Oklahoma Department of Human Services

2020-2024 Child and Family Services Plan (CFSP)

June 28, 2019

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Attachments

1. **CWS Regions and Districts Map**
2. **CWS Organizational Chart**
3. **Oklahoma Child Welfare Services Training Plan**
4. **Oklahoma State Plan for the Prevention of Child Abuse and Neglect 2019-2023**
5. **Oklahoma Child Welfare Services Foster and Adoptive Parent Diligent Recruitment Plan**
6. **2018 Community-Based Child Abuse Prevention Grant Program Report**
7. **2019 Community-Based Child Abuse Prevention Grant Application**
8. **Children's Justice Act Three-Year Plan**
9. **Tribal Representatives**
10. **Oklahoma Child Welfare Services Health Care Oversight and Coordination Plan**
11. **Oklahoma Child Welfare Services Disaster Plan**
12. **Training Plan with Cost Allocation**
13. **Oklahoma FY20 CFS-101s Excel**
14. **Oklahoma FY20 CFS-101s PDF**
15. **Title IV-B, sub-part 1 Assurances**
16. **Title IV-B, sub-part 2 Assurances**
17. **Education and Training Voucher Certification**

Collaboration and Vision

State Agency Administering the Programs

The Oklahoma Department of Human Services (DHS) is the state agency designated to administer Title IV-B and Title IV-E programs, the Child Abuse and Prevention and Treatment Act (CAPTA), and the Chafee Foster Care Program for Successful Transition to Adulthood. DHS, an umbrella agency, was established by the state legislature in 1936. Support programs and services currently provided statewide in 77 county offices include Child Welfare Services (CWS), Temporary Assistance for Needy Families (TANF), Medicaid (SoonerCare), Supplemental Nutrition Assistance Program (SNAP), Aging Services (AS), Developmental Disabilities Services (DDS), Child Care Services (CCS), and Child Support Services (CSS).

CWS is the DHS division responsible for administering the state's child welfare services and operates under the direction of CWS Director Deborah Shropshire, M.D. The CWS Director reports directly to the DHS Director, who reports directly to the Governor's Office.

Within the CWS organizational structure are two assistant CWS directors, one responsible for field operations and the other responsible for program operations. The CWS Executive Team, comprised of the CWS Director, assistant CWS directors, and 10 deputy directors, leads the state child welfare team. A regional deputy director oversees each of the state's five regions with each providing Child Protective Services (CPS), Family-Centered Services (FCS), and Permanency Planning (PP) Services. Another deputy director oversees Foster Care & Adoption services which are provided in all five regions. The 47 district directors cover 27 state districts aligned according to District Attorneys' responsibilities and report to the five regional deputy directors, as shown in the attached ***CWS Regions and Districts Map***. To support the critical work in the five regions, five teams, each led by a deputy director, are responsible for Foster Care and Adoptions (FC&A) Field staff, FC&A Programs, CWS Programs, CWS Community Partnerships, and CWS Operations and Business Processes. See the attached ***CWS Organizational Chart.***

- The FC&A Field staff team is responsible for the provision of direct foster care and adoption services in all five regions.

- The FC&A Program team is responsible for policy, procedures, and programs for:
    - FC&A – manages recruitment, retention, and training of all resource families. FC&A assists in securing a safe, permanent home for children in DHS permanent custody through a comprehensive array of services that identifies, approves, matches, and supports adoptive families.
    - Post-Adoptions – administers financial and medical benefits, childcare, Interstate Compact on Adoption and Medical Assistance (ICAMA), Confidential and Intermediary Search, Reunion and Paternity Registries, and provides case management service to all who finalized adoption of a child in out-of-home placement.

  - Interstate Compact on the Placement of Children (ICPC) – ensures protection and services to children who are placed across state lines.

- The CWS Programs team is responsible for the policy, procedures, and programs for:
  - Protection and Prevention – CPS, FCS, Oklahoma Children's Services, Appeals, and Child Abuse and Neglect Information System (CANIS) inquiries.
  - Permanency and Well-Being – PP services, Successful Adulthood services, and trauma-informed care services. Permanency and Well-Being staff regularly communicate with other state agencies to ensure an integrated system of health exists for children and families.
  - Specialized Placements and Partnerships – residential placements, therapeutic foster care, developmental disabilities and education related services.
  - DHS Child Abuse and Neglect Hotline – referral intake process.
  - Training – develops CWS training programs and trains CWS staff.
  - Quality Assurance (QA) – ensures the quality of work in CPS, FCS, and PP as well as the continued improvement in work processes. QA staff conducts Child and Family Services Reviews, qualitative case reviews across the state, and contract performance reviews of the contracted foster care level placement providers and above.
  - Project Management – manages CWS child welfare-related business projects and program initiatives.

- The CWS Community Partnerships team is responsible for the policy, procedures, and programs for:
  - Community Collaboratives – empowering communities to develop a self-sustaining collaboration to solve specifically-identified problems or needs in the community.
  - CWS Nurse Partnership – assisting caseworkers, biological families, and foster families in understanding and meeting the medical needs of children including assistance during investigations.
  - Tribal Coordinators – collaborating with the 38 federally-recognized tribes in Oklahoma to coordinate services, Title IV-E and Title IV-B funding to tribes, and training to tribal and CWS staff on ICWA practice.
  - Community Coordination – engaging and connecting partners outside of CWS, including private, governmental, and the public, with each other and the appropriate CWS staff to create opportunities for resources and support for families and children.

- The Operations and Business Processes team is responsible for the policy, procedures, and programs for:
  - Basic Administrative Support - including personnel, benefits, and budget; contracts; coordination of services, Title XIX, and Social Security; and coordination of CWS fiscal programs with DHS Financial Services.

- Technology and Governance – manages the CWS Statewide Automated Child Welfare Information System (SACWIS) known as KIDS including system development and maintenance, SACWIS compliance, KIDS Helpdesk, KIDS application training, and federal, state, and Pinnacle Plan mandated reporting.

Collaboration

Oklahoma has engaged in substantial, ongoing, and meaningful collaboration with families, children, youth, tribes, courts, and other partners in the assessment of the current functioning, and analyses of strengths and areas of need in the child welfare system. Information gathered from focus groups, community meetings, workgroups, reviews, and reports was compiled and serves as the basis for the development of the 2020-2024 CFSP. Although not a comprehensive list, involved stakeholders are:

- Child Protection Coalition (Tulsa County)
- Child Welfare Professional Enhancement Program (CWPEP)
- Court Appointed Special Advocates (CASA)
- Court Improvement Project (CIP)
- Faith-Based Partners (Project 111, Count Me in 4 Kids)
- Foster and Adoption Parent Associations and Support Groups
- Juvenile Judges Oversight Advisory Committee (JJOAC)
- Legislative Workgroup
- Oklahoma Child Welfare Stakeholder Collaboration State Advisory Board
- Oklahoma Commission on Children and Youth (OCCY)
- Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS)
- Oklahoma Indian Child Welfare Association (OICWA)
- Oklahoma Institute for Child Advocacy (OICA)
- Oklahoma Office of Juvenile Affairs (OJA)
- Oklahoma State Department of Education (OSDE)
- Oklahoma State Department of Health (OSDH)
- Oklahoma Therapeutic Foster Care Association (OTFCA)
- Post Adjudication Review Board (PARB)
- Service Providers
- Special Review Committee
- Stakeholder Focus Groups (Child Welfare Policy and Practice Group)
- Resource Parents
- Tribal/State Collaboration Workgroup
- Tulsa Advocates for the Protection of Children
- University of Oklahoma
- Youth Service Agencies
- Youth

CWS will continue to ensure stakeholders are actively involved in CFSP implementation through ongoing meetings and work groups, along with partnering with our sister state-serving agencies to hold at minimum, annual stakeholder meetings. A key component of continuous quality improvement is engagement of stakeholders and input they provide in the improvements of child welfare practice. As implementation moves forward and additional information is gathered through case reviews and other methods, qualitative information will be able to shed insight as to the effectiveness of the collaborations that are ongoing, the results of communication occurring between service providers and CWS, and most importantly, the access and quality of services provided to children, youth, and families.

Additional details regarding collaboration and stakeholder involvement may be found throughout other areas of this CFSP.

Vision Statement

The DHS mission is to improve the quality of life of vulnerable Oklahomans by increasing people's ability to lead safer, healthier, more independent and productive lives. DHS provides help and offers hope to vulnerable Oklahoma through stronger practices, involved communities, and a caring and engaged workforce. The CWS purpose is to improve the safety, permanence, and well-being of children and families involved in the child welfare system through collaboration with families and their communities. The CWS vision is to promote strong Oklahoma families together.

In order to achieve this mission and vision, CWS, together in partnership with stakeholders, must strengthen families and prevent child maltreatment and unnecessary family separation and trauma to children and their parents. Reaching children and families sooner through prevention is the key to avoiding unnecessary trauma, disrupting intergenerational cycles of maltreatment, and achieving better outcomes for children and families. The goals, objectives, and strategies outlined in this plan, through a fundamental cultural shift within the system focusing on trauma-informed, prevention-based care, will ensure the practice, procedures, and policies in place will continue to be enhanced and will create sustainable, desired outcomes for the children and families in Oklahoma.

With the rise of the opioid epidemic, at least one in three children enters foster care because of parental drug abuse. An increasing number of them are infants and toddlers; last year, half of the children who entered foster care were younger than 5 years old. There are a number of other factors that can also disrupt a family to the point where removal is the only way to ensure a child’s safety, including alcohol abuse, incarceration, parental history of trauma and abuse, financial strains from unemployment or homelessness, extreme anger and frustration or the lack of physical care and attention. The impacts of maltreatment are costly and long lasting.

The safety and well-being of children and of all family members is paramount. When safety can be ensured, strengthening and preserving families is seen as the best way to

promote the healthy development of children. Strengthening programs and services designed to achieve measurable outcomes that are focused on prevention and protection to prevent maltreatment and the unnecessary removal of children from their families and placed into foster care will improve the safety, permanency, and well-being of children and families.

The first step in the continuum of care is keeping families together through prevention services. However, when children must be removed from their homes, CWS will support the use of family-based foster care to ensure permanency and stability in their living situations and continuity of family relationships and connections. The services and treatment programs are focused on the family as a whole; working with families as partners in identifying and meeting individual and family needs to improve their functioning and well-being. Services promote the healthy development of children and youth, promote permanency, and help prepare youth for self-sufficiency and independent living.

Services and treatment are community-based and accessible to children and families and organized as a continuum, sufficient to keep children safe and to meet the children's and families' needs. Agency capacity to serve children and families for whom prevention and reunification services are needed will be increased through strong family-centered practices involving implementation of revised training and structured and supportive supervision focused on understanding and treating safety needs, trauma, strengthening parental protective capacities, and increasing mindfulness towards the goal of improving child and family outcomes. Strong family-centered practices establish the direction, expectations, and values from which the workforce will operate, resulting in more empowered families and a more empowered agency that knows where it is going and why. CWS expects this to lead to better outcomes for children and families and a stronger and better-aligned workforce, a greater degree of internal and external collaboration, and greater service flexibility and innovation. Further, community capacity will be increased by capitalizing on partnerships to meet child and family needs through availability of effective services. Evidence-based or evidence-informed services will be identified and/or developed at a community level to promote child wellbeing, safety, and permanency, and enhance the service array.

Assessment of Current Performance in Improving Outcomes

Child and Family Outcomes

The data discussed below is from the following sources: Oklahoma 2015-2019 Child and Family Services Plan (CFSP), Oklahoma 2019 Annual Progress and Services Report (APSR), Oklahoma's Statewide Automated Child Welfare Information System (SACWIS) known as KIDS, Child and Family Services Review (CFSR) Program Improvement Plan (PIP) monitored case review data completed from 4/1/18 through 3/31/19 with periods under review ranging from 4/1/17 through 3/31/19, Round 3 CFSR Case Review baselines set in 2016, Round 3 CFSR 2016 Statewide Assessment, Round 3 CFSR Final Report 2016 produced by the Children's Bureau, and the Oklahoma Pinnacle Plan February 2019 Semi-Annual Report. Within each item discussed, the source of the data is identified.

Safety Outcomes 1 and 2
(A) Children are first and foremost protected from abuse and neglect; and (B) children are safely maintained in their homes whenever possible and appropriate.

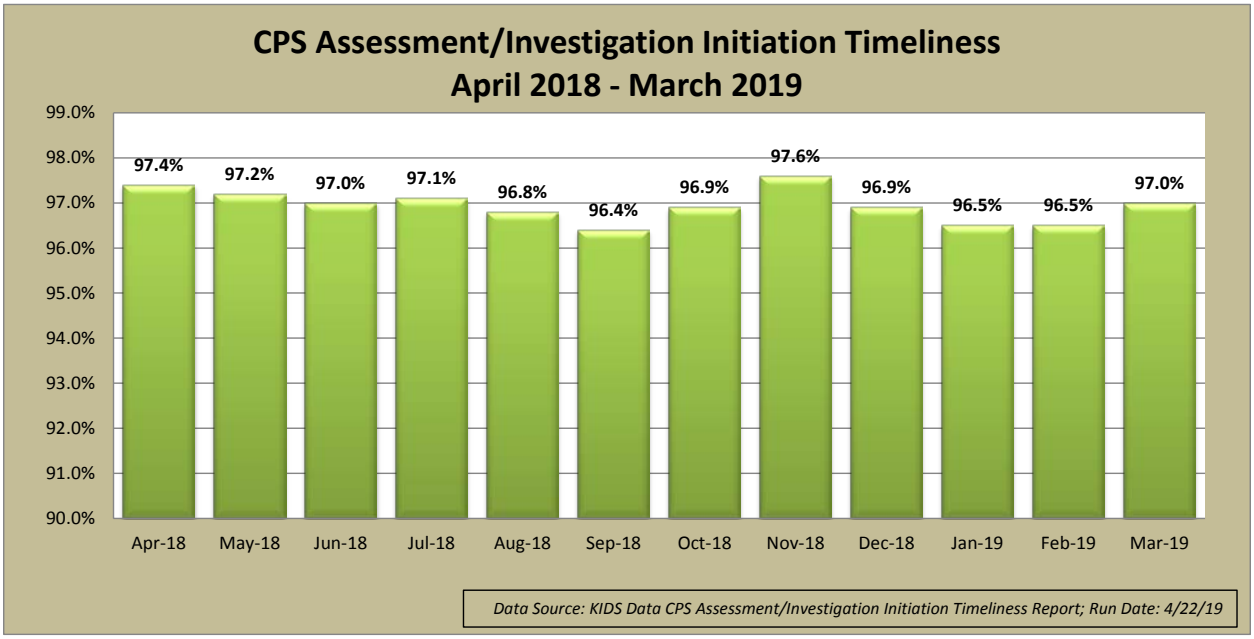
The safety of children is paramount within Oklahoma's child welfare (CW) system. When a report of abuse or neglect is received, throughout the safety assessment process, until a child is determined to be safe in his or her own home, safety is the priority. Efforts to align safety assessment practices across all programs, including the Child Abuse and Neglect Hotline (Hotline), Child Protective Services (CPS), Family-Centered Services (FCS), Foster Care and Adoptions (FC&A), and Permanency Planning (PP) are ongoing. Through key activities within the Child and Family Services Review Program Improvement Plan (CFSR PIP), all programs participate in the CFSR PIP Best Practices training that reinforces consistency within safety evaluation from program to program and challenges staff to partner with all programs to improve outcomes.

Through root cause analysis within all safety, permanency, and well-being outcomes Child Welfare Services (CWS) identified consistency and quality supervision as areas needing improvement. The CFSR PIP largely focuses on supervision development and support to ensure a strong foundation for the transfer of learning (TOL) and accountability from supervisors to field staff through the Safety through Supervision Framework. The goal of the framework is to increase the accessibility, practicality, and relevancy of daily supervision to ensure better safety, permanency, and well-being outcomes within all programs. The Safety through Supervision Framework is intended to impact all outcomes identified within this section.

Timely initiation of assessments and investigations of child maltreatment is evidence of a commitment to safety. CWS defines initiation as the moment the first attempt is made to contact the victim(s) face-to-face. CWS prioritizes accepted reports of alleged child abuse or neglect based on the severity and immediacy of the alleged harm to the child by assigning a response time as a Priority 1 (P1) or a Priority 2 (P2). A P1 indicates a

child is in present danger and at risk of serious harm or injury. A CW specialist's response to P1 allegations occurs on the same day the report is received. CWS assigns the P2 designation to all other accepted reports and establishes a response time based on the child's vulnerability and risk of harm. Initiation of P2 investigations occurs within two-to-five-calendar days of the date the report is received and initiation of P2 assessments (Alternative Response) occurs two-to-10-calendar days from the date the report is received.

Initiation timeliness is consistently a strong practice area for CWS as the following Statewide Automated Child Welfare Information System (SACWIS)/KIDS data indicates.



	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	TOTAL
% Within Policy	97.4%	97.2%	97.0%	97.1%	96.8%	96.4%	96.9%	97.6%	96.9%	96.5%	96.5%	97.0%	97.0%
# of Reports	2852	3081	2958	2854	2930	2556	3572	3002	2851	2565	2377	2826	34424
# Within Policy	2779	2994	2870	2772	2835	2464	3461	2929	2764	2474	2294	2742	33378
# Not Within Policy	73	87	88	82	95	92	111	73	87	91	83	84	1046
ALOT to Initiate (Days)	3.5	3.4	3.3	3.3	3.4	3.3	3.3	3.3	3.3	3.3	3.4	3.5	3.4

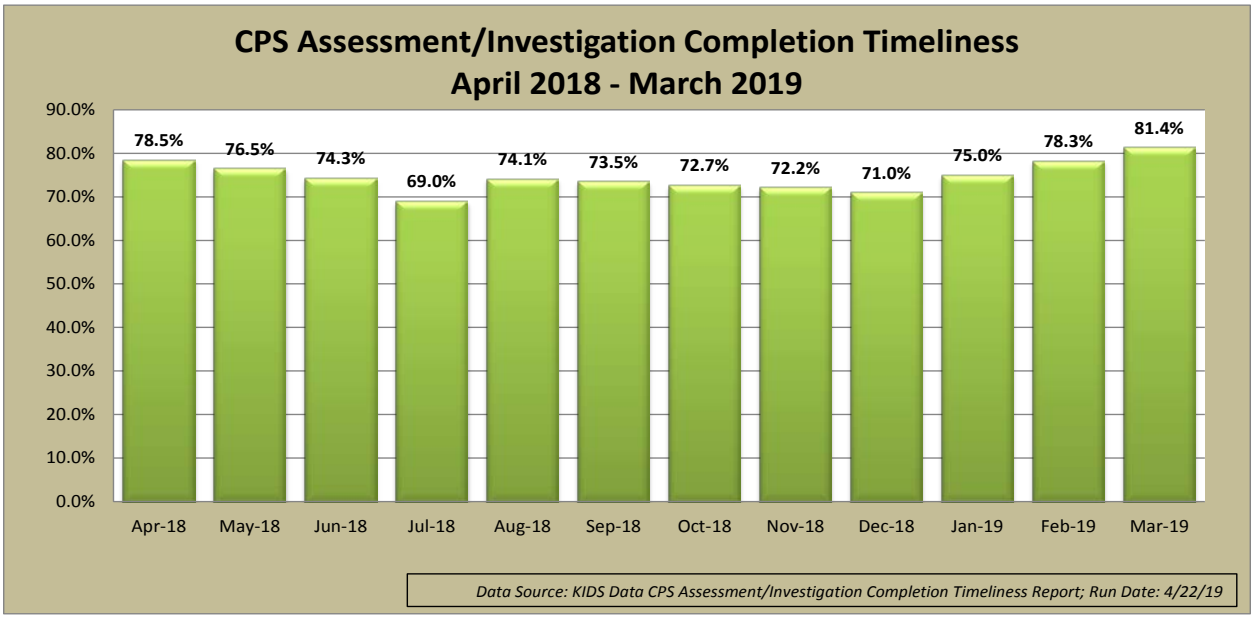
*Average length of time (ALOT)

Data Collected on 4/22/19 at 1:48am

While the initial response time to accepted reports of abuse and neglect is timely overall, follow-up attempts to make face-to-face contact with all alleged victims, per state policy, is a focus area for improvement. Identified practices and barriers that impact this outcome include a lack of follow-up attempts to complete face-to-face contacts when failed attempts occur and/or a lack of face-to-face contacts with all alleged victims within the specified timeframes, per policy requirements. These practices are impacted by lengthy drive time in rural Oklahoma, staff vacancies, and variances in caseload distribution. The following table reflects timeliness of initial face-to-face contacts.

