.

Areas of Strength

Foster and Adoptive Parent Licensing, Recruitment and Retention is a strength for Washington state.

Among specific areas of strength are:

- Consistent licensing standards
- Centralized process for home studies and approvals

- DLR licensing allows waivers and administrative approvals to support placement
- Non-safety waivers with relatives are available to support placement of relative children including placement of sibling groups
- CA passed the IV-E eligibility review in 2014 which included background checks
- CA updated the WACs to include better organization and more easily comprehensible language. The new WACs also have additional requirements:
 - The development of training plans for all licensed families at licensure and re-licensure
 - Inclusion of the Extended Foster Care Program
 - Requirements to report assaults on the foster parent, incorrectly consumed medications, and drug or alcohol use by the child to the child's social worker
 - Requirements for emergency preparedness
 - Requirements for influenza vaccinations and pertussis immunizations for families serving children under the age of two years old
 - Increased requirements to support educational success
 - Introduction of prudent parenting, which provides the authority for foster parent to consent to certain social and extracurricular activities, "normalizing" foster children's experiences in care
 - Expectations of use of positive discipline techniques

Areas of challenge:

- Licensing barriers that cannot be resolved after a child is placed for emergent circumstances or by court order
- Objections to the new influenza vaccination requirement
- Different home study standards in different states
- The process of referrals of families being assessed for placement or continued placement of specific children needs improvement. There was a process improvement workgroup held in 2014 that made recommendations, and DLR is still in the process of implementing those recommendations. We have just begun a pilot in one office in Region 2, in which the Assessment worker will complete any necessary approvals for criminal history or negative actions on kinship homes in which a child was or will be placed. If this pilot is effective, it may be implemented in more offices.

Section III – Plan for Improvement

Plan for Improvement

Overview

The goals and action steps for 2015-2016 will result in improved outcomes for children and families served by CA. Over the course of the past year, CA has made a number of changes that will support these ongoing improvements. Included among these:

- Integration of the safety gathering questions into the main assessments used by all programs
- Development of a headquarters unit focused on collecting data and providing reports
- Implementation and resource development for CPS Family Assessment Response
- Continued development of strengthened statewide and local CQI processes
- Statewide implementation of Regional Core Training for CA workers and Supervisor Core Training for CA supervisors
- Establishing both internal and external Permanency teams.

CA developed a Racial Disproportionality Strategic Plan to target disproportionality in the Washington state child welfare system. The four objectives in this plan that support the reduction of disproportionality are:

- Use disproportionality data to guide and strategically plan the work to be done to reduce racial disproportionality
- Recognize the points in the child welfare system where overrepresentation of children of color occurs by racial group and location and decision point
- Promote racially equitable practices through leadership support, development, and accountability
- Engage, educate and collaborate with tribes and community around efforts to eliminate disproportionality

These objectives inform the ongoing identification, development, and implementation of system and practice improvements.

At the center of CA practice and practice improvements are child safety and engagement with families. Strengthening partnerships with parents, children and youth, families, caregivers, tribes, courts, and providers is critical to developing a more effective child welfare system. Although the goals and action steps are separated into categories of safety, permanency, and well-being, the impact on families and children will be more integrated. For example, strengthening engagement with parents will support improved safety, increased ability to identify appropriate resources, and as a result, timely permanency. Improved ability to accurately assess safety will result in better plans to address family needs, fewer children entering out-of-home care, children exiting care more quickly, and ultimately fewer families entering the system.

Areas of focus over the next year include:

- Strengthening practice related to safety across all programs
- Improving timely permanency and decreasing length of stay through all permanent plans for children in out-of-home care
- Maintenance of CPS Family Assessment Response as an alternate response to CPS investigations.

- Increasing activities to improve engagement with and between CA staff, families, caregivers, providers, tribes and communities
- Actively address racial disproportionality and racial disparities in the child welfare system

Building on the improvements that have already occurred in the first year of the CFSP review period, CA will primarily focus on the following goals:

- Successfully maintaining CPS FAR in the offices in which it is already implemented
- Improving Safety practice across all programs
- Improving permanency outcomes for the children in the system

To accomplish the above goals, CA will use the following action items:

- Strengthening training resources
- Developing data reports and resources to support accurate assessment of performance, practice and areas of improvement
- Strengthening integration of racial disproportionality work
- Continued implementation of existing activities including CQI teams at the headquarters and local levels
- Assessing processes to assure that they support and accurately reflect practice expectations

It is anticipated that improvements in these areas will result in improved outcomes for children and families. As these action items are completed, additional goals and activities more narrowly focused on specific areas of practice will be developed and processes for ongoing assessment of performance and improvements will be included.

Safety Action Planning



Continuous Quality Improvement (CQI) Action Plan
 Plan Purpose: **Improve child safety throughout the life of a case**
 Date: **2015-2019**

Specific, Measurable, Attainable, Relevant and Time Framed = SMART

WHAT PROMPTED THIS ACTION PLAN? The review of data reflects a need to better integrate safety assessment and processes across the life of a case/throughout all programs within CA.						
WORK GROUP LEAD / AREA ADMINISTRATOR'S NAME Safety lead/with HQ and regional support			WORKGROUP / OFFICE Individual work groups will vary with inclusion of external partners and subject matter experts to support the specific goals and action items.			
Use tab key in the last column to create additional rows within a goal.						
Goal: Develop and implement tools and resources to support staff assessment of child safety						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Create a practice guide for CPS investigators and FAR workers that includes practice competencies, critical thinking processes, policies and laws related to child safety.			9/30/2015	Guide is available and disseminated to staff	Draft is currently available.	
In conjunction with the Alliance for Child Welfare Excellence, develop and implement additional safety training modules focused on CFWS and Adoptions			9/30/2015	Training modules completed. Expectations regarding training completion issued.	A new CFWS in-service training was implemented in November, 2014. Elements include: Ability to assess safety throughout the life of a case and evaluate conditions for return home. Ability to incorporate specific safety activities and tasks, including formal and informal supports,	11/2014

					that control safety threats or substitutes diminished caregiver protective capacities	
Review the permanency training curriculum for integration of safety assessment principles			9/30/2015	Training reviewed. Safety Assessment principles integrated	This is no longer a separate training, but incorporated into the CFWS In-service Training that began November, 2014. This item will be eliminated.	
Update CA intranet program sites to include tools and resources for safety assessment			9/30/2015	Tools and resources will be available on program sites.	On-going and as needed.	
Develop and provide Child Safety Framework training specifically for FTDM facilitators with emphasis on safety plan analysis, threshold and threats, safety planning vs. service planning, and conditions for return home.		6/30/15	12/31/16	100% of FTDM facilitators and FTDM supervisors complete the training	In process.	
Create and disseminate FTDM specific CSF tip sheets for meeting facilitators			9/30/2015	Sheets will be available electronically and disseminated to FTDM facilitators	Tip Sheets for all staff currently exist and are posted on the intranet.	Completed

Create and disseminate permanency planning CSF tip sheets for permanency planning staffing facilitators.			9/30/2015	Sheets will be available electronically and distributed to staffing facilitators	Tip Sheets for all staff currently exist and are posted on the intranet.	Completed
Identify, develop, and train region and office level CSF experts for field technical assistance and support. Establish plan for ensuring ongoing availability of field subject matter experts.		6/30/15	12/31/16	Field level CSF experts will be trained. Plan will be developed	The original CSF workgroup activities have been rolled into a Workload Reduction Task Force. This Task Force has broad representation from all program areas and regions. This work continues under that workgroup umbrella.	
Alliance coaches will participate in the training for development of CSF experts		6/30/15	12/31/16	100% of Alliance Coaches will participate in CSF training	The original CSF workgroup activities have been rolled into a Workload Reduction Task Force. This Task Force has broad representation from all program areas and regions. This work continues under that workgroup umbrella.	

Complete Child Safety Framework targeted case review annually to assess safety practice across all programs			Fall 2015	CSF case reviews completed, results and recommendations completed and disseminated to leadership for review and action	The Safety Ad Hoc Case Review Tool is available as of June, 2015. The Safety Ad Hoc Case Review Tool is designed to measure compliance and quality of practice related to safety in all CA programs.	
Review and update Child Safety Framework CQI plan based on results of CSF targeted case review			1/2016 and annually thereafter	Plan updated to reflect outcomes, new/updated action items		
Expand external stakeholder/subject matter expert and CA participation from all programs on the CSF CQI team. Expand external stakeholder/subject matter expert by utilizing the Citizen Review Panels as part of the CSF CQI team.			12/2015	CQI team member list reflects expanded membership	In order to reduce duplication of work, the Action Item will be amended to incorporate the Citizen Review Panels in this work. The original CSF workgroup activities have been rolled into a Workload Reduction Task Force. This Task Force has broad representation from all program areas and regions.	

Goal: Increase workers ability to identify and facilitate family engagement with services to address safety threats						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Provide updated SDM Risk Assessment training to new staff through Regional Core Training and existing staff through e-learning.			12/31/14	95% of required staff will complete the e-learning	Incorporated into RCT and e-learning available through the Alliance.	
Implement training for staff re: linking services to safety assessment/safety threats and risks,			9/30/2015	95% of required staff will complete the training	Course available through the Alliance. Analyzing and Planning for Child Safety.	
Validate the SDM risk assessment tool			6/2016	Validation complete. Recommendations available	On-hold until Workload Reduction Task Force completes work.	
Make adjustments to SDM risk assessment tool implementation/training, etc. based on the outcome of the validation		6/30/2016	6/2017	Action plans to address recommendations developed and implemented	On-hold until Workload Reduction Task Force completes work.	
Goal: Identify practices and procedures impacting reported recurrence of abuse						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Complete a qualitative review of a sample of cases with recurrence of abuse		11/1/14	9/30/2015	Review completed, outcome data available to develop action plan		3/15/2015

Permanency Action Planning



Continuous Quality Improvement (CQI) Action Plan

Plan Purpose: **Increase the completion of timely permanent plans for children and youth**

Date: 2015-19

Specific, Measurable, Attainable, Relevant and Time Framed = SMART

WHAT PROMPTED THIS ACTION PLAN?						
The review of available data shows a decrease in timely reunifications. In addition, the median length of stay, while decreased from 2010, remains above the federal standard of 28.7 months. Racial disparities for the group of youth in care over 2 years continue.						
WORK GROUP LEAD / AREA ADMINISTRATOR'S NAME			WORKGROUP / OFFICE			
Permanency lead with HQ and regional support			Individual work groups will vary with inclusion of external partners and subject matter experts to support the specific goals and action items			
Use tab key in the last column to create additional rows within a goal.						
Goal: Strengthen statewide infrastructure to support permanency						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Develop a team with statewide representation that will meet to focus on permanency issues		7/1/14	Meetings start by 9/30/14	Meetings will be scheduled and occur monthly – primarily in person	10/1/14 – done. Meetings occur monthly	9/30/14; meetings are ongoing
Statewide permanency CQI team formed including external stakeholders. Develops and finalizes permanency CQI plan		9/30/14	12/31/14	CQI plan completed implementation in process	Team members identified. (AOC, CITA, OPD, AAG, Casey, Tribes, Disproportionality lead) First meeting of external stakeholders occurred 5/20/2015. The group will meet in-person on a quarterly basis.	On-going
Develop/identify key permanency data measures for ongoing progress and performance review. Include ability to breakdown by race/ethnicity in all measures.		9/30/14	10/31/14	List of measures, reports and reporting frequency will be available and provided	Data discussed and disseminated at CFWS/Permanency Leads meetings.	September, 2014 and on-going
Permanency training curriculum developed in partnership with the Alliance for Child Welfare Excellence and available for implementation. 10/1/14 – includes perm from day one			12/31/14	Completed curriculum	Done. Training began in November, 2014 and is ongoing.	On-going

Specific office focused concurrent permanency planning trainings along with SPM training to be offered in order to meet the more specific needs for each office.			July, 2015	Curriculum being developed. Training being scheduled to begin in Clark County July, 2015	Curriculum is being developed with stakeholder input. Training to be developed for CASA, Court admin, and CA staff across the state.	4/23/2015 and ongoing
Review and revise Permanency CQI Plan			6/30/15 and every 6 months thereafter	Progress evaluated and updated plans are completed and available for review.		
Goal: Termination petitions will be filed/compelling reasons documented timely 90% of the time by 6/30/2017						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Provide standard report reflecting performance with data available at the region/office level using case review data, data from the Administrative Office of the Courts and FamLink.			9/30/2015	Standardized report reflecting status will be available. Baseline data will be established	Data discussed and disseminated at CFWS/Permanency Leads meetings.	
Review Permanency curriculum for inclusion of timeframes, definitions of compelling reasons, and documentation process			12/31/14	Training will accurately reflect requirements and expectations	Completed. Training began in November, 2014 and is ongoing.	Ongoing
Regional representatives on the permanency team will identify regional and local office practice and jurisdictional barriers to timely filing using a standardized process		10/1/2014	1/31/15	Report clarifying issues to be addressed on a statewide basis vs. local jurisdiction	10/1/14 – Target date updated CFWS/Permanency leads meet monthly. Data is discussed.	On-going
Convene statewide workgroup including external partners to identify practice improvements to support timely filing/compelling circumstances		1/2015	3/2015	Workgroup participants identified and participate in time-limited work group	Workgroup identified and first meeting held on 5/20/2015.	On-going

Goal: Strengthen concurrent planning practice						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Conduct statewide permanency targeted case review			September 2015; annually thereafter	Completion of review. Practice strengths and challenges are identified	Working with CFSR and data to identify areas of strength and areas needing support	
Concurrent planning/lessons learned training presented at Children's Justice Conference			May 2016		Training for May 2015 was completed. Request for another training for next year has been submitted.	May, 2015 and ongoing
Goal: [REDACTED]						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED

Well-Being Action Planning



Continuous Quality Improvement (CQI) Action Plan
 Plan Purpose: **Increase engagement with children, parents and caregivers**
 Date: [REDACTED]

Specific, Measurable, Attainable, Relevant and Time Framed = SMART

WHAT PROMPTED THIS ACTION PLAN?
State and federal data related to child welfare outcomes was reviewed. Areas for focused improvement included: safety for children throughout the life of the case, ongoing accurate assessment of safety for children, and timely permanency (including reunification). Quality engagement with children, parents and caregivers will improve outcomes for children in the areas of safety, permanency and well-being.

WORKGROUP LEAD / AREA ADMINISTRATOR'S NAME Engagement lead with HQ and regional support	WORKGROUP / OFFICE Individual work groups will vary with inclusion of external partners and subject matter experts to support the specific goals and action items.
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Use tab key in the last column to create additional rows within a goal.

Goal: Increase the percentage of CFWS cases with two parents identified in FamLink by 50%

ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Establish data baseline for CFWS cases with identified parents.	[REDACTED]	[REDACTED]	6/30/2015	Accurate data baseline will be established with information at the state, region, office, and unit levels.	10/1/14 – information can be obtained from SSR01; data in this report is validated. Need baseline report only.	
Identify resources available statewide to staff for parent search.			1/31/15	Parent search resources will be identified	Guidelines for Reasonable Efforts To Locate Children and/or Parents (DSHS 02-607) revised.	Completed 12/2014
Establish and document clear processes for accessing parent search resources			1/31/15	Written procedures developed	Guidelines for Reasonable Efforts To Locate Children and/or Parents (DSHS 02-607) revised.	Completed 12/2014

Review and update protocol for locating absent parents			1/31/15	Update protocol	Guidelines for Reasonable Efforts To Locate Children and/or Parents (DSHS 02-607) revised and posted on CA intranet. Communication with the field completed.	Completed 12/2014
Disseminate updated guidance and expectations to staff regarding identification, location, and documentation of efforts regarding absent parents.			1/31/15	Guidance distributed	Guidelines for Reasonable Efforts To Locate Children and/or Parents (DSHS 02-607) revised and posted on CA intranet. Communication with the field completed.	Completed 12/2014
Update data report and disseminate to staff. Provide report with drill down capacity to regions <u>semi annually</u>.			6/30/2015	Data report updated and provided semi annually		
Goal: Streamline shared planning meeting continuum						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Complete a lean problem solving process to improve the quality of shared planning meetings			3/31/15	Process completed.	Completed 4/2015. Recommendations are in review.	4/2015 On-going
Develop shared planning meeting improvement plan for implementation and integration into CA 5 year plan based on outcome of lean problem solving process (A3).			6/30/2015	Improvement and implementation plan developed.	Completed 4/2015. Recommendations are in review.	4/2015 On-going
Goal: Automated reports will accurately reflect contact with and participation by parents in meetings and case planning						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED

Review meetings report change request; ensure it accurately captures and reflects data needed for practice improvements			12/31/15	Change request is updated to accurately reflect data needed to support practice		
Validate CA worker-parent visit report			9/30/2015	Report will accurately reflect properly documented CA worker-parent visits		
Goal: Increase the frequency and improve the quality of FTDM's						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Add Education and child development information to the FTDM agenda			11/30/2014	Agenda and introduction revised; documentation of information confirmed in review of FTDM data review	10/1/14 – these items are all part of the process to improve shared planning. Shared planning A3 completed 4/2015. Recommendations are in review.	
Incorporate standard use of skype/phone conferencing for distant parents. Explore mobile computing options.			12/31/2015	Standard guidance regarding options and how/when to use will be developed and disseminated	10/1/14 – these items are all part of the process to improve shared planning. Shared planning A-3 completed 4/2015. Recommendations are in review.	
Create and submit FamLink change request to enhance data collection including: <ul style="list-style-type: none"> Youth participation Both parent participation Primary and alternate plans 			9/30/2015	Change request submitted	10/1/14 – these items are all part of the process to improve shared planning. Shared planning A-3 completed 4/2015. Recommendations are in review.	

Utilize data to develop a quarterly report reflecting contact with/participation by parents in shared planning meetings and monthly CA worker-parent visits			9/30/2015		10/1/14 – these items are all part of the process to improve shared planning. Shared planning A-3 completed 4/2015. Recommendations are in review.	
Goal: Improve engagement with fathers						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Review Permanency Planning training module for fatherhood information			8/31/2014	Curriculum reviewed.		Completed
Update the Father’s Matter intranet site to include fatherhood activities statewide and contact information			9/30/2014 and ongoing	Website will be updated		Completed
Maintain a centralized list accessible to office and region staff reflecting current activities			9/30/2015 and ongoing	Website will be updated		
Review and update guidance regarding paternity testing. Collaborate with community partners to streamline the process.			6/30/2015	Website will be updated	Coordinate with work being done by courts.	
Review regional core and in-service training curriculum for engagement information regarding fathers. Explore updates to curriculum with the Alliance for Child Welfare Excellence if needed.			12/31/2014			Completed



Continuous Quality Improvement (CQI) Action Plan
 Plan Purpose: **Increase compliance with ICWA and assure the safety and well-being needs of Indian Children are met**

Date: **May 2015**

Specific, Measurable, Attainable, Relevant and Time Framed = SMART

WHAT PROMPTED THIS ACTION PLAN?						
Federal Annual Plan and Services Review (APSR) for ongoing coordination and collaboration with Tribes						
WORK GROUP LEAD / AREA ADMINISTRATOR'S NAME			WORKGROUP/OFFICE			
HQ ICW Program Division/Unit			CA/Headquarters			
Use tab key in the last column to create additional rows within a goal.						
Goal: Increase identification of native children						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
1. Centralization of inquiry letters		01/2014	07/31/2014	Decrease in the # of pending errors & an increase in the completion of the inquiry process	The inquiry unit process approximately 700 referrals per month, and 1400 initial inquiries.	August, 2014
2. Communication to staff regarding new process to complete inquiry & provide E-Learning.		07/31/2014		Data from the centralized inquiry unit will show staff use and understand the inquiry process.	An E-Learning has been developed in coordination with the UW Alliance and is available to staff via the Learning Management System.	Staff was notified in August and November 2014.
3. Data cleanup on initial inquiry report		8/1/2014	12/31/2014	Monthly status reports will show a decrease in the # of errors.	The data clean up began December 2014, with a focus on open cases. At the start of the clean-up there were 3,515 unduplicated	

					<p>children on the report with some activity on the ICW management page in FamLink. Of these children 1,650 had a pending inquiry and 2,250 had some activity on the ICW management page but an inquiry had not been started. As of April 30, 2015 the latest data shows 2,858 unduplicated children with activity on the ICW management page. Of these children 1,376 had a pending inquiry and 510 had some activity on the ICW management page but an inquiry had not been started.</p> <p>Region One was at 85 percent in December, 2014 and has improved in both these categories by 22 percent and is currently at 63 percent.</p>	
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					<p>Region 2 was at 23.5 percent in December 2014, and has improved in both these categories by 7.7 percent and is currently at 16 percent. They continue to have the lowest overall pending and blank records requiring follow up.</p> <p>Region Three was at 60 percent in December 2014, and has improved by 24 percent, and is currently at 36 percent. This shows a statewide improvement of 14% since the assignment rolled out for clean-up.</p>	
4. ICW Case Reviews			Biennial	Measure compliance with ICWA (asking about ancestry, completing inquiry and improving intake notification).	CA has revised the ICW Case review tool and will conduct the ICW Case Review in the late summer and early fall of 2015.	Biennial Activity
5. LICWAC/ICW Conference with workshops that focus on ICW issues to help improve practice; and coordination and collaboration with Tribes			Annually in October	Conference is held, & evaluation by participants identifies strengths and if the	The 2014 LICWAC/ICW Summit had 260 participants over 2.5 days. Average	October, 2014

				conference workshops met expectations and intent to help improve practice.	participant rating of the ICW workshops on a 5 point scale was 3.93. Planning is underway for the 2015 Summit.	
Goal: Increase notification of intakes to Tribes						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
1. Add WA State Tribes to the intake reference table in FamLink.		1/2015	6/31/2015	Change Request submitted & completed by CATS.	Change request has been submitted to CATs and is waiting prioritization for FamLink release.	October 2014
2. Ensure staff notifies Tribes of intakes using the preferred method identified by the Tribe.		7/2015	monthly	Monthly reports will track timeliness of notifications	The tracking report has not yet been developed. However, we had ongoing meetings with Tribes and CA staff to clarify the rolls and responsibilities of intake staff in notifying Tribes of an initial intake. This included revisions to a statewide Tribal contact list which is posted on the CA intranet and internet for use by CA staff.	