Data Source: Case Review Data 04/2017 - 03/2019	Performance Item Ratings			Outcome Ratings			
N=119	**Strength**	**ANI**	**Cases NA**	**Substantially Achieved**	**Partially Achieved**	**Not Achieved**	**Cases NA**
Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect.				**68.91% n=82**	**0% n=0**	**31.09% n=37**	**n=9**
Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment	**68.91% n=82**	**31.09% n=37**	**n=9**				

In addition to initiation, timely completion of CPS assessments and investigations is another indicator of Oklahoma's commitment to ensuring child safety. Oklahoma continues focused efforts to address and prevent a CPS backlog. From April 2018, through March 2019, Oklahoma completed 74.6 percent of 34,225 assigned reports within required time frames. Although significant improvement occurred within this measure over the last five years, Oklahoma is currently performing below the national standard of 95 percent in CPS assessments and investigations completion timeliness. Oklahoma embraces a continuous quality improvement process and continues ongoing work to increase the thoroughness of the collected information to make appropriate and timely safety decisions.



	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	TOTAL
% Within Policy	78.5%	76.5%	74.3%	69.0%	74.1%	73.5%	72.7%	72.2%	71.0%	75.0%	78.3%	81.4%	74.6%
Completed	2837	3070	2946	2836	2920	2542	3556	2982	2835	2551	2368	2812	34255
# Within Policy	2227	2349	2190	1956	2163	1869	2584	2153	2012	1912	1853	2289	25557
# Not Within Policy	610	721	756	880	757	673	972	829	823	639	515	523	8698
ALOT to Complete (Days)	48.2	47.3	49.7	51.3	50.7	51.1	50.6	51.4	51.2	49.6	46.3	45.6	49.5

Data Collected on 4/22/19 at 1:48 am

Although the following data reflects that removing children from their homes has continued to decline in Oklahoma since 2013, efforts continue across CWS to improve not only timely completion of CPS assessments and investigations, but to improve the quality of safety assessments to ensure thorough and accurate safety-related decisions are consistently made. Oklahoma remains committed to the current safety and needs assessment process and CWS Practice Model.

Month	Removed at Beginning of Month	Removed During the Month	Exited During the Month	Removed at End of Month
Mar, 2013	9311	613	337	9587
Mar, 2014	10883	510	323	11070
Mar, 2015	10994	422	447	10969
Mar, 2016	10286	480	430	10336
Mar, 2017	9397	496	500	9393
Mar, 2018	8739	323	410	8652
Mar, 2019	7966	346	349	7963
Data Source: Removals By Month Report; Run Date: 4/29/19				

Current CFSR case review data indicates that continued efforts surrounding services to families to protect children in their homes and prevent removal or re-entry into foster care as well as continued safety assessment and management are necessary. In case reviews during the period under review (PUR) of 4/1/17 – 3/31/19, 46.67 percent of applicable cases had positive outcomes in which appropriate services were provided to families in order to prevent removal or re-entry into care. 82.03 percent of applicable cases were identified for improvement in areas of initial and ongoing safety assessment and management.

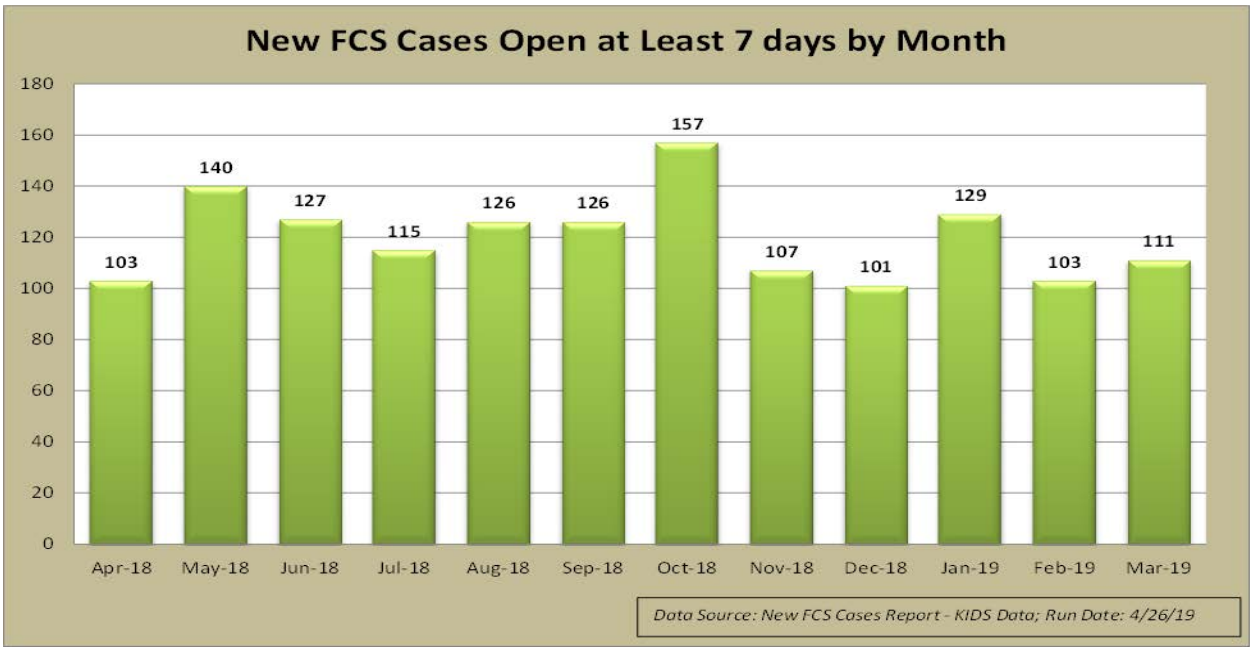
Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**			**Outcome Ratings**			
N=128	**Strength**	**ANI**	**Cases NA**	**Substantially Achieved**	**Partially Achieved**	**Not Achieved**	**Cases NA**
<u>Safety Outcome 2</u>: Children are safely maintained in their homes whenever possible and appropriate.				**17.97% n=23**	**25% n=32**	**57.03% n=73**	**n=0**
Item 2: Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care	**46.67% n=42**	**53.33% n=48**	**n=38**				
Item 3: Risk and Safety Assessment and Management	**17.97% n=23**	**82.03% n=105**	**n=0**				

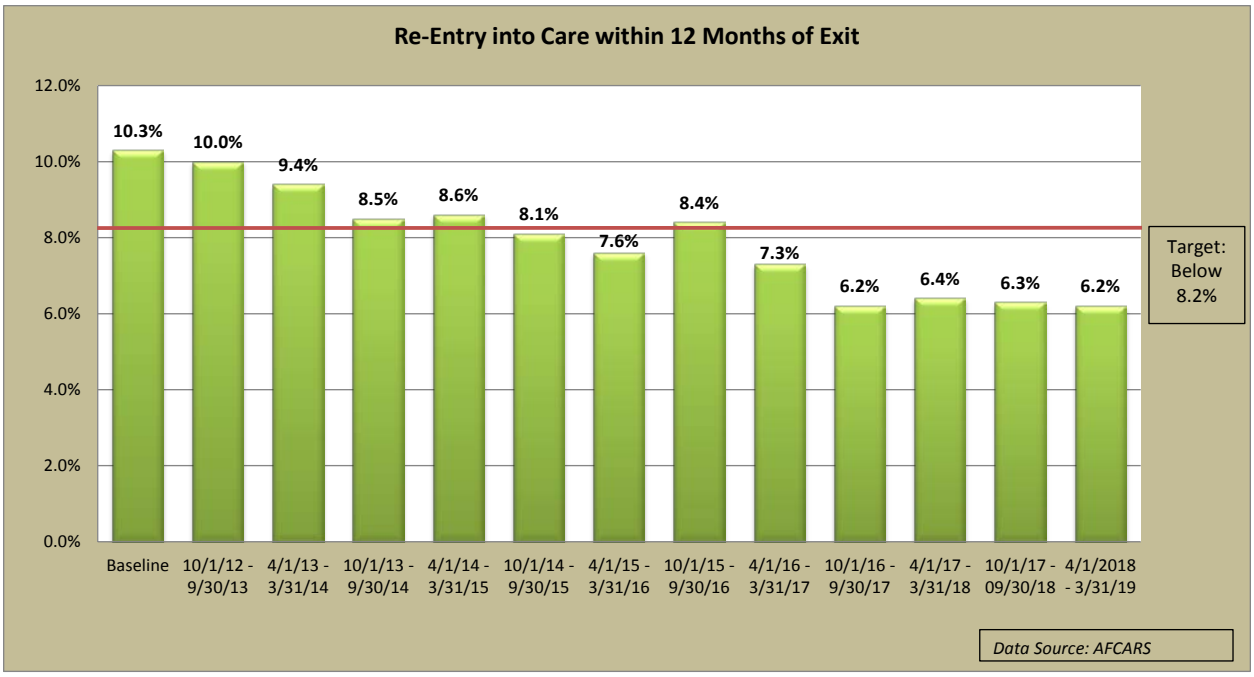
Significant practice identified during the most recent case review period found that the delay in provision of services impacts this outcome, as does the lack of providing appropriate safety-related services and ensuring caregivers are participating in those services. A common factor affecting this area is continuous engagement in critical conversations with all parties involved in a case including children, parents, caretakers, foster parents, collaterals, and external stakeholders. Just as practices related to other

outcomes may adversely affect a child's safety, a lack of comprehensive safety assessments and appropriate service provision adversely affect other outcomes. CWS continues to utilize multiple strategies toward improving safety decision-making and increasing positive outcomes for children and families while also building capacity to accurately identify safety threats and provide appropriate services to eliminate safety threats throughout the life of the case.

Clear messaging surrounding family involvement and engagement as well as revisions to documents, support tools, reports, data elements, and policy is occurring through CFSR PIP efforts within five transformation zones across the state. Previously, CPS utilized an Immediate Protection Action Plan (IPAP) when immediate danger was present upon initiating an abuse or neglect investigation. Upon completion of qualitative reviews, CWS identified that thorough safety assessments were not completed before the IPAP implementation, which negatively impacted this measure. CWS has discontinued the use of IPAPs in order to reinforce quality and thorough safety assessments up front. An additional safety enhancement through the CFSR PIP is discontinuance of the Family Functional Assessment (FFA), previously used as a tool to assess for underlying causes and service needs in order to develop the Individualized Service Plan. Guidance is provided within CFSR PIP transformation zones on utilization of the current Assessment of Child Safety (AOCS) tool to replace the Family Functional Assessment tool. CWS is encouraged that aligning safety-related assessment processes and analysis positively impacts safety assessment outcomes.

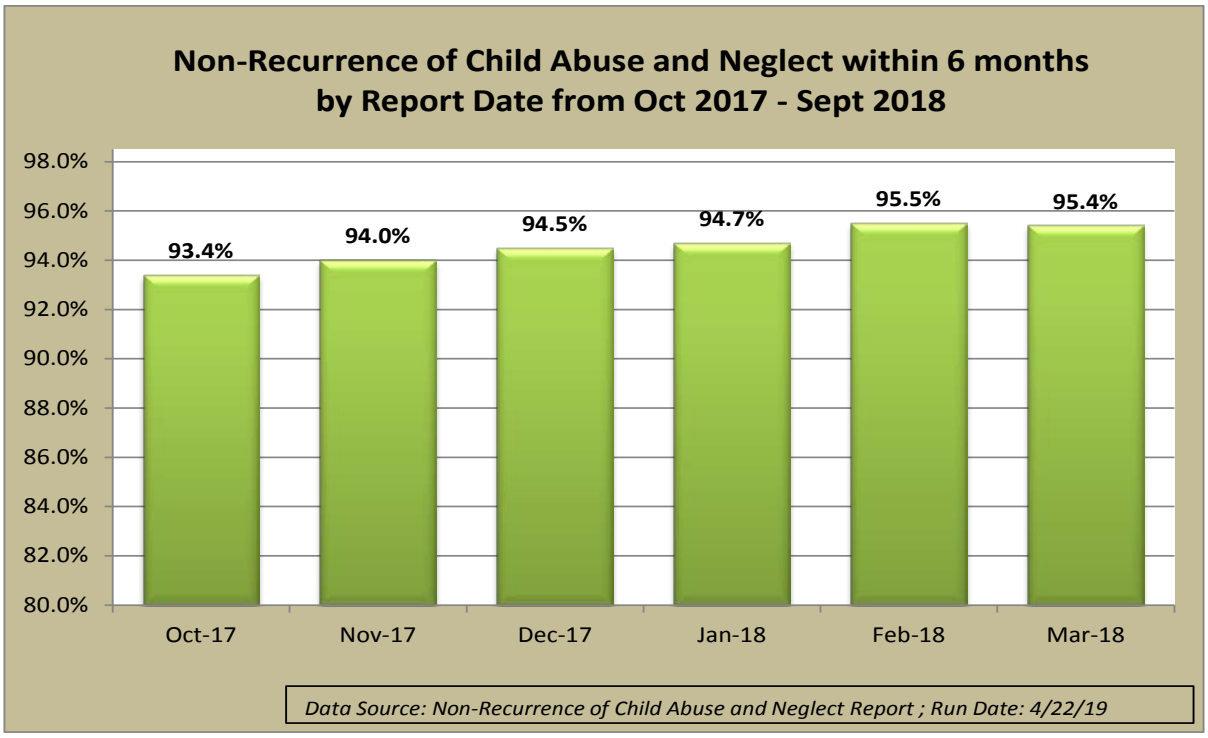
As reflected in the following charts, CWS continues to enhance and expand prevention efforts through FCS cases, as well as improve the provision of appropriate services for children in foster care prior to reunification and supportive services at the time of reunification to prevent re-entry into care. Re-entry in Oklahoma remains below the target rate of 8.2 percent.





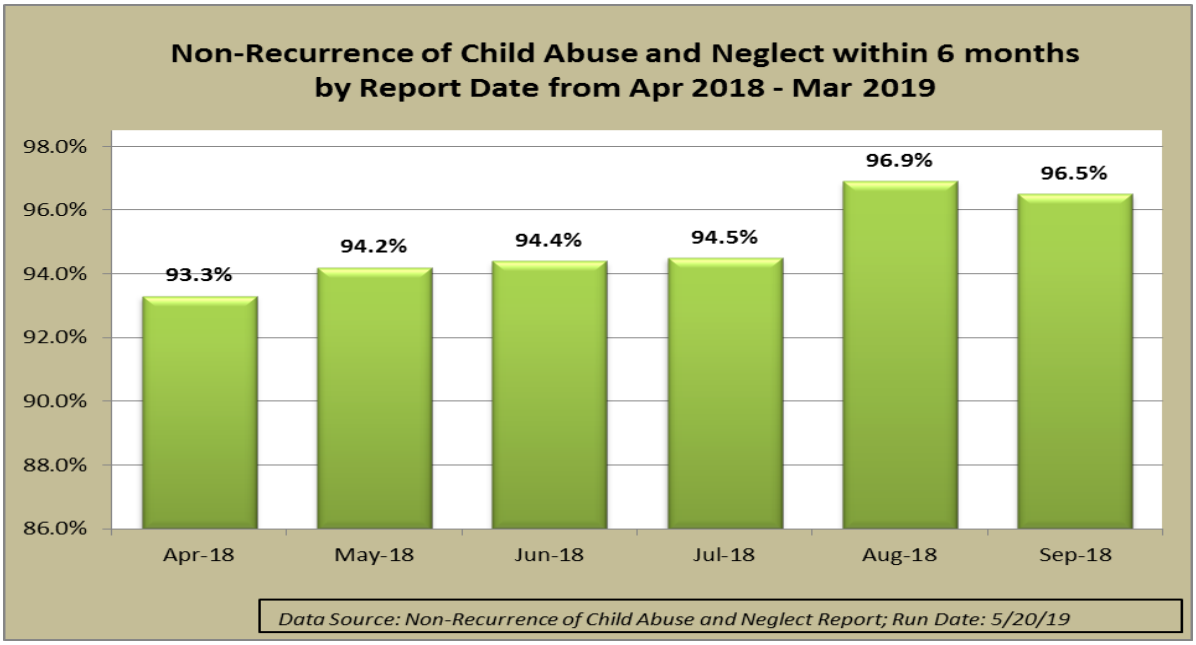
Through resources provided within the Title IV-E Waiver Demonstration Program, CWS has significantly increased safety-related services available for families in order to prevent unnecessary family separation. In State Fiscal Year (SFY) 18, 5,199 children were served through FCS. Comprehensive Home-Based Services (CHBS) and Intensive Safety Services (ISS) continue to meet the complex needs of families being served preventively. Through resources provided through the Family First Prevention Services Act, CWS continues to increase prevention services for children at-risk of entering the CW system through evidence-based treatment modalities. CWS continues collaboration efforts with the Oklahoma State Department of Health primary-prevention efforts as well as with the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS). Further information on resources is provided in other sections of this CFSP.

Non-recurrence of child abuse and neglect is evident when a substantiated report of child abuse and neglect occurred and another substantiated report did not occur within a six-month period before or after the report involving the same or similar circumstances. Oklahoma continues to remain above the required standard of 93.9 percent for this measure.



Note: These percentages are calculated by the percent of children with a substantiated report between October 2017 and March 2018 and those children who did not have a subsequent substantiated report between April and September 2018.

	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	TOTAL
% Non-Recurrence	93.4%	94.0%	94.5%	94.7%	95.5%	95.4%	94.6%
# of Confirmed	1322	1196	1159	1488	1177	1412	7754
# of First Confirmed	1321	1192	1133	1430	1135	1339	7550
# of Non-Recurrence	1234	1121	1071	1354	1084	1277	7141
# of Recurrence	87	71	62	76	21	62	409
ALOT to Recurrence (Days)	113.4	99.7	94.6	96.1	93.2	93	99.4
Data is for Reports Received During First 6 Months of the Selected Period							
Data Collected on 4/22/19 at 1:48 am							

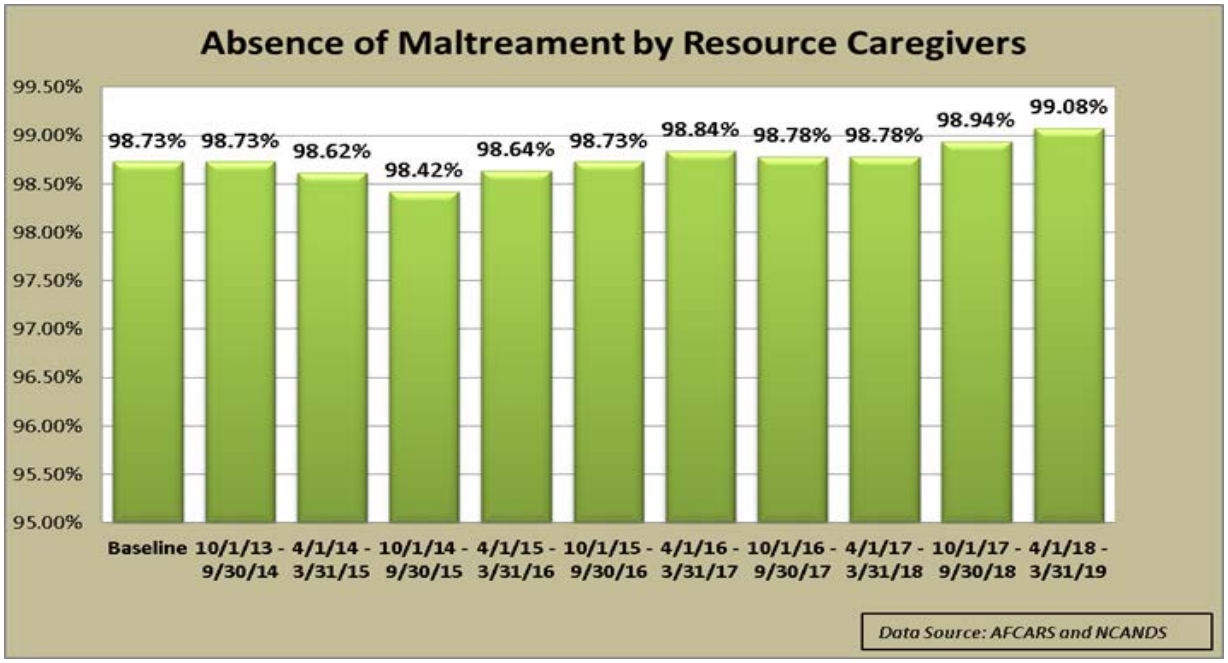


Note: These percentages are calculated by the percent of children with a substantiated report between April and September 2018 and those children who did not have a subsequent substantiated report between October 2018 and March 2019.