Goal: Active Efforts to engage with Native American Children and Families						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
1. Full implementation of in-service training for social workers, AA's, supervisors of the revised UW Alliance ICW training.			01/2015	Staff will receive training on how to engage with Native American children and families through the life of a case including intake, Native American Inquiry, family ancestry chart and engagement processes.	The UW Alliance held a series of workgroups to revise the Regional Core Training for CA caseworkers. This is now implemented and work has begun on a contract with NICWA to establish the following: 1. Advanced training 2. Supervisor/AA training	
2. Training evaluations by staff will be completed.			Ongoing at the end of training.	Evaluations will demonstrate staff understand and know how and when to apply ICWA, and the importance for making active efforts.	Staff evaluations of the ICW regional core training have been very positive. They like the mix of e-learning and being given "field assignments" to complete prior to becoming case carrying workers.	
3. Case reviews to assess practice			Biennial	Case reviews will show an increase in performance related to ICW cases.	See goal 1 #4	Biennial activity

<p>4. Increased coordination with Administration of the Courts to implement training for the judiciary to ensure best-practices related to ICWA compliance.</p>		<p>3/2014</p>	<p>Ongoing</p>	<p>The proposed Washington Tribal-State Judicial Consortium is established and curriculum development is completed.</p>	<p>Tribal court judges and state court judges met in 2013 and 2014 to discuss the potential for establishing a tribal-state court forum that will facilitate collaboration between tribal courts and state courts in Washington.</p>	<p>First regional meeting was held February 2015</p>
<p>5. Annual regional plans updated in accordance with Administrative policy 7.01 between CA regions and Tribes to record the work of the region & identify specific activities CA and the Tribe will work on over a 12 month period.</p>			<p>Reviewed quarterly</p>	<p>The 7.01 plans are submitted annually to the Assistant Secretary and a statewide roll-up report is submitted to the Office of Indian Policy.</p>	<p>The 7.01 plans have been submitted for 2014 and provided to the Office of Indian Policy. Regional staff continues to meet with Tribes on a quarterly basis.</p>	<p>Annual updates are required.</p>
<p>Goal:</p>						
<p>ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?</p>	<p>PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM</p>	<p>BEGIN DATE</p>	<p>TARGET DUE DATE</p>	<p>INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?</p>	<p>STATUS / REMARKS</p>	<p>DATE ACTION COMPLETED</p>

Disproportionality Action Planning



Plan Purpose: **Continuous Quality Improvement (CQI) Action Plan**
Decrease racial disproportionality and racial disparities in the child welfare system

Date: 05/01/2015

Specific, Measurable, Attainable, Relevant and Time Framed = SMART

WHAT PROMPTED THIS ACTION PLAN?						
There is an overrepresentation of children of color within the Washington state child welfare system						
WORK GROUP LEAD / AREA ADMINISTRATOR'S NAME			WORKGROUP / OFFICE			
Disproportionality program manager			Individual work groups will include headquarters and field staff as well as key stakeholders and representatives of groups that are overrepresented within the child welfare system			
Use tab key in the last column to create additional rows within a goal.						
Goal: Improve the quality, availability and use of data regarding racial disproportionality and racial disparities						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Data reports for key measures and indicators will include race/ethnicity detail at the state, region, and local office levels		9/1/2014	12/1/2014	Reports will be produced, disseminated quarterly, and accessible to staff at all levels of the organization	5-27-15 - A list of reports that currently have this level of detail has been developed and will be presented to the QA/CQI leads and CQI board.	
The disproportionality CQI team will perform a quarterly review of CQI objectives, goals and action planning for key performance outcomes to ensure they include race and ethnicity data.		9/1/2014	9/1/2015	Plans for improvement and outcome reports will incorporate and reference data regarding race/ethnicity	5-27-15 - The dates may need to be updated - when will the first review take place and that will be the begin date.	
Data reports will be available and used for presentations and dialogues with community partners, interest groups and policy makers		12/1/2014	12/1/2015	A trend report within the interactive spreadsheets that can be accessed by staff at all levels will be established. Presentations and handouts will include data and information	5-27-15 - When reports are actually generated will be the actual target date.	

				regarding racial disproportionality and racial disparities		
Perform an annual review of data reports to ensure they included the needed race/ethnicity detail at the state, region and local office levels.			9/30/15 – annually thereafter.	Reviews occur and reports are updated as needed.	11/5/14 – new action item	
Goal: Decrease length of stay fo Hispanic, Native American and African American children by 2016						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Obtain and disseminate baseline data at the state, region and sub-regional level for key decision points (intake, removals, out-of-home placement, length of stay and permanency outcomes) to support disproportionality action planning.		12/1/2014	12-1-15	Data will be available and disseminated to state, regional and office leadership and program leads.	5-27-15 – Data meetings have occurred, data request submitted. Target data may be updated once a report is generated.	
Goal: CA will establish racially equitable practices						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
CA leadership and staff will participate in prejudice reduction training.		8/1/2014	8/1/2016	100% of existing staff will complete training. A process to ensure new staff receive training will be established	5-27-15 – In progress	
CA will implement the Racial Equity tool to be used in the development, analysis and implementation of policies, practices and programs.		1/1/2015	1/1/2016	Training will be developed and provided and an implementation schedule for the tool will be established	5-27-15 – Implementation of the tool has begun.	

Statewide disproportionality CQI team will be formed including external stakeholders. The team will develop, finalize, implement, update and monitor the disproportionality CQI plan				CQI plan completed implementation in process	5-27-15 –new action item. Will need to be tweaked and dates added.	
Goal: CA will engage, educate and collaborate with tribes and community around efforts to eliminate disproportionality						
ACTION ITEM HOW CAN THIS GOAL BE ACCOMPLISHED?	PERSON(S) RESPONSIBLE TO COMPLETE ACTION ITEM	BEGIN DATE	TARGET DUE DATE	INTENDED OUTCOME HOW DO WE KNOW GOAL IS MET?	STATUS / REMARKS	DATE ACTION COMPLETED
Local offices will develop a community collaboration project in a targeted area to address overrepresentation of children of color		1/1/2015	1/1/2017	Projects will be developed.	5-27-15 –This goal is be refined. It is part of the Racial Equity Strategic Plan To Eliminate Disproportionality which was approved Nov. 2014.	

Section IV – Services

Child and Family Services Continuum

CA provides direct services to children and families statewide through services provided by state employees and by contracted service providers. CA is focused on matching the needs of families to ensure the right service is provided at the right time and that services address child safety, permanency and well-being.

During the past year, CA has continued to enact the legislative mandate relative to Performance Based Contracting. Specifically, in December of 2014, CA entered into an agreement with Family Impact Network (FIN). This contract, for a suite of client services, serves a catchment area including Spokane, Lincoln, Whitman, Stevens, Adams, Grant, Ferry, and Pend Orielle Counties. After an initial transitional period, wherein Family Impact Network developed organizational capabilities, a gradual rollout of privately managed client services will begin this summer. More specifically, Family Impact Network intends to begin delivery of Parent Child Visitation Services (PCV) in July of 2015. Additionally, FIN is working toward the delivery of Concrete Goods Provision, Home Based Services, and Evaluation / Assessment Services by January of 2016.

CA continues to work with current contractors to improve service effectiveness. In 2013, the Child & Adolescent Needs and Strengths (CANS-F) was adopted within multiple contracts. In 2015 a statewide meeting was held to review the CANS items. As a result, several changes were made to the CANS-F to support effective assessment of child and family needs. CA is exploring the use of the CANS-F by all contractors who provide services for placement prevention and reunification.

The CANS screening tool is also utilized by CPS FAR workers to help identify service needs of children and families.

CA is working to have in-home contracted services that are reliably successful at sustainably increasing safety in the family home. To achieve this goal services for families should:

- Address core child safety issues and parenting needs of the family that impact child safety and permanency
- Use researched and proven strategies in addressing the diverse needs of the family, and
- Be culturally relevant to the families served by CA

CA worked with veteran parents, staff, tribes, contractors, courts, public defenders, and other stakeholders to develop a new FPS contract. This new contract will become effective July 1, 2015 and includes the following enhancements:

- Implementation of quality improvement activities to support improved outcomes for children and families focused on: cultural humility; engagement and motivation; use of CANS-F; and timeliness of reports.
- Increased minimum standards for the contractor's use of therapeutic techniques and skills. CA will establish an evidence-informed and evidence based skills library that will support linking family needs to evidenced-based therapeutic interventions.
- Increased contact between caseworker and contractor at the beginning and near the end of the service to increase clarity and agreement on the goals of the service.
- Established clear elements of service to increase understanding of work authorized to help families; crisis stabilization, parenting strategies, family resources, and counseling services.
- Enhanced documentation to increase family voice in service planning.

The improved service elements and reporting will enable CA to capture data regarding specific interventions and child and family outcomes to ensure services are meeting family specific needs.

Service Decision-Making Process for Family Support Services

CA has ongoing recruitment efforts to enter into contracts with agencies and organizations when it is identified that a community has limited or no access to culturally relevant services and who:

- Meet the minimum qualification
- Demonstrate that they deliver high quality and effective services
- Are able to support families in accessing community based supports
- Demonstrate connection to communities they offer to serve

The CA worker selects the agency or organization from the list of contracted agencies and organizations to deliver the service.

Section V – Program Support

Program Support

During CY 2014, CA sought and received technical assistance from a number of organizations to support the achievement of goals and objectives and improve the child welfare system.

Specific assistance from included:

- National Resource Center for Child Protection Services—on-site technical assistance from the National Resource Center for Child Protection Services was completed. The focus of this assistance was to improve the practice and training for supervisors, managers, and CA workers on child safety assessments, developing and monitoring comprehensive safety plans, and conducting case staffings.
- National Resource Center for Diligent Recruitment – to improve and increase recruitment efforts for foster and adoptive families
- Casey Family Programs provided financial assistance, consultation and professional guidance regarding strategies to CA to improve permanency outcomes for youth in out-of-home care.

Washington’s SACWIS system, FamLink, allows for the creation of data reports which are used to identify practice strengths, capture key required data elements to ensure practice requirements are being met, and support ongoing practice improvements. Many of these reports can be accessed by staff at all levels of the agency and the data is available both in summary format and with case level detail. Reports are routinely used staff at all levels of the agency including field managers and supervisors to support good practice related to child safety, permanency and well-being.

A data unit has been established and is focused on developing and providing comprehensive, accessible reports to support practice and practice improvements. In addition to standard reports, data reports are available on request to support specific quality assurance, practice improvement, and CQI activities at statewide and local region and office levels.

Examples of information available through reports:

- Initial face to face with victims identified in CPS intakes
- Monthly caseworker visits with children
- Legal status and length of stay
- Relative versus non relative placements
- Youth turning 17/transition staffing reports

CA has an established process to support development of new reports and refinement of existing reports as new data needs are identified.

CA continues its training partnership with the Alliance for Child Welfare Excellence. Through this partnership, ongoing structured trainings are provided and issue specific trainings can be developed as needed; to meet statewide or local needs. In the summer of 2014, CA held a two day supervisors conference to focus on specific training and development needs of supervisors. This is anticipated to be an annual event.

CA headquarters program managers continue to be a resource to regions and field offices on specific program and practice areas. They use data and feedback to assess performance, and training and support needs.

In addition to the internal resources and supports identified above, CA anticipates seeking additional support over the coming year to support the integration of the APSR and CFSR as well as the planning

for the 2018 CFSR. Consultation will be especially helpful related to the integration of the federal review instrument.

Section VI – Coordination Between States and Tribes

Tribal Consultation and Coordination Plan

Consultation Process

The 2016 Annual Plan and Service Review was shared with tribes during the May, 2015 CA - IPAC subcommittee meeting. This sub-committee is made up of representatives from the 29 federally recognized tribes in Washington State. The plan was sent to tribes by email before and after the meeting and tribal representatives were asked to provide input on the proposed activities. The suggestions received have been incorporated into this section of the larger APSR document.

Ongoing Coordination Plan Description

Since the development and submission of the 2015-2019 CFSP, CA has had ongoing consultation with the 29 federally recognized tribes in Washington at both the statewide and local level.

These tribes are:

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

In addition to federally recognized tribes/nations, CA also recognizes, through policy, American Indian Organizations, and American Indian participants. The primary goal is to recognize a Government to Government relationship between the state and Indian tribes/nations through the maintenance and support of the:

- Washington State Indian Child Welfare Act
- Federal Indian Child Welfare Act
- Washington State Centennial Accord
- Washington State Basic Tribal State Agreement
- Washington State Localized Tribal State Memorandums of Understanding
- DSHS Administrative policy 7.01

The CA Assistant Secretary works closely with the Office of Indian Policy (OIP) to meet with Washington State tribes in their communities. In addition, efforts by CA to comply with federal ICWA include participation by the state and tribes at the:

- Department of Social and Health Services: Indian Policy Advisory Committee
- Indian Policy Advisory Committee: CA Sub-committee; and

- 7.01 Roundtables and consultation

The DSHS-IPAC meets on a quarterly basis and is coordinated by the OIP. This venue provides the Assistant Secretary an avenue to give updates, discuss concerns tribes may have and work closely with staff to ensure a timely and effective response. The CA-IPAC sub-committee is co-chaired by the CA headquarters ICW program supervisor. The sub-committee consists of tribal representatives delegated by their tribal councils. These representatives participate in policy and procedure workgroups, including those mandated by legislation. Minutes from this monthly meeting are regularly provided to all tribes via an email listserv that includes tribal social service directors and staff (attendance rosters and minutes are available on request). Roundtables and consultation occur at the local or statewide level and help ensure that the state is working in partnership with tribes to help Indian families.

Provision of Child Welfare Services and Protections for Tribal Children

The state supports tribes in their delivery of child welfare services through IV-E agreements. Three tribes Quinault, Makah (not active), and Lummi currently have pass through IV-E agreements with CA. Washington State was the first in the nation to have a federally recognized tribe (Port Gamble S'Klallam) apply and receive approval for direct title IV-E funds for foster care, adoption assistance, and guardianship assistance. Other tribes who may soon be implementing a direct federal IV-E agreement are Colville, Lummi, and the South Puget Intertribal Planning Agency (for Nisqually and Squaxin Island Tribes). Muckleshoot Tribe has been a IV-E developmental grantee since October 2012.

Updating the local Memorandums of Understanding (MOU) with the Tribes remains a priority of CA and is part of the CA strategic plan. As of May, 2015 we have [completed and signed 12 MOUs](#) and 17 others are in process. The MOUs use a [standard format](#) but allow for tribes to customize the delivery of child welfare services (provided by the state) across all programs that specifically meet the needs of the tribe. In addition, CA pays for services for Indian children in the custody of a federally recognized tribe as requested by the tribe. Tribes may also access CA funded services by opening a tribal payment only case with CA.

Credit Report Requirement

CA is completing agreements with the three credit bureaus to complete the credit reports electronically for foster children aged 16-18. Concurrently, Children's Administration Technology Services is working to implement an electronic process "batch" to provide the required information to the credit bureaus.

CA will share the electronic process of obtaining credit reports with tribes when details have been finalized. The tribes will have the option of entering into their own contract with the credit bureaus or providing eligible youth's information to CA who will complete the credit check process and provide results to the tribes.

CA has had difficulties establishing the agreements with all three credit bureaus. The final credit bureau has contacted CA to establish an agreement. In order to complete the application to receive the credit reports electronically it requires CA's Assistant Attorney General and the credit bureau's legal department to negotiate terms of the agreement.

ICWA Compliance

The statewide ICW program supervisor and program manager and regional program consultants coordinate with tribes to assure state and federal ICWA compliance. Headquarters staff oversees contract management and policy collaboration with tribal staff for ICW matters throughout the state. The ICW program supervisor helps to assure communication, consultation and relationships between CA and the tribes/nations are honored. The CA: IPAC sub-committee serves as an on-going venue for Tribal representatives to voices concerns and issues related to policy and practice and the impact on Native American children and families. Local offices work directly with tribes in their area.

Statewide ICW case reviews are conducted on a biennial basis. The focus of these reviews is to assess, in detail, compliance with the federal and state Indian Child Welfare Act (ICWA) and CA ICW policy as well as the quality of the ICW practice in cases where it is believed the child is Native American. Some local offices have also agreed to coordinate with the federally recognized tribes in their catchment area to conduct ongoing ICW Case Reviews throughout the year.

Placement preference is included in the biennial ICW case reviews. The results (shown below) for the 2012 ICW case review show an improvement from 2009, and these questions are being reviewed again in 2015 ICW. These data are gathered from a targeted case review sample which is reviewed by teams made up of both CA and tribal staff.

Placement Preference	2009	2012
27. Were efforts made to identify the Tribe's placement preference?	51%	57%
28. Was the Tribe's placement preference followed?	96%	100%

Data source: 2009 and 2012 ICW Case Reviews

Placement preference is also specifically called out in the Memorandums of Understanding between CA and Washington state tribes, when requested. CA also expects the recent re-focus on timely intake notification to tribes is expected to help CA follow placement preferences early within the case and better comply with ICWA.

CA will use administrative data from FamLink and outcomes from federal and state case reviews to assess its ongoing compliance with ICWA. Monthly and quarterly meetings with tribes will continue to support communication between CA and the tribes to ensure the needs of Native American children and families are being met.

FY 2014 Planned Activities Update

- A Continuous Quality Improvement Action Plan was developed and included in the 2015-2019 Child and Family Services Plan. The action plan provides information regarding the activities CA completed in 2014 and will continue or implement over the next five years. The intent of the activities is to ensure the well-being needs of Native American children and families are being met. The CQI Action Plan has been updated to reflect activities completed in 2014 (please see the attached CQI plan).

FY 2015 Planned Activities

Specific activities the state will continue in 2015 to improve or maintain compliance with each of the five major requirements of the Indian Child Welfare Act include:

- Biennial ICW Case Review
 - This will be conducted statewide in the late summer and early fall. A full report will be available early 2016 and it will be shared with IPAC_CA.
- Training for Regional Staff
 - CA will continue coordinating with the UW Alliance to provide Regional Core Training to field staff. This includes trainings on laws, policies and procedures.
 - Tribal staff can attend these trainings.

- The UW Alliance is working with The National Indian Child Welfare Association to implement an advanced training for Supervisors. We expect the first training to be completed July 2015.
- 2015 Local Indian Child Welfare Advisory Committee Summit is a Casey supported initiative and LICWAC volunteers will be provided training on their roles and responsibilities.
 - During May IPAC CA Tribes asked that CA explore a joint conference with DSHS: Juvenile Rehabilitation Administration. We are in the process of reaching out to JRA on this request.
- Updates to the ICW policy and procedure manual will be completed.
- CA will be working with tribes on the amendments to the case review system. This requirement applies specifically when there is a child who is in the care and custody of Children's Administration. CA plans to bring this work to CA_IPAC for consultation and input and will keep tribes informed of any challenges/barriers to implementation.
- Tribal right to intervene in state proceedings
 - The Administrative Office of the Courts will continue to work with state court and tribal court judges to develop a Washington Tribal-State Judicial Consortium. Tribal court judges and state court judges met in 2013 and 2014 to discuss the potential for establishing a tribal-state court forum that will facilitate collaboration between tribal courts and state courts in Washington.
 - Membership in the consortium will be an equitable balance between tribal and state judges, and annual meetings will occur to discuss statewide issues.
 - Regional meetings are planned to further develop relationships between tribal and state court judges to discuss common issues at a local level. The first regional meeting was hosted by the Suquamish Tribe in February 2015.
 - AOC and the Superior Court Judges Association are including tribal court judges in their judicial dependency trainings and conferences. The December 2014 dependency training was well attended by tribal court judges and included mock trials to show the difference between tribal courts and state courts in adjudicating dependency cases. This exercise provided a better understanding for the judicial officers of the complexities and nuances of each court.