	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	TOTAL
% Non-Recurrence	93.3%	94.2%	94.4%	94.5%	96.9%	96.5%	95.0%
# of Confirmed	1348	1531	1273	1322	1556	1265	8295
# of First Confirmed	1338	1511	1225	1263	1483	1213	8033
# of Non-Recurrence	1249	1424	1157	1193	1437	1170	7630
# of Recurrence	89	87	68	70	46	43	403
ALOT to Recurrence (Days)	91.9	88.4	71.7	100.4	99	92	90
Data is for Reports Received During First 6 Months of the Selected Period							
Data Collected on May 20, 2019 at 1:47 am							

Ensuring the safety of children placed in DHS custody continues to be CWS' paramount priority. Specific strategies, such as completing qualitative-regional reviews of unsubstantiated and substantiated referrals in home-like settings, sharing the outcomes of the reviews with specialists and supervisors to create group learning, specific targeted strategies within group homes, and enhanced practices and guidance for quality monthly contacts are in place to reduce the incidences of abuse and neglect of children while in DHS custody. Additional online training is also required of all CWS staff outlining contributing factors and how to utilize resources, such as the screen-out consultation guide, 10-day staffing guide, resource alerts, and other consultation to support staff in reducing maltreatment in care. Per the following data, Oklahoma's current, 4/1/18 – 3/31/19, rate of absence of maltreatment by resource caregivers is 99.08 percent. The data reflects the percent of all children served in foster care during the 12-month reporting period that were not victims of substantiated or indicated maltreatment (abuse or neglect) by a foster parent or facility staff member. The denominator is all children served in foster care from 4/1/18 – 3/31/19. The numerator is the number of children served in foster care from 4/1/18 – 3/31/19 who did not have

any substantiated or indicated allegations of maltreatment by a foster parent or facility staff member during the period. Oklahoma stands committed to continued targeted efforts to ensure the safety of children whom CWS is responsible for protecting.



Permanency Outcomes 1 and 2
(A) Children have permanency and stability in their living situations; and (B) the continuity of family relationships is preserved for children.

CWS is committed to improving and strengthening outcomes in permanency and stability for children in out-of-home care. Outcomes in these areas are ensured through focused efforts on three areas:

- Stability of Foster Care Placement;
- Permanency Goal of the Child; and
- Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement.

CWS continues efforts towards preventing unnecessary family separation by keeping families safe, healthy, and together whenever possible before remedial efforts become necessary. This is evident by the decreasing number of children that have entered out-of-home care within the past five years. CWS continues efforts to safely achieve permanency for children and serve families preventively, whenever possible and appropriate. CWS remains committed to focusing on completing quality safety assessments in order to ensure the right safety intervention is made with the family. As the population being served by PP decreases, CWS is committed to enhanced permanency efforts to support timely permanency of children in DHS custody.

During case review PUR from 4/1/17 – 3/31/19, outcome ratings indicate children having permanency and stability in their living situations is substantially achieved in

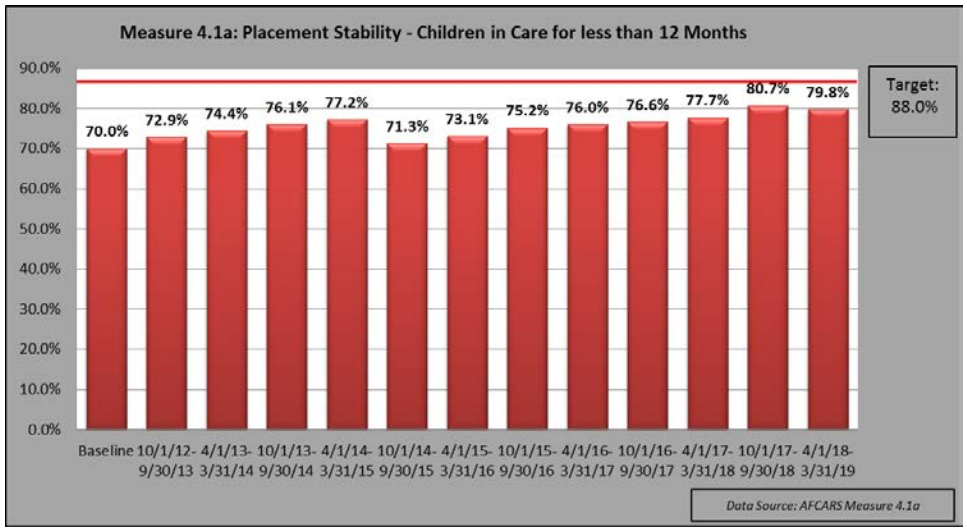
10.26 percent, partially achieved in 61.54 percent, and not achieved in 28.21 percent of 78 applicable cases. Two areas significantly impacting these outcomes are lack of placement stability and achievement of timely permanency.

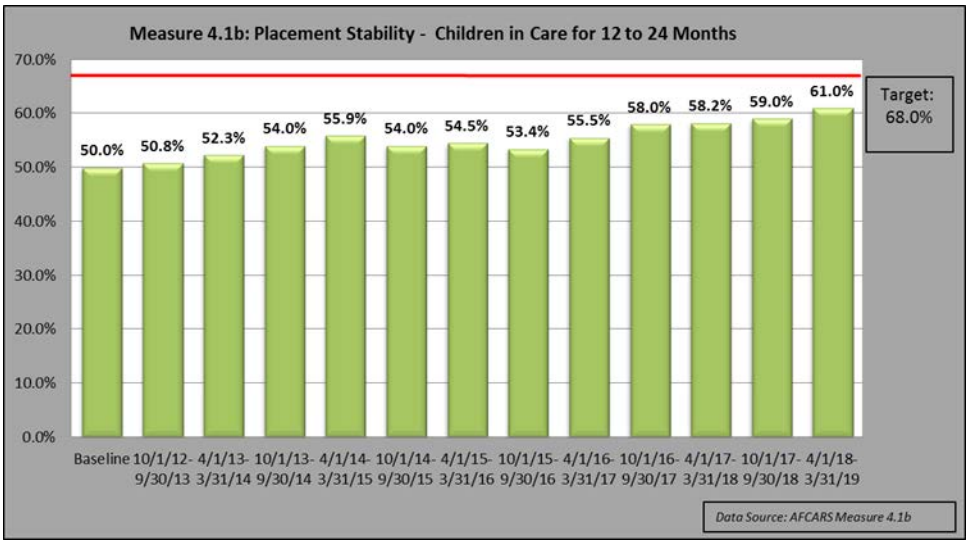
Data Source: Case Review Data 04/2017 - 03/2019	Performance Item Ratings			Outcome Ratings			
N=78	**Strength**	**ANI**	**Cases NA**	**Substantially Achieved**	**Partially Achieved**	**Not Achieved**	**Cases NA**
Permanency Outcome 1: Children have permanency and stability in their living situations.				**10.26% n=8**	**61.54% n=48**	**28.21% n=22**	**n=0**
Item 4: Stability of Foster Care Placement	**46.15% n=36**	**53.85% n=42**	**n=0**				
Item 5: Permanency Goal for Child	**55.13% n=43**	**44.87% n=35**	**n=0**				
Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	**23.08% n=18**	**76.92% n=60**	**n=0**				

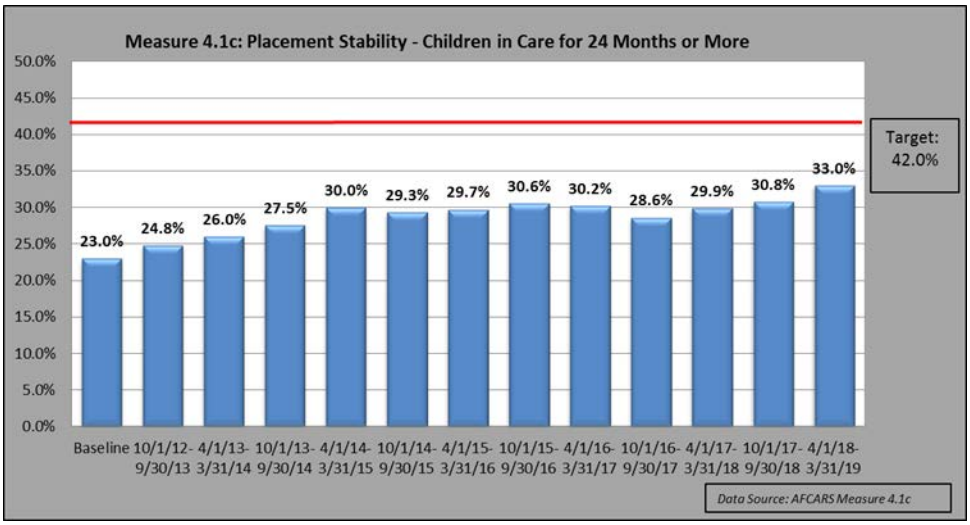
Stability in foster care placements, as examined in case reviews during PUR 4/1/17 – 3/31/19, includes not only the number of moves a child makes but also an evaluation of the reason for the move. All moves were examined thoroughly to determine if a move was planned, purposeful, and meaningful with the intent to improve permanency outcomes for the child. Case review data reflects placement stability as a strength in 46 percent of 78 applicable cases, confirming the need for ongoing targeted efforts focusing on the stability of a child while in foster care.

Data Source: Case Review Data 04/2017 - 03/2019	Performance Item Ratings		
N=78	**Strength**	**Area Needing Improvement**	**Cases NA**
Permanency Outcome 1: Children have permanency and stability in their living situations.			
Item 4: Stability of Foster Care Placement	**46.15% n=36**	**53.85% n=42**	**n=0**

Per the February 2019 Semi-Annual Report that provides updates on Pinnacle Plan measurements, the following data indicates that children who are in care less than 12 months are the most likely to achieve placement stability. Data from the Measure 4.1a chart is representation of the percent of children who had two or fewer placements who were served in foster care during the 12-month reporting period that were in care for at least eight days, but less than 12 months. The denominator is all children served in foster care from 4/1/18 – 3/31/19 whose length of stay was between eight days and 12 months. The numerator is all children served in foster care from 4/1/18 – 3/31/19 whose length of stay was between eight days and 12 months and who had two or fewer placement settings. Data also shows that stability decreases the longer the child is in care. Targeted placement stability efforts to adequately assess a resource provider's ability to safely care for a child, as well as ensuring the first placement is best placement continue to remain primary focuses in ensuring stability.


Measure 4.1a: Placement Stability - Children in Care for less than 12 Months
90.0%
80.0%
70.0%
60.0%
50.0%
40.0%
30.0%
20.0%
10.0%
0.0%
70.0%
72.9%
74.4%
76.1%
77.2%
71.3%
73.1%
75.2%
76.0%
76.6%
77.7%
80.7%
79.8%
Target: 88.0%
Baseline
10/1/12-9/30/13
4/1/13-3/31/14
10/1/13-9/30/14
4/1/14-3/31/15
10/1/14-9/30/15
4/1/15-3/31/16
10/1/15-9/30/16
4/1/16-3/31/17
10/1/16-9/30/17
4/1/17-3/31/18
10/1/17-9/30/18
4/1/18-3/31/19
Data Source: AFCARS Measure 4.1a


Measure 4.1b: Placement Stability - Children in Care for 12 to 24 Months
70.0%
60.0%
50.0%
40.0%
30.0%
20.0%
10.0%
0.0%
50.0%
50.8%
52.3%
54.0%
55.9%
54.0%
54.5%
53.4%
55.5%
58.0%
58.2%
59.0%
61.0%
Target: 68.0%
Baseline
10/1/12-9/30/13
4/1/13-3/31/14
10/1/13-9/30/14
4/1/14-3/31/15
10/1/14-9/30/15
4/1/15-3/31/16
10/1/15-9/30/16
4/1/16-3/31/17
10/1/16-9/30/17
4/1/17-3/31/18
10/1/17-9/30/18
4/1/18-3/31/19
Data Source: AFCARS Measure 4.1b


Measure 4.1c: Placement Stability - Children in Care for 24 Months or More
50.0%
45.0%
40.0%
35.0%
30.0%
25.0%
20.0%
15.0%
10.0%
5.0%
0.0%
23.0%
24.8%
26.0%
27.5%
30.0%
29.3%
29.7%
30.6%
30.2%
28.6%
29.9%
30.8%
33.0%
Target: 42.0%
Baseline
10/1/12-9/30/13
4/1/13-3/31/14
10/1/13-9/30/14
4/1/14-3/31/15
10/1/14-9/30/15
4/1/15-3/31/16
10/1/15-9/30/16
4/1/16-3/31/17
10/1/16-9/30/17
4/1/17-3/31/18
10/1/17-9/30/18
4/1/18-3/31/19
Data Source: AFCARS Measure 4.1c

One of CWS' practice standards, "We maintain a child's permanent connection to Kin, Culture, and Community" outlines the CWS responsibility to locate appropriate and stable placements for children in DHS custody. Families belong together and CWS strives to maintain optimal connection between a child and his or her family. CWS makes all efforts to ensure siblings are placed with one another. When making decisions about placement, CWS considers all implications for the child, understanding that with every move a child experiences additional trauma. Multiple strategies, accountability, and recruitment efforts aimed at having the "first placement as best placement" are ongoing.

Two areas of ongoing evaluation are critical within this outcome. The first is kinship as initial placement. CWS continues efforts to place children with kinship when removal is necessary to keep the child safe. The second is moves within the first 90-calendar days of a child entering care. CWS has identified that children entering DHS custody have a high likelihood of moving from the initial placement within the first 90-calendar days of entering custody. CWS believes this is due to children being initially placed in traditional foster care settings and then moving to kinship care. Statewide, the likelihood of moving within 90-days is 47 percent, per Chapin Hall. CWS remains committed to family involvement in order to place children with kin, as the first placement, whenever possible. CWS believes that increasing initial placement with kin decreases the likelihood of a move within 90-calendar days; therefore impacting placement stability.

First Placement Kinship			
Removal Month	**Children Placed in Kinship as 1st Placement**	**Children Removed during Month and in Countable Placement**	**% of Kinship as 1st Placement**
Apr-18	183	353	51.8%
May-18	197	389	50.6%
Jun-18	188	332	56.6%
Jul-18	163	344	47.4%
Aug-18	213	431	49.4%
Sep-18	157	379	41.4%
Oct-18	139	307	45.3%
Nov-18	118	299	39.5%
Dec-18	169	353	47.9%
Jan-19	146	349	41.8%
Feb-19	146	338	43.2%
Mar-19	168	333	50.5%
TOTAL	**1987**	**4207**	**47.2%**

Data Source: Baseline-YI844; Run Date: 20th of each month for previous month data.

Of children entering care for the first time during the year, what percent had an initial placement move within the first 3 months of care? Of those children who were still in care after 3 months and had not yet experienced an initial placement move, what percent had an initial placement move in the 3-6 month interval?

2018	0-3 Months	3-6 Months	6-9 Months
Region1	43%	12%	10%*
Region2	48%	13%	6%*
Region3	50%	18%	6%*
Region4	48%	12%	6%*
Region5	50%	14%	5%*
STATE	**47%**	**14%**	**6%***

Data Source: Chapin Hall

Targeted efforts for placement stability include implementing practice guidelines that reinforce family engagement throughout all points of contact in a case so children maintain permanent connections to kin, culture, and community. Actively Seeking KINnections (ASK), as part of the CFSP PIP strategies, outlines specific guidance that supports family engagement throughout the life of a case as family engagement and support is paramount to placement stability. Ongoing training and TOL activities are incorporated into the CFSR PIP transformation zones.

Increased access and use of mental health resources targets improving services for children in care who experience an increased risk of adverse outcomes. Mental health issues in children directly correlates with permanency and well-being outcomes, including placement stability. Targeted efforts implemented from the CFSR PIP surrounding enhanced relationships and utilization of mental health consultants as well as use of mobile response, in partnership with ODMHSAS, are ongoing. Data obtained from ODMHSAS indicates that from 3/31/18 – 4/1/19, 403 clients were served through Mobile Response Services resulting in 191 stabilized placements. 14,212 children received mental health services between January 2018 and April 2019.

CWS understands the importance of timely identification of an appropriate permanency goal for the child. Failure to identify the appropriate permanency goal in a timely manner can affect safety and result in delays in achieving permanency and overall positive outcomes for the child's family. KIDS data reflects the number of children with an initial documented goal established, per policy timeframes. For the period 4/1/18 – 3/31/19, 99.2 percent of children due a case plan goal had one documented in KIDS.

CFSR Item 20 - Period Ending 03/31/2019 - 18B - 19A				
Period	Children in Care	Number of Children that should have a Case Plan Goal	Number of Children with a Case Plan Goal	Percentage
15B - 16A	16,604	15,474	15,316	99.0%
16B - 17A	15,794	14,705	14,485	98.5%
17B - 18A	14,419	13,582	13,422	98.8%
18B - 19A	13,487	12,645	12,550	99.2%
Data Source: KIDS Removals Table (Period 18B - 19A covers Apr 1, 2018 - Mar 31, 2019)				

Case reviews assess case circumstances, the appropriateness and timely establishment of all goals in effect during the period under review, and compliance with the Adoption and Safe Families Act (ASFA) regarding termination of parental rights (TPR) or exceptions to TPR. Of 78 applicable children's cases reviewed, all goals within the review period were established timely in 75 percent of cases; all goals in the review period were appropriate for 70 percent; and TPR was filed timely or an exception applied in 76.6 percent of applicable cases.

Data Source: Case Review Data 04/2017 - 03/2019	Performance Item Ratings		
N=78	**Strength**	**Area Needing Improvement**	**Cases NA**
Permanency Outcome 1: Children have permanency and stability in their living situations.			
Item 5: Permanency Goal for Child	**55.13% n=43**	**44.87% n=35**	**n=0**

CWS is committed to achieving permanency in a timely manner for children in out-of-home care. The goal is to safely reunify children with their families, when appropriate, within 12 months of entering care. When reunification is not in the child's best interest, CWS strives to achieve permanency for the child through adoption, guardianship, or another permanent living situation.

Of the 78 applicable cases included in case reviews for the PUR 4/1/17 – 3/31/19, Permanency Outcome 1, only 23.08 percent had concerted efforts made toward permanency. Of the 78 applicable cases reviewed, indications included:

- 27 children with a goal of reunification - CWS and court made concerted efforts to achieve timely reunification in 4 cases;
- 4 children with a goal of guardianship - 2 had concerted efforts to achieve timely;
- 47 children with a goal of adoption - case reviews found 9 had concerted efforts; and
- 4 children with a goal of other planned permanent living arrangement - concerted efforts were made to achieve this goal timely for three children.

Data Source: Case Review Data 04/2017 - 03/2019	Performance Item Ratings		
N=78	**Strength**	**Area Needing Improvement**	**Cases NA**
Permanency Outcome 1: Children have permanency and stability in their living situations.			
Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement	**23.08% n=18**	**76.92% n=60**	**n=0**

OKLAHOMA DEPARTMENT OF HUMAN SERVICES
MEASURE 6.2 - TIME TO PERMANENCE SUMMARY
Report Ran On May 30, 2019 at 11:18 am
Data Collected On May 30, 2019 from 3:30 am to 3:42 am

			# and % of Children	Reunification	Custody to Relative	Adoption	Guardianship	Trial Reunification
6.2a	Permanency in less than 12 Months	Children removed from October 2017 through March 2018 reaching permanence in less than 12 months.	2105	520	41	89	65	77
			37.6%	24.7%	1.9%	4.2%	3.1%	3.7%
6.2b	Permanency in 12 to less than 24 Months	Children removed from October 2016 through March 2017, removed at least 12 months and reaching permanence in less than 24 months.	1504	305	12	393	36	30
			51.6%	20.3%	0.8%	26.1%	2.4%	2.0%
6.2c	Permanency in 24 to less than 36 Months	Children removed from October 2015 through March 2016, removed at least 24 months and reaching permanence in less than 36 months.	644	54	4	302	14	4
			58.7%	8.4%	0.6%	46.9%	2.2%	0.6%
6.2d	Permanency in 36 to less than 48 Months	Children removed from October 2014 through March 2015, removed at least 36 months and reaching permanence in less than 48 months.	279	15	0	144	6	3
			60.2%	5.4%	0.0%	51.6%	2.2%	1.1%

Data Source: Time to Permanence Summary - Pinnacle Plan Measure 6.2

Several systemic factors directly impact Oklahoma's permanency rate. Holding timely court reviews and permanency hearings, as well as addressing parental rights; per required provisions are vital to timely permanency outcomes for children. Period 18B-19A KIDS data reflects 97.1 percent of periodic hearings due were held timely. For the same period, KIDS data reflects 89.4 percent of permanency hearings due were held timely. Collaborative efforts with the Court Improvement Project (CIP) to engage with court systems in understanding the fundamental importance of scheduling timely court and permanency reviews are ongoing. There must be a commitment from both the courts as well as the child welfare system to adjust and improve strategies based on this data.

CFSR Item 21 - Period Ending 03/31/2019 - 18B - 19A						
Period	Children in Care	Number of Periodic Hearings Due	Number of Periodic Hearings Made	Percent of Periodic Hearings Made	Number of Periodic Hearings Made Timely	Percent of Periodic Hearings Made Timely
15B - 16A	16,604	25,191	24,785	98.4%	24,249	96.3%
16B - 17A	15,794	23,592	23,131	98.0%	22,766	96.5%
17B - 18A	14,419	21,599	21,183	98.1%	20,899	96.8%
18B - 19A	13,487	20,035	19,704	98.3%	19,444	97.1%
Data Source: KIDS Removals Table (Period 18B - 19A covers Apr 1, 2018 - Mar 31, 2019)						

CFSR Item 22 - Period Ending 03/31/2019 - 18B - 19A						
Period	Children in Care	Number of Permanency Hearings Due	Number of Permanency Hearings Made	Percent of Permanency Hearings Made	Number of Permanency Hearings Made Timely	Percent of Permanency Hearings Made Timely
15B - 16A	16,604	10,595	9,544	90.1%	8,686	82.0%
16B - 17A	15,794	10,718	10,090	94.1%	9,674	90.3%
17B - 18A	14,419	9,723	9,104	93.6%	8,758	90.1%
18B - 19A	13,487	9,027	8,426	93.3%	8,072	89.4%
Data Source: KIDS Removals Table (Period 18B - 19A covers Apr 1, 2018 - Mar 31, 2019)						

CWS and CIP partnered together to develop court engagement guidance and expectations for CW specialists and leadership to improve relationships and collaboration on improving permanency and placement stability outcomes. All CWS staff will be required to complete court guidance training starting in January 2020. In collaboration with CIP and Casey Family Programs, a joint project was completed between 10/1/17 – 3/31/19 to improve permanency outcomes for children in out-of-home care within three jurisdictions in Oklahoma. Information and key findings obtained from the project are currently being evaluated as final data on permanency outcomes is not complete at this time. Once data is available, evaluation of outcome measurements will be utilized to further identify and assess root causes associated with court performance to improve permanency outcomes.

Permanency Safety Consultations (PSCs) continue to be an enhanced strategy within the CFSR PIP to focus more intently on safety from the initial onset of intervention and every 90 days after on all cases with the case plan goal (CPG) of reunification. Ongoing support is offered through the Quality Assurance (QA) teams within each region to ensure that PSCs are completed timely and are of good quality. A fidelity review process of PSCs continues to occur and is completed by QA staff. Findings of practice barriers and outcomes of PSCs are shared in a debriefing with regional directors and supervisors. Ongoing technical support is provided by QA staff when requested. As of 6/1/19, all PP and comprehensive staff are required to participate in the PSC online training. The training was developed to provide information on PSC principles, practice, and procedures. Also addressed in the PSC training is common barriers identified to achieving permanency, such as well-being issues, and information on how to address the barriers is clearly provided through case examples.

Permanency backlog calls are an additional strategy targeted at achieving permanency for children in care for at least 24 months with the goal of reunification. The QA teams supports PP staff in monthly-conference calls focused on permanency efforts for the child. Barriers to achieving permanency and other avenues in achieving permanency, such as guardianship are discussed. PP and QA staff identifies tasks to be completed that supports permanency for the child and then follows up on the tasks the next month.

Youth, 16 years of age and older, with the case plan goal of planned alternative permanent placement (PAPP) continue to be a focus of permanency efforts. Although

much success has occurred for youth assigned a permanency expediter (PE), efforts are still in place to ensure children who have no identified permanent connections have additional supports. PEs are assigned to each region to support staff and youth in developing connections and achieving permanency. Once a child has a case plan goal of PAPP, PEs are assigned to the youth to strategically plan for connections and exhaust all other efforts to achieve permanency through guardianship, adoption, or reinstatement of parental rights, when appropriate. The PE supports the youth in identifying connections and supports. Ongoing solicitation of input from alumni teens and teens currently receiving PE services is gathered and assessed on an ongoing basis. Qualitative data obtained is being utilized to guide and shape the duties of PEs as well as the work conducted with youth. All youth interviewed from February through April 2019 reported an increase of permanent connections and relational permanency. Informational training is being conducted within regions to discuss the roles and responsibilities of PEs, educate staff on how to collaborate with PEs, and to share information received from youth who have experience within the process.

CWS is committed to maintaining the continuity and preservation of family relationships and connections for children. This commitment is accomplished through a comprehensive approach to five different opportunities:

- Placement with Siblings;
- Visiting with Parents and Siblings in Foster Care;
- Preserving Connections;
- Relative Placement; and
- Relationship of Child in Care with Parents.

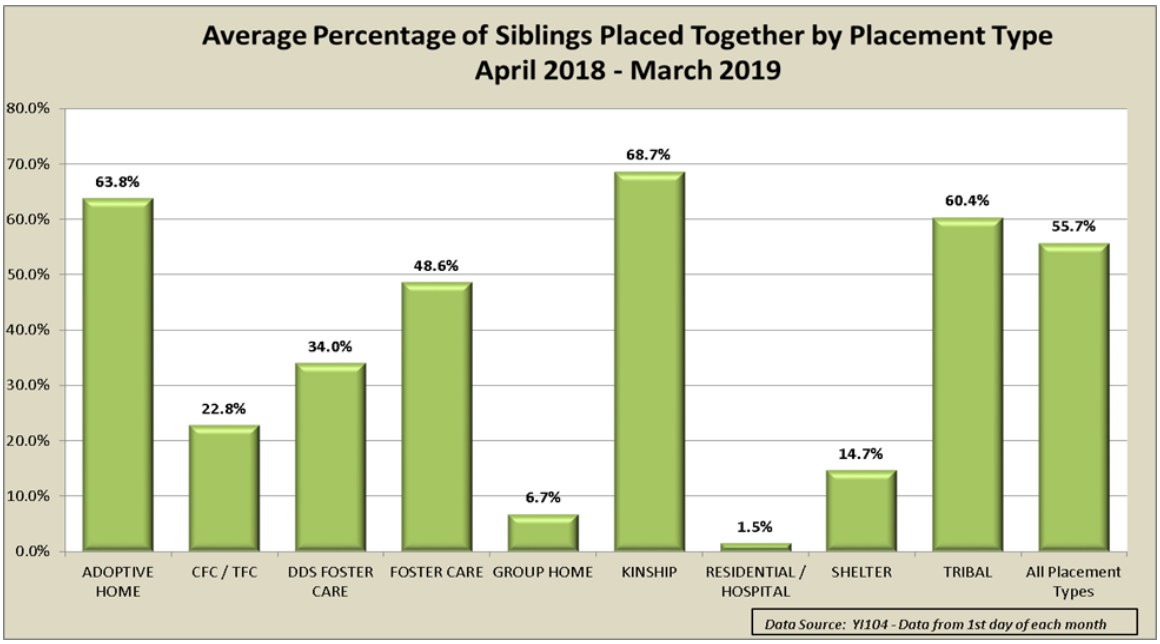
Case review data indicates a continued need for targeted improvement efforts surrounding relationships and connections. Areas identified for improvement include visitation with parents and siblings in foster care, preserving connections, and relationships of children in care with their parents.

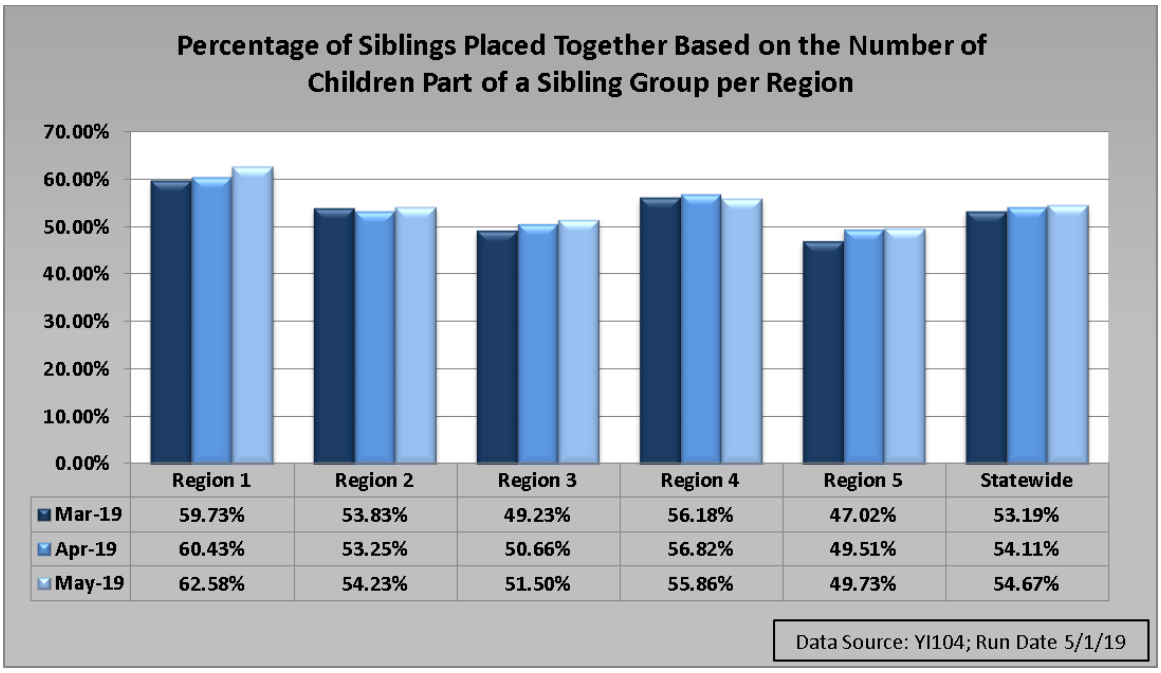
Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**			**Outcome Ratings**			
N=78	**Strength**	**ANI**	**Cases NA**	**Substantially Achieved**	**Partially Achieved**	**Not Achieved**	**Cases NA**
Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.				**34.62% n=27**	**56.41% n=44**	**8.97% n=7**	**n=0**
Item 7: Placement with Siblings	**64.91% n=37**	**35.09% n=20**	**n=21**				
Item 8: Visiting With Parents and Siblings in Foster Care	**43.66% n=31**	**56.34% n=40**	**n=7**				
Item 9: Preserving Connections	**29.87% n=23**	**70.13% n=54**	**n=1**				
Item 10: Relative Placement	**67.53% n=52**	**32.47% n=25**	**n=1**				
Item 11: Relationship of Child in Care With Parents	**50.91% n=28**	**49.09% n=27**	**n=23**				

CWS understands the importance of sibling connections and the need for siblings to be placed together. Homes that can provide for the care and supervision necessary to ensure safety while meeting the siblings' permanency and well-being needs are essential and strategies are in process to meet this need. Case review data indicates siblings were placed together in 64.91 of 57 applicable cases.

Data Source: Case Review Data 04/2017 - 03/2019	Performance Item Ratings		
N=78	**Strength**	**Area Needing Improvement**	**Cases NA**
Permanency Outcome 2: The continuity of family relationships and connections is preserved for children.			
Item 7: Placement with Siblings	**64.91% n=37**	**35.09% n=20**	**n=21**

CWS continues initiatives to strengthen sibling placements through intentional case review of siblings not placed together. Throughout the life of the case, ongoing efforts to search for a resource home to accommodate the sibling group are required in cases when siblings are not placed together. KIDS data indicates from 4/1/19 – 3/31/19, sibling groups are more frequently placed together in kinship, adoptive, and tribal resource types. Foster Care recruitment activities include the search for resource homes willing and able to care for sibling groups. More information on the recruitment plan is in the attached ***Oklahoma Child Welfare Services Foster and Adoptive Parent Diligent Recruitment Plan***.





Connection to the tribe is the child's right and compliance with the Indian Child Welfare Act (ICWA) must be adhered to. CWS maintains and continues improvement efforts to meet ICWA compliance by:

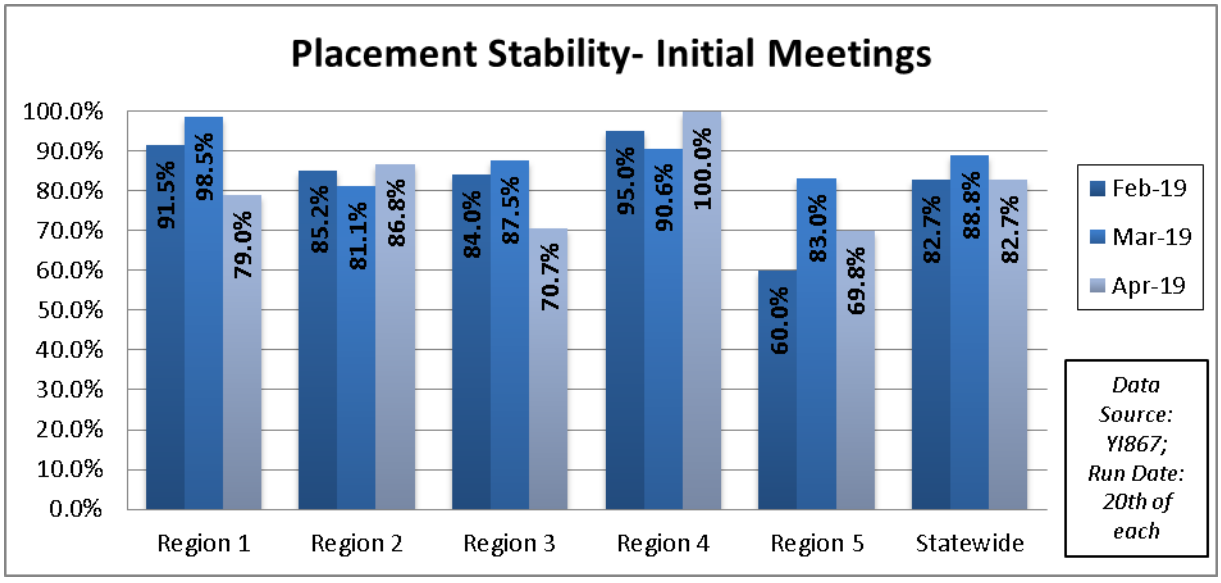
- recognizing partnership with tribal partners is necessary;
- enhancing regional partnerships with tribes by facilitating and supporting regional tribal and state workgroups to promote cooperation, communication, consistency, and educational awareness of ICWA through case consultation, identification of resources, and sharing of information to keep Native American children connected to their cultures;
- designating staff in each of the five regions as tribal liaisons; and
- appointing a statewide tribal liaison.

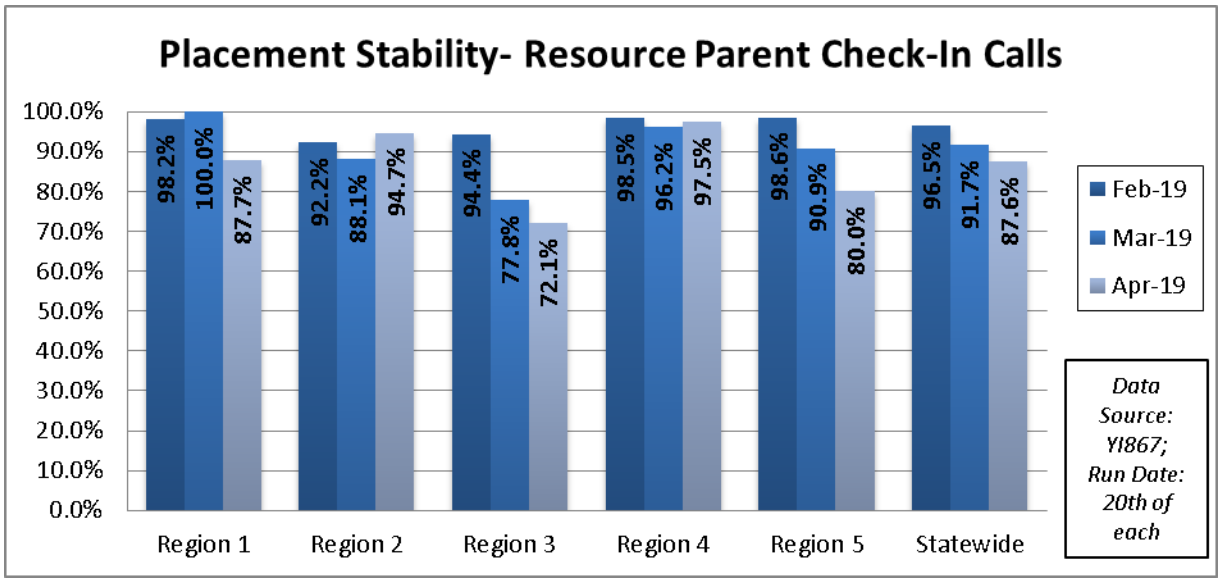
Further analysis of the case review data indicates sufficient inquiry to determine if a child is eligible for tribal membership occurs in 98.73 percent of cases reviewed. For children whom this inquiry indicates a child may be eligible for tribal membership, timely notification of the tribe's right to intervene occurs in 92.31 percent of cases. Where ICWA is found to apply, concerted efforts to place the child within the ICWA placement preference are found in 61.54 percent of applicable cases. Early in the case, these efforts may be present by both CWS and the specific tribe; however, consistent ongoing efforts may not occur.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=78	**Strength**	**Area Needing Improvement**	**Cases NA**
<u>Permanency Outcome 2</u>: The continuity of family relationships and connections is preserved for children.			
Item 9: Preserving Connections	**29.87% n=23**	**70.13% n=54**	**n=1**

CWS recognizes that early identification of appropriate and stable kinship placements for children helps improve outcomes for children and families. Case review data, reflects that placement with a relative was a strength in 67.53 percent of 77 applicable cases. As relative placement continues to improve, siblings placed together will also improve. Efforts to support family engagement initially include completing a child safety meeting (CSM) with the family to determine the best level of intervention. When the child is brought into custody, an Initial Meeting (IM) is held within 10-days. The IM is an initial meeting between the parents, resource parents, and CWS to share information about the child and how the resource family can best care for the child as well as to outline expectations surrounding visitation, the case plan, and whatever other support the family needs. A resource parent check-in call also occurs within two-days of placement in order to identify the resource parent's needs quickly and to provide support to the family up front.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=78	**Strength**	**Area Needing Improvement**	**Cases NA**
<u>Permanency Outcome 2</u>: The continuity of family relationships and connections is preserved for children.			
Item 10: Relative Placement	**67.53% n=52**	**32.47% n=25**	**n=1**





Case review data reflects sufficiency of frequent and quality visitation with parents and siblings in care as a strength in 43.66 percent of 71 applicable cases reviewed. Ongoing training through the CFSR PIP and updates to the SACWIS/KIDS system are strategies implemented to impact this outcome. Technology system updates require monthly documentation regarding visitation planning, articulation of behavioral changes identified during supervised visitations, and a plan to build relationships with the biological and extended family outside of only planning for supervised visitation.

Promoting, supporting, and maintaining a positive relationship between the child in foster care and his or her mother and father or other primary caregivers, from whom the child was removed, with activities other than only arranging for visitation, is an area identified for improvement for both parents. Analysis of case reviews indicates concerted efforts toward sufficient frequency, quality, and promotion of the positive parent and child relationships were more often present with mothers than with fathers. Concerted efforts for mothers were found in 64.29 percent of applicable reviewed cases while these efforts for fathers were only found in 34.88 percent of applicable cases reviewed. Training and TOL efforts within the CFSR PIP support engagement with both parents throughout the life of a case. Engagement includes adequately assessing for safety and connections of both a mother and a father consistently throughout the life of a case.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=78	**Strength**	**Area Needing Improvement**	**Cases NA**
<u>Permanency Outcome 2</u>: The continuity of family relationships and connections is preserved for children.			
Item 11: Relationship of Child in Care With Parents	**50.91% n=28**	**49.09% n=27**	**n=23**

Well-Being Outcomes 1, 2, and 3

(A) Families have enhanced capacity to provide for their children's needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs.

The multiple components of this outcome demonstrate the connections of CWS practice throughout the life of the case to achieving successful permanency outcomes for children. The quality of CWS staff engagement with the family in assessing strengths and needs, joint case planning, and identification and provision of appropriate services is critical in shaping the ultimate outcome of each case, impacting a child and his or her family. Opportunity for improvement is apparent as CWS struggles to meet substantial conformity within well-being outcomes. Focus within the CFSR PIP identifies the family meeting continuum as a strategy to impact family engagement by increasing family involvement early in the case. The family meeting continuum includes CSMs and all other family meetings (FMs).

Data Source: Case Review Data 04/2017 - 03/2019	Performance Item Ratings			Outcome Ratings			
N=128	Strength	ANI	Cases NA	Substantially Achieved	Partially Achieved	Not Achieved	Cases NA
Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.				14.84% n=19	33.59% n=43	51.56% n=66	n=0
Item 12: Needs and Services of Child, Parents, and Foster Parents	17.97% n=23	82.03% n=105	n=0				
Item 12A: Needs Assessment and Services to Children	43.75% n=56	56.25% n=72	n=0				
Item 12B: Needs Assessment and Services to Parents	23.01% n=26	76.99% n=87	n=15				
Item 12C: Needs Assessment and Services to Foster Parents	43.24% n=32	56.76% n=42	n=54				
Item 13: Child and Family Involvement in Case Planning	33.33% n=42	66.67% n=84	n=2				
Item 14: Caseworker Visits with Child	35.16% n=45	64.84% n=83	n=0				
Item 15: Caseworker Visits with Parents	21.43% n=24	78.57% n=88	n=16				

Practice areas impacting this outcome include initial and ongoing assessment of needs and provision of appropriate services to children, parents, foster parents, family involvement in case planning, and sufficient frequency and quality of worker visits with children and parents. As discussed in the safety outcomes section, safety practice changes that occurred to impact initial and ongoing safety assessment includes discontinuing the Family Functional Assessment and utilizing information surrounding child functioning, discipline, parenting, and adult functioning to learn about what a family needs in order to provide appropriate services immediately upon intervention. Ongoing training and technical support surrounding expectations of quality caseworker visits is completed during CFSR PIP trainings and TOL. Updated practice tools and guidance to

support staff in meaningful conversations with children, and biological and foster parents was provided to staff in October 2018.