Coordination and Collaboration in the implementation and Assessment of the CFSP

The 2016 APSR update on ICWA compliance was sent to tribes by e-mail for review before the May 13, 2015 CA-IPAC subcommittee meeting. During the meeting tribal representatives were asked to provide edits and input. The suggestions received and accepted have been incorporated into this section of the APSR.

The entire State APSR document will be shared with tribes electronically once it is finalized.

There are 29 federally recognized tribes across Washington state. This can pose a geographical challenge for engagement. CA strives to make video conference sites available across the state at local offices. CA also works with tribal information technology staff to bridge tribes into the monthly meetings. To date this has proved challenging due to security and network issues.

CA continues to explore the most effective means for coordinating and collaborating with tribes on the goals and objectives incorporated into the APSR. IPAC is included in review and discussion of practice improvement items and there are opportunities for tribal participation in workgroups and on committees throughout the year. In the coming year, CA will work with tribal partners to identify other strategies for improved coordination and collaboration. CA will also strive to more clearly identify when assessment and practice improvements are related to specific goals and objectives in the CFSP/APSR.

Section VII – Chafee Foster Care Independence Program

Chafee Foster Care Independence Program & Education and Training Vouchers

State agency overseeing the CFCIP programs

The Washington state Department of Social and Health Services, CA, administers, supervises and oversees the Title IV-E program and the Chafee Foster Care Independence Program (CFCIP). The two Chafee funded programs, Independent Living (IL) and Educational and Training Vouchers (ETV), are part of an array of services available to youth transitioning from state foster care.

Independent Living Program

Washington state is divided into six regions for purposes of the IL Program. Each region has an IL Coordinator that supports and monitors eligibility, financial records and program compliance and is responsible for establishing IL program contracts with local providers. CA currently serves approximately 2,342 youth/young adults (not including Tribal youth) in the contracted IL program. Washington participates in national evaluations on the impacts of the programs in achieving the purposes of CFCIP.

IL Eligibility

To be eligible for the IL Program, youth must be at least 15 years old or older (through their 21st birthday) and in foster care in an open dependency action through CA or a tribal child welfare agency for at least 30 days after their 15th birthday. Once youth are determined eligible, they remain eligible until age 21 even if they have achieved permanence (such as adoption, kinship guardianship, and return home).

Washington State may provide IL Services to youth who are in the care and custody of another state. If the youth is eligible to receive IL services in his/her home state the youth is eligible for services in Washington. CA contacts the IL lead in the child's home state to determine eligibility status.

IL Service Provision

There are 13 contracted IL providers and 22 Tribal IL providers in programs for all eligible youth across Washington state. Most of the state has contracted IL services although there are a few remote areas where services are limited and the local CA office provides IL services.

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

CA and IL providers recognize that youth engagement in IL services relies heavily on establishing relationships that can bring about trust. IL providers develop relationships with their youth, meeting with them frequently during the month. Youth prefer to meet one-on-one with the provider.

The IL contract includes services required by the federal Chafee Act, including the National Youth in Transition Database (NYTD) elements. Contracted IL, Tribal IL and RLSP providers have access to CA's SACWIS system (FamLink) to input services. This allows CA to collect better data on outcomes for youth in care.

The contracted services of the IL program are voluntary for youth. If a youth declines services the CA worker is responsible for ensuring they receive IL skills, complete the Casey Life Skills Assessment and develop a Learning Plan. The CA worker and foster parent must provide opportunities for the youth to practice life skills in the home or within the community. The CA worker is responsible for documenting in FamLink services pertaining to the NYTD elements that were provided to the youth by the CA worker and foster parent.

CA staff receives ongoing support in the following areas:

- Casey Life Skills On-Line Training including the Learning Plan

- NYTD elements and documentation in FamLink
- IL Services and the Court Report

CA uses the data collected for NYTD to determine if the right services are being provided and matched to each youth. Outcomes will be compared to the services being provided and reported in our SACWIS system to identify areas of service need.

IL Services

Casey Life Skills Assessment (CLSA)

CA uses the nationally recognized web-based CLSA tool provided by Casey Family Programs. The tool assesses various life domains and calculates a score based on the youth's answer to the assessment questions. CLSA reports are developed from the score, identifying the youth's greatest strengths and challenges. The assessment is administered annually to youth participating in the program and is used to develop a learning plan to address their individual needs.

- Youth ages 15 – 16 receive training on a variety of skills including life skills and educational services.
- Youth ages 16 – 18 receive training on a variety of skills including life skills, educational services and transition planning.
- Young adults ages 18 – 20 receive training on a variety of skills including life skills, education supports and services, housing assistance, and employment supports and services.

Transitional Living Services (TLS)

The IL Program delivers TLS to former foster youth ages 18 to 21 through contracts with community service providers and tribes.

Funding is available to eligible youth ages 18 to 21 on an individual basis for housing and incidental expenses. "Room and Board" is defined as assistance provided to a former foster care youth from age 18 to 21 in the form of payment for rent, utilities, deposits and housing costs. Room and board or housing costs are budgeted and tracked separately by CA to ensure that no more than 30% of the state's Chafee IL funds are used for this purpose. In FY 2014, CA spent 7.11% of the CFCIP grant on room and board assistance.

TLS case managers help youth locate affordable housing, negotiate leases and make rent and utility payments. Rent subsidies are available for youth who are employed, seeking employment, or enrolled in an educational or vocational program. If a contracted service agency is not readily available, youth may still apply for transition funds for housing through a CA office. Youth who access these funds are not part of EFC.

Responsible Living Skills Program (RLSP)

The RLSP program provides dependent youth, ages 14 to 18 in the custody of the state or tribe who are not returning to their families, and who have been unsuccessful in traditional foster care with long-term housing, assessment, and life skills training to youth to help transition into adulthood. This program has 32 beds statewide.

Foster Care to 21

Washington state offers foster care and support services to a limited number of youth age 18 to 21 pursuing post-secondary education. This program will be phased out by June 2015 as it has been replaced with EFC.

Extended Foster Care Program

In 2011, the Washington state legislature created the legal foundation for youth to voluntarily remain in care after their 18th birthday if they qualify for the program and elect to participate. This legislative action supports the federal Fostering Connections Act of 2008 and is designed to expand as Washington's fiscal resources allow. This legislation allows Washington to claim federal Title IV-E funding to support these youth in placement.

To be eligible for EFC, a youth on his/her 18th birthday must be dependent, in foster care and meet one of the following categories:

- Enrolled in high school or high school equivalency certification program
- Enrolled or intends to enroll in vocational or college program
- Participating in activities designed to remove barriers to employment
- Employed for 80 hours or more per month (effective March 1, 2015)
- A documented medical condition (effective July 1, 2016)

Youth can transition between categories and placement settings can vary to include supervised independent living settings while remaining eligible for the program. Youth in EFC receive the same case management services and supports as youth under the age of 18 in foster care.

Extended Title IV-E Assistance

EFC was created in Washington to allow the state to claim IV-E reimbursement for this population. Approximately 440 youth are participating in the Extended Foster Care program. CA is in the process of creating an EFC eligibility page in FamLink that will be able to provide more detailed demographic information on youth who are participating in the program.

CA supports youth's educational goals by allowing foster parents to maintain a bed for youth residing on a college campus while school is in session so the youth has a place to return to during school breaks. Youth have scholarships and access to IL services to support ongoing educational goals. Youth are able to reside in supervised IL settings to support being closer to educational services.

Commercial Sexual Exploitation of Children (CSEC)

In 2011 legislation was passed allowing CA to include a child who is sexually exploited in the definition of "child in need of services" petition process. A county prosecutor is able to divert cases to CA rather than charge an offender with either prostitution or prostitution loitering if it is the offender's first offense. Youth referred to CA through this statute will be connected with services for youth who have been sexually abused or assaulted. CA works with the Department of Commerce and the crime victims' assistance program to access necessary services for these youth. CA also requires all licensed secure and semi-secure crisis residential centers and Hope Centers to have a staff person or access to a person who is trained to work with the needs of sexually exploited children.

In 2014 federal legislation was implemented requiring states to develop policies and procedures to identify, document, and determine appropriate services for children who are or at risk of being victims of sex trafficking. CA is working with ACF on an implementation plan to meet this new legislation.

2015 Summary of Updates and Progress	
Activity	Status
Make It Happen is a three-day event for foster youth who will be high school juniors, seniors or incoming college freshman to visit a college campus and experience life as a student on a college campus. This provides learning opportunities on how to apply for college, the financial aid process and how to navigate a college campus, including the cafeteria.	Annual event 85 Foster youth participated in 2014
Camp to Belong Washington is a collaborative effort and partnership with Foster Family Connections, CA, and Camp to Belong NW. The event reunites siblings who are placed in separate foster homes and other out-of-home care settings and offers fun activities, emotional empowerment and much needed sibling connections.	Camp was held in August, 2014 and continues to be held annually
The Foster Club All-Star Program provides youth development opportunities by building leadership skills, providing public speaking experiences, advocacy skills and development of professional proficiencies through intensive training. The sponsored All-Star will serve a one-year term and will complete a 7-week internship to build leadership skills.	Washington state is committed to sponsoring at least one youth each year. In May 2014 Washington State sponsored its second youth.
IL providers continue to prepare and mentor foster youth ages 15 to 18 to complete high school or a High School Equivalency Exam program, and enter post-secondary education programs.	Ongoing
The Supplemental Educational Transition Planning (SETuP) program provides foster youth age 14-18 with educational planning, information, links to other services/programs and coordination with high school counselors to ensure youth have an educational transition plan.	Ongoing The program served approximately 250 foster youth between the ages of 15 and 18 annually.
The CA IL Program Manager provides assistance and training to CA workers and IL Providers on how to administer and use the online Casey Life Skills Assessment (CLSA) tool.	Ongoing
Transitional Living Services (TLS)	Washington state provided services to 1,421 TL youth
Responsible Living Skills Program (RLSP) - Washington state has thirty-two beds for foster care "street youth" who are unable to sustain placements in a traditional foster home setting.	Ongoing
Foster Youth and Alumni Leadership Summit Foster youth and alumni come together from across the state and provide presentations on key "issues" of the foster care system and request reform and system change. This function grows every year. The Washington state Supreme Court Commission on Children in Foster Care is able to hear directly from the youth about their experiences in care.	Annually 50 youth participated in July 2014
CA Foster Youth and Alumni Advisory Board: Passion to Action Retreat The advisory board meets over the summer to discuss the previous year's goals and progress and develops plans for the new year. Elections of new officers occur at the retreat.	July 2014

2015 Summary of Updates and Progress	
Activity	Status
Updated the Foster Childhood Activities to incorporate Prudent Parent Standards.	September 2014
Normalcy workgroup created “Know before you say No” Myth Busters and posted on the foster parent website and newsletter.	September 2014
Provide funding to support extracurricular activities through Chafee funds beginning at age 15	Ongoing
Partner with other funding sources within the communities to support childhood activities	Ongoing

Eight Purpose Areas

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

2016 Planned Activities	
Activity	Frequency
Convene Foster Youth and Alumni Leadership Summit	Annually
Convene Passion to Action Day Retreat	Annually
Make it Happen College Experience	Annually
Camp to Belong Washington is a collaborative effort and partnership with Foster Family Connections, CA, and Camp to Belong NW. The event reunites siblings who are placed apart in a week long camp designed to provide siblings valuable time together, allowing youth to maintain sibling relationships.	Annually in August
The Foster Club All-Star Program provides youth development opportunities by building leadership skills, providing public speaking experiences, advocacy skills and development of professional proficiencies through intensive training. The sponsored All-Star serves a one year term and will complete a 7 week internship to build leadership skills.	Annual selection in May
Regional Activities – Region 1 North – Annual Real World Conference Region 1 South – Graduation Celebration Region 2 North - Annual Graduation Dinner and Summer Event for Youth Region 2 South- Annual Independent Living Conference Region 3 North- Annual Graduation Celebration and College Push trainings Region 3 South- Graduation Celebrations, Independent Living Conference, Career Fair	Spring June Summer April April, May, June May and June

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

Activity	Status
Employment Services - Contracted IL program staff incorporate employment modules and workshops into their day-to-day work with youth and link youth to existing community resources. IL providers provide employment services all year and specifically coincide with the summer and holiday hiring, school breaks, and near the end of the school year. Youth receive:	Ongoing

Activity	Status
<ul style="list-style-type: none"> Coaching on activities related to employment readiness, interviewing, resume writing and appropriate dress Assistance gaining and retaining employment Assistance obtaining or securing items needed to gain or maintain employment, such as, a social security card, dress attire, and transportation (if possible) Assistance using community employment resources to gain employment Information on how to enroll in available Workforce Investment Act youth programs or to register with the Employment Security One Stop Career Centers (if available) 	

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

Planned Activities	
Activity	Frequency
Governors' Scholarship.	Annually
Collaborate with the Passport to College Promise Program.	Ongoing
The CA IL Program Manager will provide assistance and training to CA workers and IL Providers on how to administer and use the online Casey Life Skills Assessment (CLSA) tool.	Ongoing
CA, in partnership with the College Success Foundation and the Washington Student Achievement Council (WSAC) Passport summits in April/May	Ongoing
IL providers continue to prepare and mentor foster youth ages 15 to 18 to complete high school or a GED program, and enter post-secondary education programs.	Ongoing
The Supplemental Educational Transition Planning (SETuP) program provides foster youth age 14-18 with educational planning, information, links to other services/programs and coordination with high school counselors to ensure youth have an educational transition plan.	Ongoing

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

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

Planned Activities	
Activity	Frequency
CA partners with Washington Mentors which matches youth with adult mentors through the Big Brothers and Big Sisters program.	Ongoing
Contracted IL providers use Foster Club's Permanency Pact Tool Kit to assist in identifying significant adults the youth can trust and count on as a lifelong support person.	Ongoing

CA holds a yearly event called “We Are Family” at a Seattle Mariners game to celebrate caregivers who are important to our youth we serve. Members of Passion to Action present on what their connected and caring adult did for them while they were in foster care and beyond.	Yearly
Passion to Action Foster Youth and Alumni Advisory Board provides mentoring and support from adult supporters in the group. While the adult supporters are modeling mentorship the alumni members take the role of mentoring the younger members of the board.	Ongoing

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

Planned Activities	
Activity	Target Date
Expand EFC as required by legislation.	Ongoing
Expand Chafee funding for “housing costs” for youth who have an approved Supervised Independent Living placement.	July 2015

6. Make vouchers for education and training, including post-secondary education and available to youth who have aged out of foster care.
See [ETV Section](#) below.
7. Provide Services to youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption.
Once a youth is determined eligible for IL services, they remain eligible regardless of their permanent plan. The youth is also eligible for TLS between 18-21 years of age.
8. Ensure children who are likely to remain in foster care until 18 years of age have regular, on-going opportunities to engage in age or developmentally-appropriate activities.

Planned Activities	
Activity	Target Date
Use Shared Planning Meetings and Health and Safety visits to identify youth’s interests in extracurricular activities	Ongoing
Provide funding to support independent living activities through Chafee funds	Ongoing
Collaborate with Community partners to support youth interests in extracurricular childhood activities	Ongoing
Explore feasibility of directly paying the Department of Licensing for Washington state identicards for youth in out-of-home care.	January 2016
Update policy for foster parents consent to youth participation in drivers education	January 2016

Coordination of Services with other Federal and State Programs

- Annual Foster Youth and Alumni Leadership Summit
- Annual Make it Happen College Experience

- Camp to Belong Washington is a collaborative effort and partnership with Foster Family Connections, CA, and Camp to Belong NW. The event reunites siblings who are placed in separate foster homes and other out-of-home care.

Regional Activities

- Region 1 – Annual Independent Living “Real World” conference for foster youth age 15-18 to provide them with trainings and information on resources needed to help promote self-sufficiency.
- Region 2N – Annual Summer event for Youth
- Region 2S – Annual Independent Living Conference

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

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

Statewide Collaborations

Casey Family Programs - The Washington state IL Program Manager and other CA staff are closely aligned with Casey Family Programs. They are currently working on:

- The annual Foster Youth and Alumni Leadership Summit
- Casey Life Skills Assessment tool
- Normalcy Work Group
- Annual Passport Summit

Casey Family Programs provides technical assistance to CA on permanency for foster youth.

Ready to Rent is a program of United Way’s “Out of the Rain” Homeless Initiative in partnership with Mutual Interest and the Rental Association of Puget Sound. This program enables former foster youth to obtain housing and avoid homelessness.

CA and IL providers are focusing on pregnant and parenting teens in foster care. CA has strengthened its policies, practices and educational materials including a tool kit for youth that CA workers and caregivers can use when working with pregnant or parenting youth. Additional focus on pregnant and parenting youth will provide consistency of practices and promote healthy pregnancies and active parent engagement.

CA is partnering with the Economic Services Administration (ESA) through the Employment Pipeline. The Employment Pipeline is designed to find clients jobs in many different lines of business and help them stay employed. The model involves three critical components:

1. Identifying employers willing to work with the DSHS and our clients to offer meaningful, long-term employment opportunities, ideally building transferable skills;
2. Providing basic training and skills to meet the specific jobs available from these employers; and
3. Helping clients stay employed by providing support to resolve issues that might jeopardize job retention.

ESA Employer Navigators will collaborate with clients and businesses. Navigators will meet with clients at or near their facilities to help resolve issues that might jeopardize their ability to stay employed. This model does several things:

1. Supports businesses with trained, job-ready candidates;

2. Provides “on site” support by a DSHS Employer Navigator to work through issues that cause them to leave employment and end up back at our CSOs;
3. Provides additional access to CSO services; and
4. Reduces the client’s time away from work, increasing employer satisfaction because they don’t lose their employee for a long period while they seek services. On-site Employer Navigators will be able to serve as a “Mini-CSO” and provide assistance for a variety of needs, allowing clients to get back to work more quickly.

Regional Collaborations

The Family Unification Program (FUP) Voucher – CA and 21 housing entities across the state formed a partnership through a Memorandum of Understanding (MOU) in August 2012 for housing assistance to families and youth involved with CA. The MOU provides housing assistance to 484 families and youth to support reunification efforts, prevent out-of-home placement and assist in youth who are exiting care. The MOU supports CA permanency goals to safely reunify children with their families and partner with the community to achieve these objectives.

The Transition Collaboration in Region 2 South consists of public and private agencies who meet regularly to share resources and identify gaps in service to youth transitioning out of care. This brings local agencies together to look at the issues facing youth in transition to learn and network with each other when working with this vulnerable population.

Living Interdependently for Tomorrow’s Success (LIFTS), a collaboration between ILS and TLS providers in Region 1 South, is funded through donations to Catholic Family and Child Services. Each contribute funds primarily for individual youth assistance, based on the youth’s Ansell Casey Life Skills Assessment learning plan needs.

The Transitions Collaboration Network, chartered in 2005 by CA, Casey Family Program-Yakima, and Catholic Family and Child Services, meets periodically to discuss Federal and CA policies regarding youth who transition to adulthood from care. Inter-agency planning for upcoming activities will target housing, health care, education, and employment needs for these youth. Participants include representatives from Education Service Districts, Economic Services Administration, Division of Vocational Rehabilitation, Developmental Disabilities Administration, and contracted Child Placing Agencies.

YMCA Young Adult Services in Region 2 South operates the young adult community resource center (The Center) which opened in February 2007. The Center is the gateway to YMCA services for foster youth, foster alumni and other transitioning youth ages 15-25. The YMCA provides supportive housing, case management and referral services through its three core programs: IL Program, Transitions, and Young Adults in Transition.

Treehouse is a private non-profit agency serving foster youth in Region 2 South by providing clothing, school supplies, funding for enrichment activities, summer camp and in-school tutoring. It offers an outreach program to foster youth in middle school and a coaching to college mentoring program to youth who are college bound.

Individual Development Accounts – Treehouse, United Way of King County and the YMCA IL Program collaborate to provide Individual Development Accounts to 83 foster youth and alumni of care in King County.

Independent Youth Housing Program (IYHP)-The Department of Commerce oversees the housing program. The IYHP is a program that provides rental assistance and case management services to eligible youth who have aged out of the foster care system. The program helps prepare youth to become independent and self-sufficient so that over time they will be less dependent on state assistance. IYHP is available in ten counties in the state.