For families to have enhanced capacity to provide for their children's needs, CWS must accurately assess and provide appropriate services to meet the individual needs of the children, parents, and foster parents. Both initial and ongoing assessments of children, parents, and foster parents to adequately address the relevant issues and attain case plan goals is critical to achieving positive outcomes. CWS must engage in meaningful conversation with the family about the child's ongoing needs, involvement in school, developmental, medical, or other extracurricular activities. With the implementation of the family meeting continuum, CWS has the opportunity to be transparent with families about expectations of involvement throughout the life of the case. These conversations can occur during the CSM, IM, resource parent check-in call, monthly contacts in the out-of-home placement or with the parent, and ongoing FMs.

Case reviews from the PUR 4/1/17 – 3/31/19 indicate a strength in practice in only 17.97 percent of the applicable cases reviewed. Information from case reviews continues to indicate a need for improvement in sufficient frequency and quality of CWS interactions with children, parents, and foster parents. Case review data also reflects needs assessment and services for children in foster care and in-home cases is a strength in 43.75 percent of the 128 applicable cases reviewed. Further analysis of the case review data indicates though 59.23 percent of children reviewed have a comprehensive needs assessment that accurately assessed the child's needs, and that the provision of services to meet those needs is lacking at 31.07 percent. The assessment and provision of services for all out-of-home safety plan monitors' needs related to care and protection of the child is included in this area.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=128	**Strength**	**Area Needing Improvement**	**Cases NA**
<u>Well-Being Outcome 1</u>: Families have enhanced capacity to provide for their children's needs.			
Item 12: Needs and Services of Child, Parents, and Foster Parents	**17.97% n=23**	**82.03% n=105**	**n=0**

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=128	**Strength**	**Area Needing Improvement**	**Cases NA**
<u>Well-Being Outcome 1</u>: Families have enhanced capacity to provide for their children's needs.			
Item 12A: Needs Assessment and Services to Children	**43.75% n=56**	**56.25% n=72**	**n=0**

Training within the CFSR PIP Best Practices series includes detailed guidance surrounding assessing safety plan monitors ability to adequately provide care for a child as well as protect the child for a short period of time. Guidance to evaluate protective capacities of biological parents, safety plan monitors, and foster parents is also

provided. Staff is challenged to assess the protective capacities of safety plan monitors, how the safety plan monitors cognitively, behaviorally, and emotionally feels towards the maltreatment before approval. Ongoing support surrounding evaluation of protective capacities is providing during CFSR PIP TOL sessions.

The assessment of the parent's needs, formally or informally, focuses on having an in-depth understanding of the parents' individual needs related to their ability to provide appropriate care and supervision to ensure the safety and well-being of the children. Case review data reflects assessment of needs and provision of appropriate services for parents is a strength in 23.01 percent of 128 applicable cases reviewed. Expectations regarding quality monthly contacts with biological parents have been provided to staff in Regions 1, 3, and 5 during CFSR PIP training 1. Regions 2 and 4 will complete the CFSR PIP training by March 2020. The training provides application guidance to the Quality Parent Contact and Parent Contact Summary Form. Empowering families involves engagement at all avenues throughout the life of a case. Enhancing parent assessments improves parental engagement and child safety, as well as strengthening parental protective capacities, reducing repeat maltreatment and improving timely permanency. Focused strategies continue toward improving engagement with parents to positively impact this outcome. Updates to KIDS WebFOCUS reports are completed in order to support staff in tracking monthly contacts with parents. Ongoing qualitative reviews are necessary to support staff in engaging parents in quality conversations surrounding changed behaviors and supports throughout the life of a case.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=128	**Strength**	**Area Needing Improvement**	**Cases NA**
Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.			
Item 12B: Needs Assessment and Services to Parents	**23.01% n=26**	**76.99% n=87**	**n=15**

The accurate assessment of the mother's needs occurred at a rate of 43.64 while the actual provision of services to meet those needs was 29.91 percent. The assessment of the father's needs was 32.56 percent and provision of services was 18.07 percent. The case review data indicates caseworker visits with parents is a strength in 21.43 percent of applicable cases. Improvement needs are related to quality and frequency of visits. Face-to-face caseworker visits with parents are required to occur on a monthly basis; however, the applicable case review data continues to indicate these visits occur less than once per month in 40.91 percent of cases for the mother and in 56.79 percent for fathers. Sufficient quality of caseworker visits occurs in 34.88 percent with applicable mothers and 28.21 percent with applicable fathers. Caseworker visits were sufficient in both frequency and quality with mothers at 25.45 percent and at 26.37 percent for fathers.

Policy, forms, and practice changes as part of the CFSR PIP include ceasing use of the Family Functional Assessment as a way to assess underlying causes and additional safety threats and instead utilize the six key questions within the Assessment of Child Safety as the measure throughout the life of the case. Areas of child functioning, discipline, parenting, and adult functioning are assessed and discussed with the mother and father every month during quality monthly contacts. Specific guidance is provided to child welfare staff to assist in quality discussion and accurate assessments during monthly contacts with a parent and/or child. During the monthly contact, CWS is required to complete the "Parent Summary Form" with the parent receiving the visit. The "Parent Summary Form" is an assurance that quality discussion surrounding a parent's ISP, progress in services, barriers to achieving the permanency goal, visitation planning, and articulation of current safety threats is occurring. Parents also have the opportunity to document any concerns on the "Parent Summary Form," allowing parents to have shared documentation of concerns and progressed discussed.

Thorough assessment of foster parents' needs focuses on identifying what services and supports are needed to enhance the capacity to provide appropriate care and supervision to the children in their homes. Adequate assessment of these needs and provision of appropriate services are critical to maintaining a child safely in a stable placement and in achieving case plan goals. Ongoing supports can be reviewed in the attached ***Oklahoma Child Welfare Services Foster and Adoptive Parent Diligent Recruitment Plan***. Current case review data indicates needs assessment and services to foster parents as a strength in 43.24 percent of 74 applicable cases.

Data Source: Case Review Data 04/2017 - 03/2019	Performance Item Ratings		
N=128	**Strength**	**Area Needing Improvement**	**Cases NA**
Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs.			
Item 12C: Needs Assessment and Services to Foster Parents	**43.24% n=32**	**56.76% n=42**	**n=54**

In-home services and PP policies require the development of all plans in collaboration with the family and further require active efforts to locate both parents and involve them in case planning. In addition to the parents, PP procedures require the worker to encourage the participation and involvement of family members and substitute care providers in ISP development, which is completed through continuum of family meeting activities. Qualitative analysis continues to support the need for additional education on individualizing service plans. CWS continues to focus on utilizing the assessment of child safety and understanding protective capacities as a way to identify individualized services for parents as well as engaging with the parent on an ongoing basis to ensure the services are of quality and effective in meeting the parent's needs.

CWS maintains a high percentage of cases meeting the standard of at least monthly visits based on KIDS data. For Federal Fiscal Year (FFY) 18, 95 percent of monthly caseworker visits with children in foster care were completed timely, per KIDS

WebFOCUS Caseworker Contacts-Federal Measure 1, as seen in the following table. CWS is committed to shifting the culture away from only compliance and continuing to focus on quality in order to better safety, permanency, and well-being outcomes for a family and child.

Measure 1: Monthly Caseworker Visits Completed		
Year	Target Percentage	Reported Percentage
FFY2014	90.0%	94.3%
FFY2015	95.0%	95.2%
FFY2016	95.0%	95.1%
FFY2017	95.0%	95.0%
FFY2018	95.0%	95.0%
Data Source: KIDS WebFOCUS Caseworker Contacts Federal Measure 1		

In-home services policies and procedures require weekly visits with children during the initial provision of in-home services, and based on case circumstances, visits may be reduced to twice monthly. PP policy requires CWS to visit each child in custody at least monthly with no more than 31-calendar days between visits. Additionally, both policies require the frequency of visits increase as needed based on individual case circumstances. Ongoing conversation with CWS occurred through CFSR PIP transformation zones, challenging staff to think outside of only compliance and focus on quality of interactions, safety assessments, and transparency throughout the life of a case.

Case review data indicates needed improvement in regard to the quality of visits in addition to an appropriate increase in visit frequency when circumstances indicate the need. Caseworker visits with children is an area of strength in 35.16 percent of 128 applicable cases reviewed. More specifically, the visit frequency is sufficient in 50 percent of the applicable reviewed cases while the quality of those visits is sufficient in 47.69 percent. Some areas for improvement related to visit quality include seeing the developmentally-appropriate child alone for a part of each visit, obtaining the child's input on case plan goals, and a discussion of needs, additional service needs, effectiveness of services, and the child's safety. Caseworker visits include observations and discussions of overall safety in addition to disciplinary methods.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=128	**Strength**	**Area Needing Improvement**	**Cases NA**
<u>Well-Being Outcome 1</u>: Families have enhanced capacity to provide for their children's needs.			
Item 14: Caseworker Visits with Child	**35.16% n=45**	**64.84% n=83**	**n=0**

Caseworker visitations are defined as purposeful interactions between a caseworker and a child, parents, and resource parents that reflect engagement and contribute to assessment, and case planning processes by ensuring child safety, supporting permanency planning, and promoting child and family well-being. Guidance on completing quality caseworker contacts with a child was provided through the CFSR PIP transformation zones. Guidance includes instructions of information to be gathered before a visit, during, and after. Before a visit, staff contacts service providers, medical providers, Developmental Disabilities Services (DDS), education, the CW Resource specialist, and any other professional or collateral to obtain more information on how the child is functioning within the household. Staff is encouraged to obtain as much information as possible before visiting the child to be able to address conflicting information during the safety assessment or to verify and support the current safety assessment. During the visit, staff gathers information surrounding child functioning, discipline, parenting, and adult functioning from all individuals residing in the home. Specialists also discuss the permanency plan and ongoing efforts to achieve permanency including services provisions, visitation with the person(s) responsible for the child (PRFCs), and any additional supports the foster family needs. The Child Behavioral Health Screener is utilized during the monthly contact to screen for behavioral services for the child. After the visit is completed, expectations are outlined for quality documentation. Through Pinnacle Plan maltreatment in care strategies, regions implemented qualitative reviews of caseworker visits each month. Supervisors review documented contacts and partner with staff on evaluation of the quality and sufficiency of information to support when the child remains safe in the out-of-home placement.

The case review data indicates improvement is needed as to caseworker visits with parents. Improvement needs are related to quality and frequency of visits. Face-to-face caseworker visits with parents are required to occur on a monthly basis; however, the applicable case review data continues to indicate these visits occur less than once per month in 40.91 percent of cases for the mother and in 56.79 percent for fathers. Sufficient caseworker quality visits occurs in 34.88 percent with applicable mothers and 28.21 percent with applicable fathers. Caseworker visits were sufficient in both frequency and quality with mothers at 25.45 percent and at 26.37 percent with fathers. Oklahoma is committed to enhancing engagement activities with parents, but must first identify strategies of accountability in meeting monthly with mothers and fathers. These strategies are being developed and assessed through ongoing analysis from statewide and regional teams.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=128	**Strength**	**Area Needing Improvement**	**Cases NA**
<u>Well-Being Outcome 1</u>: Families have enhanced capacity to provide for their children's needs.			
Item 15: Caseworker Visits with Parents	**21.43% n=24**	**78.57% n=88**	**n=16**

A child's educational needs were substantially achieved 74.75 percent of the time. In 99 applicable cases, CWS accurately and thoroughly assessed and met the educational needs of children 74.75 percent of the time. This rating includes both the accurate assessment of educational needs, which was found sufficient in 79.21 percent of applicable cases, and provision of services to meet identified needs was sufficient in 55.56 percent of children found to have identified needs. In 25.25 percent of the applicable cases reviewed, there was either no assessment of education needs or there was no provision of services to meet those needs.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**			**Outcome Ratings**			
N=99	**Strength**	**ANI**	**Cases NA**	**Substantially Achieved**	**Partially Achieved**	**Not Achieved**	**Cases NA**
Well-Being Outcome 2: Children receive appropriate services to meet their educational needs.				**74.75% n=74**	**4.04% n=4**	**21.21% n=21**	**n=29**
Item 16: Educational Needs of the Child	**74.75% n=74**	**25.25% n=25**	**n=29**				

It can be concluded that there is a correlation between placement stability and positive educational outcomes for children. When children remain safe and stable in a placement, support services including educational services remain consistent for the child. Continued focus on placement stability results in improved educational, behavioral, and physical outcomes for a child.

CWS continues using the Child's Passport to provide resource parents with access to educational records on an ongoing basis. Improved staff training includes how to conduct critical conversations with children, parents, placement providers, and service providers. Training also details continued enhancements to the Child's Passport and other KIDS system educational enhancements that includes direct linkage to the Oklahoma State Department of Education (OSDE) information to increase the ability to accurately assess and provide for a child's educational needs.

An area identified by key stakeholders is the ongoing need for Oklahoma's education system to be trauma-informed. Educators work with children and families before they become involved with the CW system. CWS must engage in continued collaboration with OSDE to be able to affectively support families. CWS is committed to working with OSDE in order to better outcomes for Oklahoma children and families.

Understanding and accurately assessing the physical and mental and/or behavioral health needs of children continues to remain at the core of many collaborative efforts. It is necessary to ensure each child receives appropriate services to address his or her identified needs, safety, placement stability, and increased timeliness to permanency. Case review data indicates CWS achieved a rating of substantially achieved in both the physical and mental and/or behavioral health of the child in 30.95 percent of 126 applicable cases and partially achieved the outcome in 30.16 percent of applicable cases.

Well-being outcomes include the needs assessment, provision of appropriate services to meet identified needs related to the child's physical health, and the appropriate oversight of medication to address needs. The case review data indicates accurate assessment and appropriate services provided to meet the physical health needs of the child is an area of strength in 44.55 percent of applicable cases and an area needing improvement in 55.45 percent of cases.

Assessments of physical health were found in 63.06 percent of applicable cases reviewed and in 60.71 percent of cases pertaining to dental health. Provision of appropriate services to meet identified physical health needs were found in 63.16 percent of applicable cases and in 50 percent of applicable cases for dental health needs. Appropriate oversight of medication was present in 79.17 percent of applicable cases reviewed.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=126	**Strength**	**Area Needing Improvement**	**Cases NA**
Well-Being Outcome 3: Children receive appropriate services to meet their physical and mental health.			
Item 17: Physical Health of the Child	**44.55% n=49**	**55.45% n=61**	**n=18**

Currently, CW nurses partner in meeting children's health needs and the overall CW mission goals of safety, permanency, and well-being. The nurses have a primary focus on CPS cases; however, FCS and PP cases with medical needs are also often addressed by the nursing staff. Incoming referrals with medical allegations are triaged by the nurse manager for high, moderate, and low-risk medical concerns and a CW nurse is assigned accordingly. Staff is also responsible to notify the nurse team when medical concerns arise during the course of an investigation or case. The CW nurses perform the following duties as needed specific to the child's needs:

- chart review and interpretation for caseworkers;
- chronologies for near-death and death cases;
- home visits to provide education, training, and oversight to families and foster families that includes medications, medical equipment and supplies, nutritional needs, growth and development monitoring, medical treatment plans, and emergency measures;
- medical representation at court;
- coordination of health and medical resources;
- collaboration with medical providers; and
- hospital and doctor's appointments, as warranted.

Current evaluation of the use of CW nurses is ongoing. Ongoing analysis supports CWS in expanding the use of CW nurses to further support the medical and physical well-being of children served by CWS.

CWS is committed to continued enhanced assessments of child mental and/or behavioral health needs, provision of appropriate services to meet those identified needs, and the appropriate oversight of medication to address needs. Case review data indicates accurate assessment and appropriate service provision to meet the mental and/or behavioral health care needs of children is a strength in 48.33 percent of 120 applicable cases.

Further analysis of the applicable cases reviewed found accurate assessment of mental and/or behavioral health occurred in 61.98 percent with appropriate services provided in 34.48 percent of applicable cases. Sufficient oversight of prescription medication related to mental and/or behavioral health needs occurred in 68.42 percent of applicable cases. Ongoing use of the Child Behavioral Health Screeners, quality engagement with PRFCs, and partnering with CWS mental health consultants continues to occur to ensure appropriate services are in place to meet children's physical and mental health needs.

Data Source: Case Review Data 04/2017 - 03/2019	**Performance Item Ratings**		
N=120	**Strength**	**Area Needing Improvement**	**Cases NA**
<u>Well-Being Outcome 3</u>: Children receive appropriate services to meet their physical and mental health.			
Item 18: Mental/Behavioral Health of the Child	**48.33% n=58**	**51.67% n=62**	**n=8**

Systemic Factors

Available data and information that demonstrates the current functioning of each systemic factor can be found in the Oklahoma Final Annual Progress and Services Report (APSR) to the 2015-2019 Child and Family Services Plan (CFSP).

Statewide Information System

Oklahoma's Statewide Automated Child Welfare Information System (SACWIS), referred to as KIDS, is a comprehensive case management tool used by CWS staff for documentation. The KIDS application functions as a case management system that serves as the electronic case file for children and families served by the state. The KIDS application that was the nation's first SACWIS, has been operational statewide since June 1995.

All of Oklahoma's child welfare (CW) programs are incorporated into the KIDS application. This includes: Child Abuse and Neglect Hotline, Child Protective Services (CPS), Family-Centered Services (FCS), Foster Care and Adoptions, Training, Office of Client Advocacy (OCA), Interstate Compact for the Placement of Children (ICPC), Permanency Planning, and the Successful Adulthood Program, formerly known as Independent Living. Policy contains Instructions to Staff on the data entry into SACWIS and is updated as policy changes. SACWIS is adapted to reflect practice and policy changes through quarterly updates. KIDS is the child's official electronic case record with supporting paper documents. A File Cabinet function allows users to store documents and photographs into the KIDS case record. Interfaces exist for Child Support, Eligibility, Financial Management, Human Resources, Oklahoma Healthcare Authority (OHCA), Oklahoma State Department of Education (OSDE), and Juvenile Justice Services to pull information onto the KIDS screen for a smooth, ongoing data exchange.

Application Strengths and Challenges

The KIDS application designed and built using the older client server framework over 20 years ago is now a major challenge. This framework has many inherent disadvantages over the newer N-tiered web-based systems. Client server applications are more difficult to maintain and more cumbersome to adjust. Currently, when an adaptive change is made to KIDS, a new version of KIDS must be pushed out in a scheduled release to every server in the state.

One of the main strengths of KIDS is that it has a mature maintenance phase of the Software Development Life Cycle (SDLC). The KIDS-Technology and Governance Unit, have dedicated information technology (IT) staff assigned solely to the KIDS project with years of experience working on the KIDS application. The IT staff is actively involved in monitoring and validating all data within the KIDS system, as well as any data coming into the system from external sources, such as OHCA and OSDE. The IT staff also monitors data exported from the system into all of the various regular reports. The Technology and Governance Unit has dedicated program staff co-located

with the IT staff. Program and IT staff have open access to one another and collaborate to resolve issues and answer questions that come up regarding the application process and data issues.

Data Quality

Another critical part of Oklahoma's SACWIS is the ability to generate quality data from KIDS. Oklahoma has CW analysts directly assigned to work with developers and business users to accurately identify data and work through complex data structures and equally complex practice dynamics to best define data requirements. These analysts are also tasked with identifying and addressing data quality issues with field and programs staff.

Oklahoma has specific analysts dedicated to various reporting responsibilities including federal-mandated reporting. Using software that identifies reporting errors on a regular basis, the analyst assigned to the Federal Reports Unit monitors the various federally required reports, such as the Adoption and Foster Care Analysis and Reporting System (AFCARS), the National Child Abuse and Neglect Data System (NCANDS), and the National Youth in Transition Database (NYTD).

Data elements for all CW federal reporting systems are integrated in KIDS and extracted to meet federal submission requirements. Data compliance, data quality, and the frequency utilities are run on a weekly basis for AFCARS. An automated AFCARS error notification is distributed weekly by email to CW supervisors and district directors. This notification includes an attached spreadsheet and contains errors for elements: 5 - periodic review, 23 - date of placement entry, and 43 - case plan goal. Guidance to understanding the error is included with the error notification, along with instructions to assist supervisors enable the content and distribute it to staff. The weekly error notifications are reinforced by emails to CW workers/supervisors by the Federal Reports staff. The email content identifies a particular AFCARS error, provides guidance for data entry, and also includes contact information when assistance is needed.

In addition, the KIDS system includes an AFCARS screen within the child's case at the child-client level. The AFCARS screen has several nodes that display data fields related to the child including information on the child's diagnosed disability information, removal, termination of parental rights, placement, foster family, court hearings, permanency plan, tribal custody, and finance. The screen allows for some direct data entry and can also display data entered from other screens. The Federal Reports Unit is responsible for running the AFCARS utilities weekly, monitoring the data compliance and quality. The unit developed a macro for its "AFCARS Spreadsheet" that combines the data compliance and quality utilities information into a user-friendly tool for efficient monitoring and follow-up by the staff.