IL Training

Planned Activities	
Activity	Frequency
Collaborate with the Alliance for Child Welfare Excellence to include adolescent development and brain science in the child development curriculum for all CA workers.	Ongoing
Provide trainings to IL providers and CA workers in the Casey Life Skills Assessment and Learning Plan	Ongoing
Conduct "Specialized" training for CA workers working with adolescents pertaining to policies, adolescent development, behaviors, and community resources	Ongoing
Provide training on the new Transition Plan for Youth Exiting Care to CA workers. The document is prepopulated in FamLink and no longer stand alone word document	Ongoing
Provide continued support and training on transition planning and EFC	Ongoing
Passion to Passion to provide potential and current caregivers knowledge and shared experiences of what it is to be a youth in foster care.	Monthly

Over the next year, CA, in conjunction with the Alliance for Child Welfare Excellence, will be reviewing the continuum of training for workers and caregivers to improve the provision and integration of training regarding adolescents and young adults.

Trust Funds

Washington state does not have established trust funds for youth receiving IL or TL services.

Youth Involvement in State Agency Efforts

CA utilizes the statewide youth advisory board "Passion to Action" as the youth's point of view on all aspects of child welfare. This board consists of approximately 20 current and former foster youth from across Washington who have been recipients of services provided by CA. They provide input and recommendations regarding policy and practices. Feedback from the board aids in improving CA ability to effectively meet the needs of children and adolescents.

CA collaborates with The Mockingbird Society, an advocacy group of foster youth and alumni that identifies issues in the foster care system and works toward reforming and improving the lives of children in the child welfare system. The Mockingbird Society is invited to participate in workgroups and meetings to provide an external voice to CA.

The Mockingbird Society hosts an annual foster youth leadership summit. The group identifies topics for change and presents the topics to the Supreme Court Commission for children in foster care. The Mockingbird Society advocates for youth and works closely with the IL program manager on IL services.

Medicaid

January 1, 2014, Washington state expanded foster care medical to age 26. Youth's eligibility for the program continues as follows:

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

Washington state has a designated foster care medical unit focusing on foster youth who are eligible for medical coverage. Former foster youth are directed to contact the foster care medical team to confirm eligibility for their medical benefits to begin. CA will continue its outreach efforts to ensure all eligible former foster youth receive foster care medical benefits up to age 26. The IL program manager receives many medical coverage questions and provides education about the program and works directly with the Foster Care Medical Team to support alumni of care in accessing medical care.

Washington state does not recognize former foster youth who have aged out of another state.

Patient Protection and Affordable Care Act

CA has incorporated information regarding the importance of the continuity of health care and the access to the Medicaid to 26 program for medical coupons to purchase health care services into the transition planning process for youth. Other important information includes:

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

Tribal Participation

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

Agreements with the tribes regarding allocation of the CFCIP IL Program funds were reached in the year 2000. Each tribe received a letter offering an IL contract for this fiscal year. To date, every tribe that requested Chafee funds for their own IL program received approval for funding. Ten percent of the total IL allocation is designated for tribal contracts.

This year CA has contracts with 22 tribes. These tribes are:

Confederated Tribes of Chehalis	Cowlitz Indian Tribe	Hoh Indian Tribe
Kalispel Tribe	Lower Elwha Klallam Tribe	Lummi Nation
Makah Tribe	Muckleshoot Indian Tribe	Nisqually Indian Tribe
Nooksack Indian Tribe	Puyallup Tribe of Indians	Quinault Indian Nation
Quileute Tribal Council	Samish Indian Nation	Sauk Suiattle Tribe
Skokomish Tribe	Snoqualmie Indian Tribe	Spokane Tribe of Indians
Tulalip Tribes	Upper Skagit Tribe	Yakima Indian Nation
Colville	Jamestown	

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

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

No state Chafee funds were awarded to the tribe that received “Direct Federally Funded” IL programming. The tribe’s direct federal award was more than the state award for IL programming.

National Youth in Transition Database (NYTD)

CA continues to communicate with tribes about the federal NYTD requirement. This includes providing updates at the monthly IPAC meetings and email reminders from the Office of Indian Policy who oversees the contract. This requirement has been incorporated into the consolidated contracts as a program component.

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

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

Update

Ongoing challenges that Washington state faces with NYTD and tribes is the turnover of tribal staff at the service and manager levels. In 2010, all tribes were trained in FamLink and the IL pages, including NYTD documentation. Currently there are over half of the tribes that do not have staff trained in FamLink. The IL Program Manager has provided FamLink training when it has been requested. The IL Program Manager also was available to train on ILS programming and FamLink at the ICW Conference held in August 2014. CA discovered that many tribes do not have computer operating systems that are compatible with FamLink. Washington state is not able to support the IT complications that the tribes are experiencing. CA created a hard copy form of the NYTD documentation for tribes to complete manually as an alternative process. The forms are accompanied with the quarterly reports and will be input into FamLink. The forms are made available on the Office of Indian Policy's website.

Outreach to Tribes regarding IL

Outreach to tribes regarding CFCIP programs continues on a regular basis. The IL Program Manager and/or ETV Program Manager attend the IPAC meetings to provide information on the Chafee programs and various tribal meetings to educate tribes about IL and ETV services. CA also meets with individual tribes upon request to train on IL and ETV related topics.

Regional IL Coordinators meet regularly with the tribes to discuss IL issues and collaboration. Each region trains tribal members on the IL and education pages in FamLink.

Update

There have been yearly changes to the tribe's consolidated contract which includes ILS. CA adjusted the ILS quarterly reports to match up with the state fiscal year at the request of the tribes. Many tribes fiscal department manages the quarterly reports and were unaware of the NYTD documentation forms. The IL program manager has been in contact with the tribes to educate them on the use of the NYTD forms. This will be an ongoing process and the IL program manager plans to visit each tribe to discuss the ILS program and provide an explanation of the program requirements.

Implementation of National Youth in Transition Database (NYTD)

In October 2010, Washington state implemented the National Youth in Transition Database (NYTD). CA incorporated all of the NYTD elements (including the survey) into the SACWIS system (FamLink). As part of this process, contracted IL and RLSP providers were given access to FamLink to input IL and education services.

CA has had a successful implementation of NYTD and has met the Federal requirements and passing all submissions. CA will continue to maintain successful submissions, analyze the process, make appropriate changes to collect data and provide the services needed to transition youth to adulthood.

The development of the Quality Assurance Plan has increase awareness and priority of NYTD and the work we do for youth transitioning to adulthood from the foster care system. CA has been successful due to capturing and cleaning up NYTD error reports prior to submission. The Quality Assurance Plan includes, CATS providing the IL program manager a quarterly list of names that are missing NYTD components such as highest grade completed, if the youth is an adjudicated delinquent and tribal affiliation. This list is sent out to the regional IL leads for clean-up and provides opportunities to teach case workers the requirements of NYTD. This plan captures NYTD errors and educates staff on how to clean up or eliminate the errors. Each quarterly list has produced less names and errors as case workers and providers have been inputting the information on an ongoing basis rather than leaving the areas blank. The IL program manager is teaming with the ICW Inquiry unit to resolve tribal pending status. The IL program manager provides a list of pending names to the ICW Inquiry unit and if the documentation of tribal status has been received the unit updates the ICW status.

Reporting Data

CA has an MOU with the Research and Data Analysis Unit (RDA) to review the data collected from NYTD and identify trends, challenges and strengths of the services we provide for youth and young adults aging out of the foster care system. RDA provides in-depth and thorough reports. CA works with Passion to Action and Mockingbird youth to assist with translating the report into a “youth friendly” document to meet the needs of a broad audience. The reports are published and made available to community stakeholders, youth, legislative partners, tribal partners (through IPAC meeting) and are available on RDA’s website and on CA intranet and the foster youth website, www.independence.wa.gov.

CA is in the process of adding additional information in FamLink that will help link the data available through FamLink and the NYTD survey to identify what services are available by region. When completed, this information will be used to improve service delivery.

Implementation of Annual Credit Checks

In March 2012, Washington implemented the federal requirement that each youth age 16 and older receive copies of his or her consumer credit reports annually until he or she transition from care into young adulthood. CA staff is assisting youth in obtaining their annual free credit report until the age of 18. If the credit report returns with any discrepancies the department will help facilitate steps in correcting the discrepancies in the report.

Negotiations for an agreement should start soon. Once all three credit-reporting agencies agreements are approved, CA will develop a centralized system for requesting credit reports to alleviate impacts to caseworker workload.

Underspend of Chaffee FFY 2013 ILP Grant

The state did not fully expend these funds in the FFY 2013 grant due to under-utilization by our tribal partners

DSHS implemented a pilot project within the agency’s Office of Indian Policy, which entailed the creation of a consolidated contract with the state’s 29 federally recognized tribes. The contract encompasses ILP, ICW, mental health, and Juvenile Justice Rehabilitation services. An allotment of ILP grant funding was included in the comprehensive contract for allowable ILP services.

The state experienced a lack of timeliness in receipt of the required quarterly reports from the tribes, which may have been due to the lack of understanding of the new process under the pilot project. This required the Office of Indian Policy to intervene to obtain the necessary financial documentation. This created a significant delay in CA’s ability to recognize that the ILP grant was underspent.

We have scheduled meetings to discuss improved communication with the tribes. We will also analyze if the ILP allotment within the consolidated contract should be reduced if the tribes have a need for the

current allotment level. CA will put processes in place to help ensure the ILP grant is fully utilized or will have the ability to recognize and inform ACF in a timely manner if the grant funds will not be fully spent.

Education and Training Voucher Program (ETV)

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

ETV Eligibility

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

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

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

ETV program staff regularly coordinate with college financial aid administrators and staff to ensure awards given to eligible youth do not exceed the total cost of attendance as set by their institution. If a revision is found to be necessary this is communicated to the student and an award adjustment is made. At the time of application youth are also asked if they are receiving other forms of assistance (e.g., participation in EFC). This allows ETV staff to avoid duplication of benefits.

To ensure unduplicated awards ETV has an access database for tracking students. This allows staff to differentiate between academic years and whether a student is a new or renewal student.

ETV Service Provision

Primary expense category	2013-2014	2014-2015
Housing/Rent	39%	34%
Books	8%	11%
Groceries (Safeway gift cards)	22%	23%

2013-14 School Year

The award amount in the 2013-14 academic year increased to \$5,000 due to:

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

2014-15 School Year

Thirty-eight percent of the students awarded ETV were new participants (no prior award) and 62% of the students had previously participated in the ETV program. The average award for new and renewal students was \$3,323.