The Federal Reports Unit strives to ensure that all elements are consistently under the two percent error threshold at the time of the data's submission. Oklahoma is repeatedly commended on its "continued commitment to ensuring high data quality."

The Federal Reports Unit also uses the NYTD Data Review Utility (NDRU) for monitoring the NYTD reporting system. The NDRU may be run up to three times weekly. Weekly error notifications are generated for NYTD elements: 17 - adjudicated delinquent, 18 - education level, and 19 - special education. The unit developed additional reports to assist with monitoring NYTD data. These reports are distributed to State Office program personnel within the Successful Adulthood program and to designated contract staff for the follow-up 19 and follow-up 21 report periods.

For all three reporting systems, AFCARS, NYTD, and NCANDS, combining the use of the federal utilities with state developed reports and exception reports improved the state's ability to monitor both compliance and data quality. Effective strategies for improving data quality are an ongoing challenge; however, data validation that involves direct contact with CW staff provides the opportunity to educate and encourage proper, thorough documentation. Ongoing data validation keeps the unit in touch with the functioning of both the KIDS application and the federal reporting extracts. The state has two WebFOCUS reports to monitor federally mandated CW visitation: Caseworker Contact–Federal Measure 1 and Caseworker Contact–Federal Measure 2. These WebFOCUS reports update daily and are available to CW staff internally from a reports dashboard. The reports summarize compliance with the mandated standard and provide staff detail of children with missed visits. A "How To" document is available to assist staff in understanding the two reports. The Federal Reports Unit is available for consultation, guidance to staff, management on understanding errors and related data field, and in assisting staff with corrections of data entered incorrectly, when needed.

The Federal reporting data quality process was adopted by the other reporting units at KIDS, as well. Specifically, Oklahoma's Pinnacle Plan Reporting unit was created to meet the data demands that resulted from the class action lawsuit settlement agreement. Many of the measures that Oklahoma is mandated to report on, as outlined in the Pinnacle Plan, are taken directly from Federal CFSR Round 2 composite component measures, the federal worker visitation measure, federal data profile elements, and other sources. All detail data including Oklahoma's NCANDS and AFCARS submission files are submitted monthly or semi-annually to the monitoring organization's data team for independent verification. In October 2014, the Pinnacle Plan monitors, known as Co-Neutrals, granted a finding of "Data Sufficiency" in assessing the progress on reporting on the agreed upon Pinnacle Plan Metrics. This finding was maintained for each subsequent reporting period.

The Foster and Adoptive Parent Online Child Passport Access Portal was created to provide access to the most accurate and up-to-date health and educational information for placement providers. This interface to KIDS from OSDE and OHCA databases allows easier access by the field and placement providers to a child's past and present health and educational history. The interface with OHCA and the OSDE includes an agreed upon specific set of predetermined data regarding all custody children. The data provided through the interface goes through a validation process to ensure the data's accuracy and confirmation that all data elements were transmitted.

KIDS staff offers statewide assistance for data cleanup that specifically targets AFCARS and NYTD data elements, while also providing field staff with guidance on any other data entry questions. Within KIDS, there are highlighted mandatory fields for federal data elements and a worker cannot bypass the field without entering the data element. KIDS also has programmed edits that prompt workers to review missing federal data elements. These data elements are also found in the specialized screens listing all of the AFCARS data elements that show missing data fields and a summary of all AFCARS data elements pertaining to the child(ren) in the case.

Every worker receives training in the CW CORE Academy that includes using KIDS, and instruction on the importance of accurate documentation of those federal data elements. Additional training in the accurate documentation of the child's case record is available upon request or when identified as needed by program or management staff and facilitated by KIDS staff.

State Office program staff and field staff access numerous reports through WebFOCUS, which is an easy-to-use web-based reporting tool that allows the user to customize the screen view. Supervisors and managers receive training in the use of data contained in the reports, as well as the use of management screens within KIDS. Additionally, one-on-one or group reports training provided by KIDS staff is available upon request.

Statewide Systemic Data Elements

SACWIS requires tracking of four Statewide System Data Elements, the child's status, demographic characteristics, location, and goals for placement of every child. Several items are in place to ensure the information is documented into KIDS. For example, a child's removal begin date must be entered in KIDS to identify the child as being in out-of-home care and subsequently entered into a placement.

KIDS information about a child's status can be reported at any time. Currently within the KIDS system, the 19A AFCARS population for 10/1/18 through 3/31/19 indicates: 10,821 children are in the population and 10,809 or 99.9 percent with a documented legal status of Emergency, Temporary, Permanent, or Voluntary Custody; 1,280 or 11.8 percent of children in that population with terminated parental rights (TPR) to one parent only; and 3,057 or 28.3 percent with TPR of two parents.

The child demographic information has many procedural checks in place, as previously discussed, to ensure that all AFCARS and NCANDS required information is complete for a child or identified when the information is missing.

The location of a child in care or "placement" is required by policy to be documented within two-business days of placement. A child's placement must be documented in KIDS for the placement provider to be reimbursed for services rendered. A report was developed to identify all children in out-of-home care that have not had a documented placement in more than 48 hours. The Data and Strategy Analysis Unit at KIDS sends this report out weekly to notify staff about the missing placements.

For each placement documented within a child's case, the specific placement provider's resource information is in the child's case within KIDS. The placement provider's resource information contains more detailed information on the resource's demographics, such as address, phone number, and household member(s). When a resource is contracted through a contracted agency and not through DHS, then the contracted agency along with contracted home is also identified in KIDS. This way, a child's exact location is identified within KIDS. For example, during the time period of 4/1/18 – 3/31/19, there were 13,194 children served in care. Of those, 7,972 children were still in care on the last day of the reporting period, and 7,905 of those children, 99.2 percent, showed to be in a documented placement in KIDS.

A child's case plan goal, Element 43, must be identified and documented within 60-calendar days of removal. A weekly error notification for Element 43 is generated when there is no approved case plan goal for a child who has been in care for 60-calendar days or longer. The approved case plan goal must be within the current removal episode and established after the date of the current removal. Of the 13,194 children in the served population during 4/1/18 – 3/31/19, 12,260 children, 92.9 percent, had a documented case plan goal as of 3/31/19. Of the 934 children without a case plan goal documented, 850 are listed as "not yet established," which indicates that the child was in care less than 60-calendar days, and 84 children were in care longer than 60-calendar days without a case plan goal documented in KIDS. Of the 84 children without a documented case plan goal, 50 children were still in care, 0.4 percent, of the total population served.

The ongoing validation efforts of the KIDS reporting units help identify missing information for children in the case record. KIDS also has the capability for programmers to run special data pulls that include compliance data based on transaction dates, such as the percent of children where case plans goals were not established in 60-calendar days from removal or the percent of placement changes not entered into the KIDS placement screens within two-business days, per policy.

Immediately upon approval, the 2020-2024 CFSP will be available at http://www.okdhs.org/sites/searchcenter/Pages/okdhsreportresults.aspx. The contact person is Sherry Skinner at (405) 522-3977 or Sherry.Skinner@okdhs.org.

Case Review System

CWS continues ongoing efforts to promote positive relationships and collaborate with Oklahoma’s court system and stakeholders in order to support families in achieving permanency safely and expeditiously. Oklahoma’s court system allows families to have due process, consisting of periodic reviews for each child under the jurisdiction of the court, which occurs more often than required by statute. This system also maintains a process for termination proceedings when parents are unable to manage unsafe behaviors. Refer to pages 20-21 of the Oklahoma Final APSR to the 2015-2019 CFSP for additional data related to holding timely periodic reviews and permanency hearings.

An intentional focus on developing capacity by CWS to engage court partners and enhance the Court Improvement Project's (CIP's) future impact has been ongoing with the implementation of Oklahoma's Child and Family Services Review Program Implementation Plan (CFSR PIP). Through analysis of data and qualitative reviews, CWS workgroups and focus groups of key stakeholders, court improvement strategies were developed that focus on enhancing CWS' skill set and ability to engage judicial partners. Court improvement strategies also focus on creating common language around values and desired outcomes by developing key court performance indicators and increasing intentional communication and collaboration with court partners.

CWS is in the process of developing a court expectation training that will support CW staff on key practice components of the court process, such as report writing and documentation of safety and behavior changes in family functioning, verbalization of safety threats, articulation of behavior changes at the bench, and district-to-court relationship building necessary for improving court outcomes. A guidebook will be developed as a resource for staff to utilize during court procedures. Key areas of the guidebook include guidance on court etiquette for CWS professionals as well as parents and foster parents, expectations surrounding communication with court partners before a hearing, and staff roles and responsibilities. The goal of the guidebook is to set clear expectations of CW staff when adverse rulings are made so CWS can continue advocating for timely permanency and the best interest of children. The training and guidebook will be available to staff in December 2019.

Currently, judges are provided data from the Statewide Automated Child Welfare Information System (KIDS) YI101 Judicial Report, which allows judges to analyze information for children assigned to their courtroom. Data includes petition dates, adjudication dates, dispositional dates, sibling placement information, and other pertinent information. The information from this report is helpful in providing point-in-time information to judicial partners, but does not identify overall performance trends. In collaboration with CIP and Casey Family Programs, a web-based judicial dashboard was developed that includes the following: time to reunification, first placement hearing, time to permanency exit, and termination of parental rights. The judicial dashboard will be directly available to Judges and other court partners. The key focus of the judicial dashboards is to provide performance data for each jurisdiction. In addition to the dashboards, CWS also annually presents current safety, permanency, well-being, and miscellaneous data information at the Statewide Judicial Conference facilitated by CIP. Training consists of safety measurements, importance of family engagement, timely permanency practices and outcomes, and any other information that supports stakeholders in the case review system.

In 2017, CWS, in partnership with CIP, completed a joint project to improve permanency outcomes for children in out-of-home care. Three jurisdictions were selected to participate in the joint project in which improvement strategies were implemented within each jurisdiction. Although final data measurements will not be available until September 2019, preliminary data shows an increase to timely permanency in all three jurisdictions. Some key indicators of success include an enhanced effort to strategically

meet with court partners more frequently and outside of normal court proceedings, ensuring that parents and foster parents have an adequate amount of time in front of the bench to discuss critical areas of progress or lack of progress with all parties, as well as ensuring biological parents have paupers affidavits before attending show cause and combining adjudication and disposition hearings. As continued evaluation of outcomes through the ongoing continuous quality improvement process occurs, information from key findings will be used to inform ongoing statewide court improvement efforts.

CWS will continue to partner with CIP in ensuring biological parents receive high quality and adequate parent representation in court proceedings. Currently, CWS is supporting CIP in the development of a standardized contract for attorneys representing parents and children in juvenile proceedings. Statewide, individual court contracts vary in such a way that it makes it difficult to ensure attorneys are motivated to move court cases through the system, since attorneys make more money on a case the longer the court case stays open. As Title IV-E agencies will now be able to claim Title IV-E administrative costs for independent legal representation by an attorney for a child who is a candidate for Title IV-E foster care or in foster care and his/her parent to prepare for, and participate in, all stages of foster care legal proceedings, CWS will continue to work closely with the courts, tribes, and other stakeholders to ensure and support the expansion of quality legal representation for children and parents.

Quality Assurance System

The Children's Bureau has identified five essential components that make up an effective quality assurance system and they are: an administrative structure to oversee CQI system functioning, quality data collection; a method for conducting ongoing case reviews; a process for analysis and dissemination of quality data on performance measures; and a process for providing feedback to stakeholders and decision makers in order to adjust programs, practices, and processes. As a result, CWS' assessment of its current quality assurance system will entail examination of each of these areas.

Foundational Administrative Structure

CWS applies the continuous quality improvement process consistently across the state and maintains oversight and authority over the implementation of CQI. CWS has established and follows written and consistent standards and requirements, as per the Child and Family Services Review (CFSR) Procedure Manual. CWS maintains the capacity and resources necessary to sustain an ongoing CQI process in that CWS currently has a team dedicated to quality assurance activities, known as the CWS Continuous Quality Improvement (CQI) Program. The CQI Program has experienced significant turnover and changes in leadership the past several years; however, at the time of this writing it is believed there will be stability not only in leadership, but also in positions dedicated to conducting work related to quality assurance. The CQI Program is currently led by a program administrator who reports directly to the deputy director of CWS Programs. Within the CQI Program, there are three teams with direct responsibility for activities related to the quality assurance system, which are: the Child

and Family Services Review (CFSR) team and two Quality Assurance teams. The CFSR team is led by a program supervisor and is comprised of five program field representatives (PFR's). The first Quality Assurance team is led by a program supervisor and is comprised of five PFR's. The second Quality Assurance team is led by a program supervisor and is comprised of four PFR's. One CFSR team member and two Quality Assurance team members are collectively assigned to each of the five regions. At this time, due to a vacancy in a Quality Assurance team, one region only has two CQI support team members assigned. Plans are underway to add an additional staff member to the second Quality Assurance team, which will allow Region 4 to have the full three-member support team in place. The number of staff within the CQI Program needed to effectively support quality assurance activities and processes across the state and various programs will be analyzed in an ongoing manner by the newly appointed CQI program administrator and additional staff and supports will be requested accordingly.

An additional unit of CQI program staff who report directly to the CQI program administrator is the Contract Performance Review (CPR) team, which conducts quality assurance related audits for contracts associated with placements above foster care level, in addition to serving as second level QA reviewers within the CFSR framework.

Quality Data Collection

CWS collects data, both quantitative and qualitative, from a variety of sources in support of its current quality assurance system. Oklahoma's SACWIS system is a comprehensive, automated case management tool that supports child welfare practice. It is used to collect and extract accurate quantitative and qualitative data and intended to hold a state's official case record, which includes a complete, current, accurate, and unified case management history on all children and families served by the state's Title IV-B and Title IV-E entities. CWS utilizes additional sources to assess current functioning within multiple components of the child welfare system.

Case level data is collected through the CFSR process utilizing the current federally approved Onsite Review Instrument (OSRI). Data collected in this process is done so consistent with the instrument, consistent across reviewers, and is properly implemented across the entire state. Assurance of consistency and proper implementation is overseen by CQI Program leadership and is maintained through the various audit and quality assurance mechanisms outlined in the CFSR Procedure Manual proposed by CWS and approved by the Children's Bureau, during the process of being approved as a CFSR self-review state. The various audit and quality assurance mechanisms summarily consist of standardized training for all staff within the CQI Program regarding application of the OSRI. Further support for consistency of ratings across multiple sites and reviews is built into the process by means of the following: CFSR program supervisor debriefs and discusses items and outcomes as well as the OSRI scoring logic with staff conducting case reviews; third party second-level quality assurance reviews are conducted by trained staff from the CPR team; and a full CQI team debriefing is conducted at the conclusion of each six-month period. As a result of the instability within the CQI Program as previously discussed, the full CQI

team debriefing has not occurred consistently in the recent past. Plans are currently in progress to ensure this component regularly occurs in efforts of supporting consistency of ratings across multiple sites and reviewers under the guidance of the newly appointed CQI program administrator.

Additional quantitative and qualitative case level data collected directly by the CQI Program occurs as part of the Quality Assurance team's role in completing reviews of Intensive Safety Services (ISS) cases across the five regions. This includes utilizing a standardized review instrument, as well as a focus on measuring ISS model fidelity and quality of tertiary prevention services provided. The Quality Assurance teams are also involved in the reviews of the Eckerd Rapid Safety Response pilot project occurring in Region 3, as well as CPS Safety Consultations when requested by regional leadership staff.

CWS acknowledges that meaningful data does not only come from the processes outlined above. CWS utilizes additional sources to assess current functioning within multiple components of the child welfare system. This includes evaluations, surveys, and focus groups with both internal and external stakeholders, as well as additional case reviews for purposes of CPS appeals and maltreatment in care (MIC). These additional areas of data gathering have not been fully implemented in a standardized and meaningful way to inform the broader ongoing quality assurance efforts undertaken by the CQI Program. The CQI Program plans to address this deficiency moving forward in efforts of ensuring both quantitative and qualitative data are utilized to improve practice and outcomes for families and children, consistent with best practice, from all areas in which regular reviews are conducted.

Case Review Data and Process

CWS has an established and ongoing case review component that includes reading case files of children served by CWS and interviewing parties involved in the cases. The details of the case review component can be found in the CWS CFSR Procedure Manual, approved by the Children's Bureau during Round 3 as part of the process of Oklahoma becoming a CFSR self-review state. Plans to improve areas of the CFSR Procedure Manual that have not been consistently implemented include: utilization of external reviewers in the case review process, a full CQI Program debriefing of a sampling of cases reviewed each six-month period, bi-annual trend and outcomes reporting to the regional deputy directors and Executive Team, and the presentation of trend and outcome reports to the regional leadership teams for the purposes of regional development and monitoring of improvement strategies.

Analysis and Dissemination of Quality Data

CWS has the ability to collect quality data from a variety of sources as outlined above and maintains mechanisms to gather and track information over time. Consistent and standardized organization, analysis, and dissemination of the data, is currently lacking. Previously, the practice of CQI Quality Circles was intended to fill this gap; however, the consistent and ongoing use of the CQI Quality Circles was never realized, primarily due to lack of staff capacity. As a result, CQI leadership plans on seeking out consultation

from experts in this area to develop, establish, and implement effective strategies and activities moving forward.

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

Feedback loops outlined in the CFSR Procedure Manual will be examined and monitored for consistent implementation going forward to ensure the information is shared and regional improvement plans consider the information when developing improvement plans. This is in addition to the regular sharing of data and trend reports along with consultation provided by the Quality Assurance teams. CWS conducts and facilitates at minimum, an annual stakeholder feedback session where various CWS data is shared and recommendations of stakeholders are received for consideration of practice and system improvement.

In efforts of driving change and improving outcomes for children and families, the CQI statewide implementation team (SIT) was developed and implemented in 2018, as a venue to share results, inform training, policy, and practice, as well as to begin to develop the link between results and daily casework practices as it relates to work being conducted as part of Oklahoma's Child and Family Services Program Improvement Plan (CFSR PIP). The CQI SIT is composed of two members of leadership from each region, program administrators from CPS, Family-Centered Services, Permanency Planning, and Foster Care and Adoptions, Core Strategy leads, and the CFSR PIP program supervisor. The CQI SIT convenes quarterly to analyze performance data in safety, permanency, and well-being outcomes in each region, to discuss systemic barriers, and to strategically plan and focus efforts to improving outcomes statewide. In addition to CQI SIT, there are five regional CFSR PIP teams that convene monthly. The regional CFSR PIP teams are composed of leadership and supervisors from all child welfare programs. The regional teams partner with CQI SIT in order to communicate about areas of need for support in the region as well as sharing successes in outcomes. The regional CFSR PIP team’s focus is to create a regional charter for outcomes improvement identifying accountability to implementation efforts as well as support for the region to sustain practice.

Information and feedback provided by these teams were heavily used to support the development of the 2020-2024 CFSP goals and objectives. Feedback provided by CW staff currently implementing updated safety practices as part of the CFSR PIP was also utilized, as well as information provided by supervisors completing transfer of learning (TOL) activities within their regions. Ongoing collaboration and information sharing between CWS, the Court Improvement Project (CIP), behavioral health providers, nursing staff, tribes, and other partners has been ongoing through CFSR PIP efforts.

On 5/9/19, CWS hosted a large CFSP stakeholder meeting in order to partner with all entities responsible for outcomes of families involved in Oklahoma’s child welfare system. Approximately 100 internal and external stakeholders participated in the meeting including, but not limited to: tribes, courts, Oklahoma Department of Mental Health and Substance Abuse Services, education, domestic violence providers,

medical, primary prevention, Oklahoma State Department of Health, biological parents, youth, foster parents, and many other valuable stakeholders. The meeting also provided an overview of current progress of Oklahoma's CFSR PIP. Stakeholders were asked to provide feedback and support surrounding Child and Family Outcomes Safety 1 and 2; Permanency 1 and 2; Well-being 1, 2, and 3; as well as foster care and adoptive parent licensing, recruitment, and retention; service array and resource development; and agency responsiveness to the community. Each stakeholder had the opportunity to learn about specific efforts that are currently in place to impact these outcomes as well as provide feedback for each outcome. The ideas, feedback, and support received during the stakeholder meeting was utilized during the planning and development of the goals outlined in Section 3 of this document. A plan to meet with these stakeholders to discuss the outcomes of their work and support from this stakeholder meeting is in development. Ongoing stakeholder meetings will occur in collaboration with CIP and the Oklahoma State Department of Health as CWS moves towards utilizing external collaboration and partnership to shift the focus as an agency to primary prevention and family-centered services living out the vision that "Together we promote strong Oklahoma Families."

Staff Training

Refer to the attached ***Oklahoma Child Welfare Services Training Plan*** for details pertaining to staff training.

Service Array

The infrastructure for how children and families are served in the child welfare (CW) system includes services administered through targeted case management and receipt of Medicaid compensable targeted case management services that assist a child's access to needed medical, educational, social, and other services delivered by external partners. The families' first contact to assess their strengths and identify their needs is through Child Protective Services (CPS) safety assessment and investigation process. The purpose of CWS is to identify, treat, and prevent child abuse and neglect ensuring reasonable efforts are made to maintain and protect the child in the child's own home. When this is not feasible, CWS provides a placement that meets the child's needs. CW specialists are key in connecting children and families involved with the CW system with necessary interventions. CWS activities are tied to the CWS Practice Model, which depicts the flow of the work from case opening to case closure.

Oklahoma's CW system has made significant efforts to develop its system capacity in having a trauma-informed system. The initial Trauma-Informed Systems Intervention Plan, developed in 2011, laid the foundation and accelerated the CW system's awareness of the importance of a trauma-informed system. Building upon the Trauma-Informed Systems Intervention Plan, CWS continued its efforts to educate the CW workforce on the effects of adverse and traumatic events on children's development and how best to incorporate this knowledge into their day-to-day practice.

The quality of CWS staff engagement with the family in assessing strengths and needs, joint-case planning, and identification and provision of appropriate services is critical in shaping the ultimate outcome of each child and family. For families to have enhanced capacity to provide for their children's needs, CWS must accurately assess and provide appropriate services to meet the individual needs of children and families. Both initial and ongoing assessment of children, parents, and foster parents to adequately address the relevant issues and attain case plan goals is critical to achieving positive outcomes. Empowering families involves engagement at all avenues throughout involvement with CWS. Focusing on improving parent assessments improves parental engagement and child safety, as well as enhancing parental protective capacities, reducing maltreatment and improving timely permanency.

CWS completes the Assessment of Child Safety (AOCS) within CPS to determine the safety of a child and within Family-Centered Services (FCS) and Permanency Planning (PP) on an ongoing basis to continue to assess the strengths and needs of the children and families. The assessment of children and families guides the evaluation of safety and helps to determine how to best serve the family at a client level. Beginning in 2012, CWS developed and implemented through the Oklahoma Trauma Assessment and Service Center Collaborative (OK-TASCC) project, a five-year demonstration grant through the Administration on Children Youth and Families, Children's Bureau, "Initiative to Improve Access to Needs-Driven, Evidence-Based/Evidence-Informed Mental and Behavioral Health Services in Child Welfare" (HHS-2012-ACF-ACYF-CO-0279), a screening and functional assessment, the Child Behavioral Health Screener (CBHS) that is psychometrically sound and systematically tracked to capture data to: (1) screen; (2) connect needs to services; (3) evaluate the children’s well-being over time in FCS or PP cases; (4) inform outcomes at the client level; and (5) monitor changes in the service array at the system level. Oklahoma utilized the OK-TASCC grant to create its first systems-wide trauma-informed approach to screening of all children involved with CWS. CW specialists make service referrals based on the needs identified, facilitates initiation of services with providers, and uses the CBHS as a guide to establish service utilization.

Early Periodic, Screening, Diagnosis, and Treatment (EPSDT)

Oklahomans under the age of 21 who are receiving medical benefits may receive EPSDT, a set of services administered by the Oklahoma Health Care Authority (OHCA). It authorizes, as indicated in its name, screening, and diagnostic and treatment services. Mental health services, when deemed medically necessary, qualify under EPSDT. Specific screening provisions include:

- periodic screening according to the schedule of frequency, or at minimum an annual physical exam. EPSDT allows CWS to provide an initial health screening for each child placed in DHS emergency custody to identify any health problems that require immediate treatment, diagnose infections and communicable diseases, and evaluate injuries or other signs of abuse or neglect; and
- a yearly behavioral health or developmental screening, and, when recommended, a behavioral health or developmental assessment, within 60-calendar days of the screening.

SoonerStart Early Intervention Program (SoonerStart)
SoonerStart is Oklahoma's early intervention program for infants and toddlers through 36 months of age who have disabilities and developmental delays. SoonerStart is Oklahoma's Part C of Individuals with Disabilities Education Act (IDEA) program. The lead state agency is the Oklahoma State Department of Education (OSDE). This agency provides case management with all other services provided through a contract with the Oklahoma State Department of Health (OSDH). SoonerStart authorizes screening to determine qualification for early intervention services for developmental delays, particularly in areas of physical development. The instrument for the routine screening is the Ages and Stages Questionnaire (ASQ-3). CWS policy requires CW staff to refer children younger than three years of age who are victims of substantiated child abuse or neglect to SoonerStart.

Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS)
ODMHSAS is Oklahoma's single state authority responsible for publicly funded mental health prevention and treatment services. CWS refers children and families to local community mental health centers or other approved providers for the assessment of mental health needs and the recommendation of treatment and services based on the identified needs. Their assessment process is the primary mechanism used in the state. ODMHSAS provides services to children and youth through its Systems of Care (SOC) structure. A SOC represents a community coming together to take care of its own, and is made up of an organized group of agencies, schools, supportive individuals, and entities, such as parents, youth, service club representatives, faith-based organizations, and other key stakeholders within the community. This group, known as a community team, comes together to coordinate services across systems within the community to meet the needs of families of children with serious emotional or behavioral disturbances and complex needs. Wraparound is a service provided through the SOC framework. The Wraparound process improves the lives of children with complex needs and their families by developing individualized plans of care. SOC currently has 65 community teams serving all 77 Oklahoma counties.

Studies revealed that children involved with child welfare systems do not systematically receive services that are sufficient to help them overcome their behavioral difficulties; additionally, "traditional" therapies may result in more behavior problems over time (McCrae, Barth, & Guo, 2010). Infants and young children comprise the largest cohort entering and remaining in Oklahoma's CW system. A focus on the needs of young children and their families is critical to achieving desired permanency outcomes in Oklahoma. Progress in the development of effective treatments for children in Oklahoma has been made. The increase in evidence-based treatment to address identified needs has reduced problematic behaviors, thereby increasing child well-being. The resulting increase in child well-being created favorable conditions for reductions in placement changes/disruptions, reduced re-entry rates, and quicker decisions around family reunification or adoption. Focused CW staff training increased the quality of decision-making and case planning. Use of the Statewide Automated Child Welfare Information System (SACWIS) provided immediate data to CW staff to initiate and

monitor services and to better inform all levels of decision-making, thereby driving improvements in the broader CW system. However, the dissemination of these evidence-based practices to community settings outside of ODMHSAS-contracted community mental health providers has proved challenging. Barriers to the adoption of evidence-based practices in community settings include inadequate training, organizational policies, procedures, and complex systems.

Oklahoma State Department of Health (OSDH)

OSDH is Oklahoma's single state authority responsible for primary public health protection. The OSDH Family Support and Prevention Service Division promotes the health, safety, and wellness of Oklahoma children and families. The Child Guidance Program provides support and training to children birth to age 13, and their parents and caregivers. Although the Child Guidance Program does not have eligibility criteria, it works closely with mandated programs, such as SoonerStart, IDEA Part C, public schools, and IDEA Part B, to provide a safety net to children and families who do not qualify for those services but are at risk for behavioral, developmental, or communication delays. CWS refers children and families to child guidance through 15 regional hubs located within local county health departments, and through contracts with the Child Study Center in Oklahoma County and the Tulsa Health Department in Tulsa County.

OSDH, through the Office of Child Abuse Prevention within the Family Support and Prevention Service of the OSDH, provides public education efforts to change social norms and behaviors, family and community engagement, as well as the policies and institutions that help create a strong prevention system. DHS collaborated with OSDH and prevention system partners to identify and implement strategies to support safe and healthy children and families through the creation of the attached ***Oklahoma State Plan for the Prevention of Child Abuse and Neglect 2019-2023.***

Analysis of the data allowed for the identification of gaps between the needs and the effectiveness of the services at a client level. At a system-level, it has allowed decision-makers to reassess the appropriateness of the service array. Systemic barriers in the child welfare system are a challenge to overcome in developing strategies to address service and quality gaps. In order to match and deliver appropriate individualized services to children and families, communication, collaboration and information sharing is of utmost importance. In addition, geographic differences in service availability are a determining factor in the delivery of the highest quality and most effective services available statewide. A continuum of care and service array for children and families through a community-based approach to ensure connection to and utilization of formal and informal community-based resources available is a priority in Oklahoma. CWS continues to utilize multiple strategies toward improving safety decision-making and increasing positive outcomes for children and families while also building capacity to accurately identify safety threats and provide appropriate services to eliminate safety threats throughout the life of the case. Oklahoma, with the passage of the Family First Prevention Services Act (FFPSA), continues to enhance and expand prevention efforts through FCS cases as well as improve the provision of appropriate services for children

in foster care prior to reunification and supportive services at the time of reunification in order to prevent re-entry into care. CWS, as a partner with ODMHSAS and OSDH, is committed to ensuring the creation and efficient operation of a unified and integrated system of care for all Oklahoma's children and families.

Agency Responsiveness to the Community

CWS places a high value on collaboration and partnership with stakeholders. CWS remains committed to engaging community partners, other state agencies, the private sector, and tribes in supporting children and families. CWS has dedicated significant resources to support partnership with the community, including a designated CW Community Partnerships Program.

CWS Community Partnerships was created after the CW Community Collaborative initiative pilot launched in 2012, to work with identified communities to develop local collaboratives to assist communities in partnering around improving the local CW service array, as well as issues that relate to CW, and was successful. In response to needs identified by participating communities, CWS Community Partnerships staff assisted in the development and implementation of detailed plans of action to address the priority needs and issues identified by key informant surveys administered in each community. CWS Community Partnerships assisted with the development of Collaboratives in three communities to date. Some of the identified priority needs and issues addressed include: improving family support services, addressing poverty issues and economic conditions, improving family engagement and access to quality services, improving the coordination of community collaboration, decreasing the time to permanency, and increasing placement stability. CWS continues to provide direct staff support and technical assistance to these communities and projects and will work toward building capacity to offer support to additional communities through this or a similar model.

In response to requests from the community, CWS Community Partnerships created the CWS School-Based Services (SBS) Program in 2016. CWS collaborates with school partners and shares the cost of the School-Based Services specialist (SBSS) position, with the SBSS position being out-stationed at the assigned school. The SBSS staff assist with connecting students and families to resources and services, among many other functions that vary based on the needs of the assigned school. The SBSS staff often assist families that might be at-risk of coming into contact with CWS; thereby, possibly preventing future CW involvement. There continue to be inquiries from schools that would like to have a SBSS position for their school. CWS Community Partnerships will be assessing the feasibility of future expansion of the SBS program.

Fortunately, community partners and other public and private agencies are fully-engaged in both partnering with the agency to assess the functioning of the system as well as to develop solutions for identified areas of need. CWS and CWS Community Partnerships will continue its work with existing partnerships with Count Me In 4 Kids, Safe Families, OK Foster Wishes, and the 111 Project/Care Portal. Other specific

aspects of community engagement and agency responsiveness to the community are addressed in other sections of this CFSP.

Foster and Adoptive Parent Licensing, Recruitment, and Retention

Refer to the attached ***Oklahoma Child Welfare Services Foster and Adoptive Parent Diligent Recruitment Plan*** for details pertaining to this systemic factor.

Plan for Enacting the State's Vision

Since 2012, Oklahoma's Pinnacle Plan has been the roadmap for improving outcomes for children involved in the child welfare (CW) system. Performance areas of the Pinnacle Plan include, but are not limited to: expansion of resource homes, new caseload standards, reduction in use of shelter care, termination of shelter care for young children, consistent and timely investigations and reporting of child maltreatment in care, and effective and streamlined staff hiring and training. These reform efforts were subsequently aligned with the Child and Family Services Program Improvement Plan (CFSR PIP) strategies to continue to enhance improvements to the CW system and to better serve children and their families.

Core performance areas and the CFSR PIP serve as the foundation to assist in selecting and designing the goals and objectives to the 2020-2024 CFSP to continue to build state capacity. Oklahoma will continue to focus on driving the workforce to shift from compliance-based thinking to quality-focused assessments resulting in improved outcomes for Oklahoman families. Child Welfare Services (CWS) is committed to improving the safety, permanency, and well-being of children and families served by the Oklahoma CW system. Oklahoma Department of Human Services (DHS) seeks to accomplish the following goals during the five-year period of the 2020-2024 CFSP.

Goal 1: Decrease the number of unnecessary family disruptions by increasing prevention efforts in order to strengthen families, prevent child maltreatment, and keep children safely in their own homes.

Impacts: Safety 1 and 2, Permanency 1 and 2, Well-being 1, 2, 3 and Items 1 through 18, 25, 26, 27, 29, maltreatment in care, timely permanency, and placement stability

Measure	Baseline	Target by End of FFY 24
Foster care entry rate per 1,000	5.3 Data Source: NCANDS	4.0
Families who received preventative services from the state during the year – Family-Centered Services	2,024 Data Source: KIDS	2,500
Absence of maltreatment in care	99.08% Data Source: NCANDS and AFCARS	99.68%
Safety Outcome 2: Item 2: Services to family to protect children in the home and prevent removal or re-entry into foster care	51.06% Data Source: CFSR	95%
Safety Outcome 2: Item 3: Risk and safety assessment and management	18.46% Data Source: CFSR	95%

Objectives

- Increased use of Intensive Safety Services (ISS) developed through the IV-E Waiver Demonstration Project, and other well-supported or promising prevention services to keep children safely in their own home. Increased use of services will be monitored annually over the five-year period, with a goal to increase the number of ISS services each year. As other well-supported and promising prevention services are identified, a target for use will be established.
    - Enhance the use of Comprehensive Home-Based Services (CHBS), Safe Care, ISS, and Motivational Interviewing in order to preserve families. Use of services will be monitored annually over the five-year period, with a goal to increase the number of families served though the identified evidence-based interventions each year.
- Increase access to evidence-based programs and services to support and prevent maltreatment and unnecessary family separation. Evaluation will occur through number of services available, relationship, and community collaborative.
    - mental health and substance abuse prevention and treatment services – number of services offered/clients served annually;
    - in-home parent skill-based programs that include parenting skills training, parent education, and individual and family counseling – number of services offered/clients served annually; and
    - partner with Domestic Violence programs to stop family violence – number of services offered/clients served annually.
- Improve the quality of safety decisions through enhanced policy followed by training and support to the field. All action steps are aligned with the CFSR PIP and will be implemented by June 2020.
    - This will include updates to the Child Welfare Safety Guidebook to include safety guides for all programs.
    - All CORE trainings and Supervisor Academy training will be updated to focus on enhanced safety practices outlined within the CFSR PIP.
    - Increase understanding, recognizing, and responding to the effects of all types of trauma in accordance with recognized principles of a trauma-informed approach and trauma-specific interventions to address trauma's consequences and facilitate healing.
- Qualitative maltreatment in care reviews will continue for a portion of unsubstantiated investigations of maltreatment in each region, as well as on all substantiated investigations by Child Protective Services (CPS) Programs and regional leadership. Results of data analysis will be compiled quarterly and communicated to the field. Qualitative reviews will occur in each region every quarter to support specialists in improving practices to better outcomes.
- Supervisors will utilize the three key strategies outlined in the Supervisory Framework to support staff in critical decision-making in order to understand and treat safety needs, decrease trauma, and strengthen parental protective capacities. Full implementation of the Supervisory Framework will occur by June 2020.
- Continuous Quality Improvement Program will partner with other CWS programs to compose combined reviews over statewide and regional practices impacting

quality safety decisions and positive safety outcomes. Information outlining areas of practice requiring focus, also referred to as regional practice summaries, will be provided to the region every six months so that regional leadership understands current barriers and practice areas needing improvement and can be intentional on the focus of improving outcomes in the areas identified.

- Increase the completion of Family Service Agreement (FSA) at the time a Safety Plan is completed ensuring that services are timely, flexible, coordinated, and accessible to families and are organized as a continuum, linked to a wide variety of supports in order to meet children and families' ongoing needs. Full implementation is in alignment with CFSR PIP action steps and will occur by June 2020. Ongoing evaluation of the quality and appropriateness of completed Family Service Agreements and Safety Plans will occur through the qualitative review process of CFSR's. Outcomes of the completed reviews will be added to the regional practice summaries presented by the Continuous Quality Improvement Program CFSR team.
- Enhance the family meeting continuum in each region to improve the assessment of child safety and increase family involvement early on and throughout the life of the case through child safety meetings (CSMs), Initial Meetings (IMs), and ongoing family meetings throughout the life of a case. Full implementation is in alignment with the CFSR PIP action steps and will occur by June 2020. Ongoing evaluation to occur through qualitative review process through CFSR's, CSM reviews, and ongoing placement stability reviews.
- Increase community collaborative with the Oklahoma State Department of Health (OSDH), Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS), and Court Improvement Project (CIP) utilizing mental health consultants as a liaison between local CWS district offices and community service providers to increase preventive and ongoing services to children and families. Implementation is in process as outlined through the CFSR PIP. Ongoing evaluation of community collaborative will occur annually during the five-year evaluation period.

Goal 2: Decrease trauma experienced by a child who enters the child welfare system by ensuring stability of placement, enhancing family engagement and decision-making, decrease maltreatment in care, and enhancing efforts to achieve timely permanency.

Impacts: Safety 1 and 2, Permanency 1 and 2, Well-being 1, 2, and 3 Items 1 through 18, 25 through 30, 35, 36, maltreatment in care, timely permanency, and placement stability

Measure	Baseline	Target by End of FFY 24
Two or fewer placement settings for children in care for less than 12 months	79.8% Data Source: AFCARS	88%
Two or fewer placement settings for children in care for 12 to 24 months	61% Data Source: AFCARS	68%
Two or fewer placement settings for children in care for 24+ months	33% Data Source: AFCARS	42%
Initial placement as kinship	47.2% Data Source: KIDS	55%
Reunification in less than 12 months	55.5% Data Source: AFCARS	69.9%
Guardianship in less than 18 months	59.8% Data Source: AFCARS	65%
Adoption in less than 24 months	45.9% Data Source: AFCARS	54.5%
Absence of maltreatment in care	99.08% Data Source: NCANDS and AFCARS	99.68%

Objectives

- Enhance focus on ensuring as many supports and connections are present during CSMs and IMs. Ensuring that not only are meetings scheduled within policy, but that they are of good quality. Full implementation is in alignment with the CFSR PIP action steps and will occur by June 2020. Ongoing evaluation to occur through qualitative review process through CFSR's, CSM reviews, and other qualitative reviews completed by CQI.
- Ensure resource parent check-in calls and Child and Resource Support Plans are completed and of good quality. Ongoing annual reviews will occur throughout the five-year evaluation period. Outcomes of reviews will be added to the regional practice summaries presented by the Continuous Quality Improvement Program CFSR team.
- Implement strategies of CWS resource recruitment and retention goals. Full implementation to occur by July 2020. Ongoing evaluation to occur annually throughout the five-year evaluation period.
- Continued focus on enhanced safety discussion and collaboration, and consistency of safety decisions made across all programs, including Foster Care

and Adoptions. All action steps are aligned with the CFSR PIP and will be implemented by June 2020.
    - Any practice guidance will be updated in the Child Welfare Safety Guidebook.
    - Updated CORE and Supervisory Academy training to reflect enhanced safety practices updated through the CFSR PIP.
- Supervisors will utilize the three key strategies outlined in the Supervisory Framework to support staff in critical decision-making. Full implementation of the Supervisory Framework will occur by June 2020.
- Monitor and enhance contracts of Systems of Care and mobile response to ensure that if a child in foster care is in crisis, appropriate services can be provided without disruption to the child's placement. Strategy is in alignment with the CFSR PIP and will be evaluated annually throughout the five-year evaluation period.
- Increase utilization of the Care Portal to access resources for resource homes in order to meet need and safety care for children in DHS custody. The number of needs met by use of the Care Portal will be monitored annually.
- Improve collaboration and communication with resource family partners (RFPs), contracted agencies, by including RFPs in ongoing child welfare training pertaining to safety, permanency, and well-being outcomes as well as including RFPs as key stakeholders to inform and support updates to safety related practices.
- Use of Child Behavioral Health Screeners for children in out-of-home placement to ensure that a child's educational, developmental, physical, and mental health needs are being assessed on an ongoing basis in the resource home and that referrals for services are sent timely. Implementation is ongoing. Evaluation will occur annually throughout the five-year evaluation period. Qualitative and Quantitative data will be presented annually to the regions.
- Focus Actively Seeking KINnections (ASK) efforts within each region to enhance strategies in building permanent connections and locating family for the child in DHS custody. Objective is aligned with the CFSR PIP. Full implementation will occur by June 2020 and the effectiveness will be evaluated annually by the amount of kinship placements used as first placement for a child.
- Develop parent stakeholder group to gather and apply feedback from parents and relatives in improving ASK efforts. A parent feedback group will be developed by June 2020. Objective is aligned with the CFSR PIP. Full implementation will occur by June 2020 and the information obtained from parent stakeholders will be used to guide strategies in building permanent connections and locating families for children in DHS custody.
- Use case reviews to develop qualitative assessments that analyze key indicators of maltreatment to present to staff on a quarterly basis, using current data to inform decisions on trends of practice that are identified within the reviews. Results of data analysis will be compiled quarterly and communicated to the field. Qualitative reviews will occur in each region every quarter to support CW specialists in improving practices to better outcomes.