ETV Services

Updates and Progress	
Activity	Status
1. Coordinate with Port Gamble S'Klallam Tribe as needed to service youth who are eligible for both the state and tribal ETV program.	Ongoing
2. Collaborated with Passion to Action Youth for redesign of independence.wa.gov and update of publications and brochures	Completed 2014-15 school year
3. Re-examine categorization of ETV as a form of non-self-help student aid.	Completed. ETV re-categorized as self-help starting 2015-16 school year
4. Presented ETV financial aid workshops to Washington Financial Aid Administrators Conference and Washington School Counselor Association Conference.	Completed 2014-15 school year

Planned Activities (FY 2016)	
Practice, Program, and Service Enhancements	
Activity	Target Date
1. Participate in the College Success Foundation Make It Happen Event	Summer 2015
2. Re-examine adding the governor's scholarship to shared application since new legislation has made eligibility criteria similar.	Spring 2016
3. Assess feasibility of completing renewal application online	Spring 2016
4. Update independence.wa.gov as new resources and opportunities for youth are available.	Ongoing

ETV Collaboration Efforts

CA continues to coordinate with the College Success Foundation, the Washington state Achievement Council, and other agencies in an effort to maximize former foster care youth access to financial aid assistance (e.g., federal student financial aid programs, grants, scholarships, and ETV services). Staff from these agencies often "triage" student financial aid awards, and on a case-by-case basis have successfully helped students receive a financial aid award to pay their full cost of attendance. They also connect students to staff on college campuses who can help file a financial aid appeal in the event they are suspended from financial aid participation. Passport Summits were held in Spokane, Yakima, Everett and Olympia during April and May 2015 with wide participation from educators, post-secondary programs, CA workers, CASA's, youth and foster parents.

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

succeed. In addition, CA presented at several conferences this year about eligibility and access to ETV including the Washington Financial Aid Conference for school counselors and financial aid administrators and the Washington School Counseling Conference.

Underspend of the FFY2013 Chafee ETV Grant

CA did not fully utilize the ETV FFY 2013 grant due to;

- Staffing gaps; there was a program manager vacancy for 3.5 months and an ETV case manager vacancy for four months;
- CA budgetary travel restrictions which did not permit for anticipated ETV staff development; and
- Unintended consequences of Extended Foster care which resulted in fewer applicants. Extended foster care allows youth additional funding options for housing and supported work experiences that may be accessed without the requirement of attending college.

Currently the ETV program is fully staffed. Plans for strengthening the program include:

- Local staff development trainings
- Additional outreach and training with IL providers, extended foster care program managers, case workers and caregivers regarding ETV cutoff ages
- Improved processes for application and renewal

Cooperation in National Evaluations

CA will cooperate in any national evaluations of the effects of the programs in achieving the purposes of Chafee Foster Care Independence (CFCIP).

Section VIII – Monthly Caseworker Visits

Caseworker Visits with Children

CA Policy 4420 (A) [Health and Safety Visits with Children and Monthly Visits with Caregivers and Parents](#) in the Practices and Procedures Guide was updated April, 2015 and states:

1. All health and safety visits and monthly visits must be conducted by the assigned CA worker or another qualified CA staff. The number of visits conducted by another qualified CA staff is not to exceed four (4) times per year with no two (2) visits occurring in consecutive months.
2. Children in CA custody or receiving voluntary services (FVS and FRS) must receive private, individual face-to-face health and safety visits every calendar month. Additionally:
 1. The first visit must occur within one week (seven calendar days) of the child's initial placement or any change of placement. Placement of a child is not considered a health and safety visit.
 2. The majority of health and safety visits must occur in the home where the child resides. If the CA worker must visit the child in another location, the CA worker must document the reason and benefit gained.
3. For children on an in-home dependency or trial return home:
 1. All health and safety visits must occur in the home where the child resides. (This requirement does not preclude additional visits outside the home.)
 2. For children, ages 0-5 years, two in-home visits must occur every calendar month for the first 120 calendar days of an established in-home dependency or trial return home. (*One of the two visits may be conducted by a CA paraprofessional or contracted provider.*)

The content of these visits must include:

At each visit, the worker, at a minimum, completes the following activities:

1. Assess for present danger per Child Safety Section policy
2. Observation of:
 - How the child appears developmentally, physically and emotionally
 - How the parent/caregiver and the child respond to each other
 - The child's attachment to the parent or caregiver
 - The home environment (when the visit occurs in the home where the child lives). If there are changes to a licensed foster home (such as new family members) notify the licensor.
3. Discussion with the verbal child(ren) in private, separate from the parent/caregiver, either in the home or in another location where the child is comfortable.

Discussion will include:

 - Inquiry as to whether the child feels safe in their home or placement
 - Inquiry about the child's needs, wants and progress
 - Visits with siblings and parents
 - Case activities and planning such as visits and permanent plan.
4. Confirmation that each child capable of reading, writing and using the telephone has a card with the social worker's name, office address, and phone number.

Monthly Caseworker Visit Grant

The monthly caseworker visit grant is used to improve the quality of monthly caseworker visits with children who are in foster care under the responsibility of the State, with an emphasis on improving caseworker decision making on the safety, permanency, and well-being of foster children and on activities designed to increase retention, recruitment, and training of caseworkers. CA anticipates spending these funds on, but not limited to, social worker mobile devices and access, cameras, laptops, and contracted supervised visits to increase case worker retention.

Section IX – Inter-Country Adoptions

Child Adopted From Another Country Who Entered State Custody in FY 2014:

Country	Agency	Reason for Disruption/Dissolution	Plan
Ukraine	Unknown	Child was removed due to allegations that adoptive parents were physically abusive and neglectful. This child was placed during FY 2014.	Adoption

Section X – Adoption and Legal Guardianship Incentive Payments

Adoption and Legal Guardianship Incentive Payments Program

CA anticipates receiving adoption incentive funds for the 2015-2019 time period. CA allocates the adoption incentive funds to state only foster care maintenance payments in accordance with PL 105-989, which addresses that CA may use the funds for allowable activities under Title IV-B and Title IV-E. Ongoing and additional payments will be tracked to ensure timely expenditure of funds.

As authorized under Title IV-B and Title IV-E of the Social Security Act, CA may use the adoption incentive funds for a variety of services that includes, but is not limited to:

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

Section XI – Child Welfare Waiver Demonstration Activities

Child Welfare Waiver Demonstration Activities

CA will continue to use IV-B funds as in the past. The reinvestment fund will be used to support families in the CPS Family Assessment Response pathway with increased services and concrete goods. These services will help more families keep their children safely at home.

Section XII – Payment Limitations

Title IV-B Sub-Part 1 and 2

Payment Limitations - Title IV-B Subpart 1

- Washington State expenditures of Title IV-B subpart 1 funds in FFY 2005 for child care, foster care maintenance, and adoption assistance payments was \$0 and we will not be expending any of these funds in these areas in FFY 2016.
- The amount of non-federal funds expended by Washington State for foster care maintenance payments that may be used as match for Title IV-B, subpart 1 award in FY 2005 was \$0 and we will not be expending any of these funds in these areas in FFY 2016.

Non-Supplantation Requirement - Title IV-B Subpart 2

- The 1992 base year amount was \$24.257M.
- The state and local share expenditure amounts for IV-B subpart 2 for FY 2013 was \$29.364M.

Federal Law Changes - Title IV-B, Subpart 2

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

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

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
A1441 - Family Preservation Services (FPS)	Children’s Administration contracts with providers throughout Washington State for FPS. Key service providers include: <ul style="list-style-type: none"> • Community Resource Group • Community Youth Services • Institute for Family Development • Martin Luther King Family Outreach Center • Service Alternatives Inc 	N/A	N/A	N/A	N/A
A1493 – Early Family Support Services	N/A	Children’s Administration contracts with providers for EFFT throughout Washington State.	N/A	N/A	N/A

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
		Key service providers include: <ul style="list-style-type: none"> • Catholic Community Services • Grays Harbor Childrens Advocacy • Institute for Family Development 			
A1962 - Evaluations and Treatment	N/A	N/A	These medical services are provided by various medical providers in local communities. Children’s Administration contracts with providers to provide evaluations and treatment for its clients throughout Washington State. Key service providers include: <ul style="list-style-type: none"> • Behavior Intervention Program • Martin Luther King Jr. Family Outreach Center • Empowering Inc Svcs • Pioneer Human Services - Seattle • Service Alternatives Inc 	N/A	N/A
A1441 - Family Preservation Services	N/A	N/A	Children’s Administration contracts with providers for time	N/A	N/A

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
			<p>limited FPS throughout Washington State. Key service providers include:</p> <ul style="list-style-type: none"> • Community Youth Services • Institute for Family Development • Martin Luther King Family Outreach Center • Service Alternatives Inc 		
A1461 - Intensive Family Preservation Services (IFPS)	N/A	N/A	<p>IFPS is provided on a statewide basis by the following service providers:</p> <ul style="list-style-type: none"> • Brigid Collins House • Empowering Inc Services • Institute for Family Development • Peninsula Community Mental Health Center • YouthNet 	N/A	N/A
A1633 - Adoption Medical	N/A	N/A	N/A	<p>Qualified providers in local communities provide adoption medical services. Services include counseling, psychological and neuropsychological evaluations for legally free children who are the most needy and difficult to</p>	N/A

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
				adopt.	
A2123 - Social Workers (CWS Local Workers - Adoption Services)	N/A	N/A	N/A	Adoption services are provided by: Adoption Social Workers who facilitate adoptions and perform home studies.	N/A
A2181 - Adoption Program Staff	N/A	N/A	N/A	Adoption services are provided by Adoption Support program staff who negotiate adoption support agreements, and provide case management for about 17,000 children and families.	N/A
Administrative	N/A	N/A	N/A	N/A	Lease costs
Administrative	N/A	N/A	N/A	N/A	Title IVB-2 is allocated its share of indirect administrative costs through base 619, some of these cost include: Finance and Performance Evaluation Division (FPED) salaries, benefits, goods, and services.
Administrative	N/A	N/A	N/A	N/A	Assistant Secretary's Office salaries, benefits, goods, and services.

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
Administrative	N/A	N/A	N/A	N/A	Children's Administration's Technology Services (CATS) (does not include staff working on FamLink) salaries, benefits, goods, and services.

Report Attachments

- A. Child Abuse Prevention and Treatment Act (CAPTA) State Plan Requirements and Update
- B. Foster and Adoptive Parent Diligent Recruitment Plan
- C. Health Care Oversight and Coordination Plan
- D. Disaster Plan
 - (A) Emergency Management Plan
 - (B) Continuity of Operation Plan
- E. ETV Chart
- F. Training Plan