- Enhance communication between programs who are involved with resource families in use of resource alerts, written plans of compliance, screen-out consultations, injury alerts, and ten-day staffings in order to prevent maltreatment in care. Ongoing evaluation through the five-year evaluation period will occur through qualitative reviews including CFSR's, maltreatment in care reviews, and any other type of review.
- Provide ongoing training for staff surrounding quality worker visits with children and parents and use of qualitative reviews to inform practice. Training is in alignment with the CFSR PIP. Ongoing training updates will occur by June 2020.
    - Update CORE and Supervisor Training to reflect practice changes surrounding quality worker visits.
    - Update Supervisor Training to ensure supervisors are able to utilize data and reports to assess outcomes of quality worker visit measurements.
- Make changes within the KIDS system to reflect expectations of parent visitation. Including updates with reports and tracking to ensure parents are being engaged often and consistently. Changes to the KIDS system is in alignment with the CFSR PIP. Changes will be fully implemented by March 2020.
- Use of Permanency Safety Consultations (PSCs) to assess for safety in a team approach at key junctures of the case and throughout the life of the case while the case plan goal is reunification. The PSC fidelity review tool will be utilized for transfer of learning and debriefing purposes during sessions that Continuous Quality Improvement Program support staff are present. Practice trends will be presented to regional leadership quarterly.
- Use qualitative reviews and ongoing training of outcomes of Initial Meetings and resource placement calls, shifting the focus from completion of the initiative to quality of work therefore improving outcomes. Ongoing evaluation to occur through qualitative review process through CFSR's and ongoing placement stability reviews quarterly to regional leadership throughout the five-year evaluation period.
- Continue ongoing collaboration with CIP to engage staff in barriers with the court and improve relationships with court partners in order to enhance capacity of quality representation by contract attorneys, increase timely permanency outcomes, and improve relationships between CW and the courts in order to better outcomes for families navigating the CW system. Ongoing partnership will occur with CIP throughout the five-year evaluation period.
    - All staff will participate in Court Expectations annual training as outlined in the CFSR PIP. Full training implementation will occur by March 2020.

Goal 3: Enhance capacity for children, families, and resource parents to receive adequate and timely needs assessments to ensure access to appropriate and evidence-based and/or evidence-informed services to achieve case plan goals.

Impacts: Safety 1 and 2, Permanency 1 and 2, Well-being 1, 2, and 3 Items 1 through 18, 29 through 32, maltreatment in care, timely permanency, and placement stability

Measure	Baseline	Target by End of FFY 24
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	21.54% Data Source: CFSR	95%
Percent of children receiving a Child Behavioral Health Screener in accordance with policy	66.7% Data Source: OU	98%
Improvement of children's social and emotional functioning as compared to their own baseline and throughout the duration of service provision	To be created	To be created
Percent of families who complete Family-Centered Services (FCS) and do not have a subsequent removal or unsafe finding within 12 months	95.08% Data Source: KIDS	97%
Percent of children needing an intervention and served in FCS	25% Data Source: KIDS	50%

Objectives

- Enhance family-centered practices by utilizing services that are focused on the family as a whole and are developmentally and/or culturally appropriate. Utilize service providers that will work with families as partners in identifying and meeting needs and strengthening families. Evaluation will occur through contract monitoring of the service providers by CWS Program staff in the form of monthly reports received by the contractors, quarterly site visits/contractor meetings, and annual contract renewal process.
- Evaluation of providers understanding of children, families, and resource parents needs and effectiveness of services provided through information gathered by community stakeholders during the annual stakeholder meetings in partnership with OSDH and CIP. Findings will be assessed to develop and identify solution-focused plans for increasing collaboration between CWS and providers to achieve better outcomes for children and families. Information will be distributed to executive and regional leadership and CW staff.
- Support and enhance a competent, skilled, and professional trauma-informed child welfare workforce to identify and meet the needs of children and families; determining the appropriateness of the services array and broader CW decision-making and case planning. Support will be provided during CFSR case review debriefings with leadership, supervisors, and specialists. Regional case review summaries, as well as other qualitative review summaries will be provided to the Executive Team and regional leadership that identify practice trends impacting quality outcomes.

- Utilize outcomes from CFSR reviews to inform and enhance the quality and timeliness of the Child Behavioral Health Screener to better serve the needs of children. Information will be shared through CFSR case debriefings and regional case review summaries.
- Effectively use IMs to support family involvement in assessing needs of the child and resource family by identifying and providing appropriate services to support placement stability. Ongoing evaluation through CFSR's and placement stability qualitative reviews will identify areas needing improvement to enhance the quality and effectiveness of IMs and Resource Parent Support Plans.
- Build community partnerships with the education system through school-based social workers to adequately identify appropriate prevention services for children and families in need. Ongoing collaboration and decision-making will occur during annual stakeholder meetings.
- Utilization of Early Periodic, Screening, Diagnosis, and Treatment (EPSDT) to identify and link through referral for necessary medical and behavioral health treatment. The EPSDT will support CWS in early identification of medical and behavioral interventions.
- Utilization of an evidence-based screener to determine appropriate treatment needs of children and families.

Services

Child and Family Services Continuum

A continuum of care and service array for children and families through a strengths and community-based framework to ensure connection to and utilization of formal and informal community-based resources available to promote strong Oklahoma families is a priority in the state of Oklahoma. To strengthen families and prevent child maltreatment and promote well-being, a continuum of care and services must encompass a protective factors approach. Protective factors are conditions or attributes of individuals, families, communities, or the larger society that reduce or eliminate risk and promote healthy development and well-being of children and families. These factors help ensure that children and youth function well in society. Protective factors also can serve as safeguards, helping children who might otherwise be at risk of abuse or neglect, to find resources and supports for the caregiver. The caregiver protective capacities are specific, individual attributes that are directly related to child safety, and are utilized by Child Welfare Services (CWS) to assess child safety and risk. Research has found that successful interventions must both reduce risk factors and promote protective factors to ensure child and family well-being. CWS can best ensure child safety and promote child and family well-being by promoting both caregiver protective capacities and protective factors. CWS, as a partner with other state child-serving agencies, such as the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) and the Oklahoma State Department of Health (OSDH), and community stakeholders, is committed to ensuring the creation and efficient operation of a unified and integrated continuum of care for all Oklahoma's children and families.

Service Coordination

There are multiple DHS programs that provide services for the same population served by CWS. Strategic planning occurs at all agency levels to promote safety, permanency, and well-being for Oklahoma children and families. The DHS strategic plan is to strengthen Oklahoma individuals, workforce, communities, and practices. Title IV-A (TANF) funding is utilized to specifically support CWS programs within each component of the service continuum. Other programs delivered by DHS that support families served by CWS include:

- Adult and Family Services (AFS) provides public assistance services, including Medicaid, SNAP, and TANF programs statewide with offices in every county. AFS administers Health Related Medical Services (HRMS), such as SoonerCare, short-term (Aid to Families with Dependent Children and Aged, Blind, Disabled-related), Long-Term Care, such as Nursing Home, ADvantage, and Personal Care, Supplemental Security Income – Disabled Children's Program (SSI-DCP), Tax Equity and Fiscal Responsibility Act (TEFRA), as well as the State Supplemental Payment. Low Income Home Energy Assistance Program (LIHEAP) includes the Winter Heating program every December; the Energy Crisis Assistance Program (ECAP) every March; and the Summer Cooling program every July. Child Care Subsidy staff supports the administration of the

Child Care Subsidy Program. This includes development of policy and guidelines for eligibility and training on policy and procedures. Staff also manages Child Care provider contracts and provides training materials to child care providers. AFS operations staff oversees and takes a lead role in various special projects and programs that have included Community Collaborative projects and tribal TANF liaisons.

- Child Support Services (CSS) acts as an economic advocate for the children of Oklahoma, ensuring parents financially support their children. CSS helps families become self-sufficient, and for those who are not receiving public assistance to remain self-sufficient.
- Child Care Services (CCS) is responsible for ensuring children and parents have access to licensed, affordable, high-quality child care where children have the opportunity to develop to their fullest potential in a safe, healthy, and nurturing environment.

Although DHS is the designated state agency who administers the Title IV-B, subpart 1 and 2, and Title IV-E of the Social Security Act and oversees the state's CFSP, collaboration occurs with other state agencies and stakeholders to strengthen the states' overall child welfare system, comprehensively integrating the full array of child welfare services, from prevention and protection, to treatment services and foster care, and through permanency. The care and service array for children and families is linked to, coordinated with, and integrated into a continuum through The Partnership.

The Partnership was formed by a Memorandum of Agreement in 2004, by the eight state child-serving agency commissioners and directors, and the directors of the Oklahoma Family Network and the National Alliance on Mental Illness (NAMI) Oklahoma to ensure the creation and efficient operation of a unified and integrated system of care for all Oklahoma's children and families. The Partnership is posed to ensure a continuum of care and service array for children and families is integrated system-wide and provides a mechanism for cross-system collaboration. Members of this ongoing committee includes DHS and the following:

- ODMHSAS
    - Single state authority responsible for publicly-funded substance abuse and mental health prevention and treatment services.
- Oklahoma Health Care Authority (OHCA)
    - State Medicaid authority responsible for administering Medicaid and public mental health services (jointly with ODMHSAS).
- OSDH
    - Primary public health protection agency.
- Oklahoma Office of Juvenile Affairs (OJA)
    - Single state authority responsible for the management of juvenile affairs.
- Oklahoma Department of Rehabilitative Services (DRS)
    - State agency responsible for providing people with physical, mental, and visual disabilities with the opportunity to obtain employment and independent living through counseling, job training, and other individualized services.

- Oklahoma State Department of Education (OSDE)
    - State agency responsible for policies and administration and supervision of the public school system of Oklahoma.
- Oklahoma Commission on Children and Youth (OCCY)
    - Responsible for developing and approving the State Plans for Services to Children and Youth and the Office of Child Abuse Prevention State Plan; and
    - Meet to consider proposals, approve budgets, hear staff reports, make appointments to councils and committees, and submit recommendations to the Governor, Legislature, Supreme Court, and agencies responsible for developing or improving services to the children and youth of Oklahoma.
- Oklahoma Family Network (OFN)
    - A statewide, non-profit agency that supports Oklahoma families with critically ill infants or children with special health care needs or disabilities.
- NAMI Oklahoma
    - A statewide, advocacy group, representing families and people affected by mental health disorders.

The Children's State Advisory Workgroup (CSAW) serves as the working group of the Partnership and is composed of appointed members by each state child-serving agency. CSAW convenes the State Advisory Team (SAT), which makes up a larger, more diverse group of stakeholders, including youth and family members, who give additional guidance and advise to The Partnership. The SAT meets monthly and The Partnership meets one-to-two times yearly to receive reports from CSAW and provides approval for actions and initiatives. The Partnership provides Oklahoma a broad array of change agents that are involved in decision-making and engaging state leadership to ensure service coordination for children and families.

Children's Bureau Grant Programs

DHS, in partnership with the agencies and stakeholders involved with the following grant programs, utilize these programs and funds to prevent child abuse and neglect, protect children and improve the safety, permanency, and well-being of children and families involved in the child welfare system.

The OSDH Office of Child Abuse Prevention (OCAP) was created out of the Oklahoma Child Abuse Prevention Act and is the designated lead agency of the **Community-Based Child Abuse Prevention (CBCAP)** established out of the Child Abuse Prevention and Treatment Act (CAPTA). OSDH is responsible for crafting the Oklahoma State Plan for the Prevention of Child Abuse and Neglect as well as administering the CBCAP funds and providing oversight to funded programs that are provided through Oklahoma's public health system. Oklahoma utilizes their CBCAP dollars to support evidence-based programs and innovative programs for specific target populations as well as for critical infrastructure for the home-visitation network in the state. The majority of state-funded prevention activities are provided on a statewide basis, others are county specific. The Child Abuse Prevention Network conducts a

myriad of public awareness and prevention activities. A full description of the activities and services is found in the attached ***2018 Community-Based Child Abuse Prevention Grant Program Report***, combined with the ***2019 Community-Based Child Abuse Prevention Grant Application***. The ***Oklahoma State Plan for the Prevention of Child Abuse and Neglect 2019-2023*** is also attached.

The **Children's Justice Act (CJA)** grants to States falls within the CAPTA. This grant program authorizes the annual award of funds to states that submit a plan and maintain a multidisciplinary task force on children's justice for programs that improve the investigation and prosecution of cases of child abuse and neglect. CJA funds are administered and monitored by DHS, coordinated through the Oklahoma Task Force on Child Abuse and Neglect and outlined in the 2018-2021 three-year plan. Trainings and activities supported by the CJA funds assist the state by addressing safety outcomes outlined in the CFSP. Trainings are geared toward improving child welfare investigations and child abuse prosecution concentrating on topic areas of domestic violence, human trafficking, and engaging children and parents who may be developmentally delayed; and as such, help ensure children are first and foremost, protected from abuse and neglect. The Oklahoma Advisory Task Force Board, established in 1990, is a multidisciplinary team of individuals from across the State of Oklahoma who are committed to reviewing current practices in the child protection system and funding programs designed to impact change and to make training and policy recommendations in each of three categories: investigative, administrative, and judicial handling of cases of child abuse and neglect. The Task Force aligns their planning of CJA activities with the vision and goals of the CFSP. The Task Force has identified various areas of concentration as seen in the attached ***Children's Justice Act Three-Year Plan***.

The State **Court Improvement Project (CIP)** provides Federal funds through three grant opportunities to State courts to improve court efficiency and the quality of legal representation in achieving stable, permanent homes for children in foster care; a basic grant for assessment work; a grant for data collection and analysis; and a grant to increase training of court personnel, including cross training with agency staff. The program provides State courts flexibility to design assessments that identify barriers to timely and effective decision-making, highlight practices which are not fully successful, examine areas they find to be in need of correction or added attention, and implement reforms, which address the State courts specific needs. State courts are required to collaborate with the State child welfare agency and tribes in this work, which is operationalized through a multidisciplinary task force. This collaboration is detailed in both the Assessment of Current Performance in Improving Outcomes and the Plan for Enacting the State's Vision sections of this CFSP. The Oklahoma CIP mission is to provide safety, permanency, and well-being outcomes for Oklahoma's deprived children through efficient court practices and computer technology. Oklahoma's CIP goals are to:

- to help child welfare systems address the CFSR outcomes of safety, permanency, and well-being;

- to produce better outcomes for children and families that are tangible, measureable, and time specific; and
- to allow courts to address fundamental problems by improving legal and judicial training and developing and improving court data systems.

Service Description

CWS cannot do this work alone and rely on the support of our partners, external stakeholders, and community providers to achieve our vision and the goals. CWS remains committed to engaging community partners, other state agencies, the private sector, and tribes in supporting children and families in order to identify system gaps and barriers and assessing service needs for the children and families.

An assessment of the strengths and gaps in service, including mismatches between available services and family needs as identified through available data, including the Child and Family Services Review results and the consultation process are found in other sections of this CFSP.

The percentages of funds the state will expend on actual service delivery of family preservation, community-based family support, time-limited family reunification, adoption promotion and support services, and on planning and service coordination will be at equitably distributed with none receiving less than 20 percent, as detailed in CFS-101 Part II.

Stephanie Tubbs Jones CWS Program (Title IV-B, subpart 1)

The Stephanie Tubbs Jones Child Welfare Services Program provides funds for Oklahoma CWS programs directed toward the goal of keeping families together. They include preventive intervention so that, when possible, children will not have to be removed from their homes. When this is not possible, children are placed in foster care and reunification services are available to encourage the return of children who were removed from their families. CWS utilizes these funds to provide the following services:

Child Protective Services (CPS) - a child welfare service provision that focuses on preventing, identifying, and treating child abuse and neglect to ensure child safety. Efforts are made to maintain and protect the child in his or her own home when safety threats can be managed and controlled. The primary purpose of CPS intervention is to protect the child, assess family strengths and needs, and provide services to remedy the conditions and behaviors that created threats of abuse or neglect. When a safety threat is identified and there is no person responsible for the child (PRFC) with the capacities to protect the child, the child welfare specialist may open a Family-Centered Services (FCS) case when safety planning can prevent removal, or a Permanency Planning (PP) case when court involvement is required to ensure the child's safety.

Foster Care Maintenance - foster family care is a planned, goal-directed service that provides full-time substitute care and supportive services to children in an approved

foster family home pending realization of permanence. Foster family care is considered the least-restrictive setting outside of the child's own home, a kinship home, or the home of tribally-defined extended family members. Foster care maintenance payments cover the cost of food, clothing, medical care, shelter, daily supervision, school supplies, a child's personal incidentals, liability insurance with respect to a child, reasonable travel to the child's home for visitation, and reasonable travel for the child to remain in the school in which the child is enrolled at the time of placement. In the case of institutional care, foster care maintenance payments include the reasonable costs of administration and operation of such institution.

Adoption Subsidy – adoption subsidy is assistance that helps to secure and support safe and permanent adoptive families for children with special needs. Adoption assistance is designed to provide adoptive families of any economic stratum with needed social services, and medical and financial support to care for children considered difficult to place. Federal and state law provides for adoption-assistance benefits including Medicaid coverage, a monthly adoption-assistance payment, special services, and reimbursement of non-recurring adoption expenses.

Services for Children Adopted from Other Countries

Collaboration to support families who adopted children from other countries was formed with the Oklahoma State Department of Health and a variety of other adoption related programs and adoptive families. CWS continues to strive to seek additional partnerships with the Oklahoma State Department of Education and other entities that have knowledge and expertise of children's trauma from other countries. Some of the services provided include information and referral, educational advocacy, a parent support network, mobile response intervention, respite funds based on the family's circumstances upon funding availability and case management. CWS offers information and referral services to help connect adoptive parents, no matter the type of adoption.

Pursuant to the Fostering Connections to Success and Increasing Adoptions Act of 2008, children who have special needs, but who are not citizens or residents of the United States, and were either adopted in another country or brought to the United States for the purposes of adoption, are categorically ineligible for adoption assistance, except when the child meets the eligibility criteria after the dissolution of the international adoption.

Services for Children Under the Age of Five

CWS through the Practice Model, and the strategies outlined in the Child and Family Services Plan Program Improvement Plan (CFSR PIP), plans to utilize the following to expedite reunification and reduce the length of time young children are in foster care without permanency:

Permanency Safety Consultations (PSCs) - the PSC process enhances the quality and effectiveness of evaluating safety concerns to achieve timely permanency. PSCs are essentially structured case conferences scheduled to occur at regular intervals, and

designed to assess through a team approach the viability of a child's safe reunification with his or her family. At the conclusion of each PSC, a determination is made to indicate if a pathway for safe reunification can be identified, and when reunification is determined to be possible, a plan of action is developed to move the child back home with his or her family timely. The PSC practice is resulting in the development of stronger caseworker assessment and recommendation skills, which help courts determine when to order trial or final reunification.

Family Engagement and Quality Parent-Child Visits - CWS has developed and will continue to utilize a practice guide to help staff prepare for and conduct quality visits with birth families and support birth parents to remain engaged in their child's life and case planning while they are in DHS custody. Initial Meetings are another practice strategy to engage and support resource parents and birth parents to best meet the child's needs as they bridge toward safe and timely reunification.

Collaboration with the Courts through the Court Improvement Project (CIP) - CWS will continue to work with judges through the CIP to strength relations and establish a shared understanding of safety threshold for determining when reunification remains viable and is appropriate.

Activities to address the developmental needs of all vulnerable children under five years of age can be found in other sections of this CFSP.

Efforts to Track and Prevent Child Maltreatment Deaths

Preventing child maltreatment fatalities includes addressing the underlying issues including: substance abuse, behavioral health, domestic violence, family instability, poverty, infant mental health, lack of parental support, and access to resources. The prevention of child maltreatment fatalities requires a public health framework with both public and private sector partners engaged and working at both state and local levels toward positive partnerships impacting advocacy, community awareness, and systemic change. DHS will partner with public health agencies, law enforcement, child maltreatment physicians, and the courts in effort to prevent and track child maltreatment fatalities. DHS is a member of the Oklahoma Child Death Review Board and reviews their annual report to identify trends in child deaths or near deaths. CWS uses this data to evaluate and support changes to CWS policy, practice, or training as needed. CWS will review child fatality and near fatality cases and make recommendations to promote child safety, including recommendations to state leaders and areas for enhancement within CWS policy. CWS will provide data and trends analysis to internal and external partners to support child safety through the addendum, "Child Deaths and Near Deaths" of the annual State Fiscal Year, "Child Abuse and Neglect Statistics" report. CWS will evaluate previous statewide campaigns and expand those targeted toward infant mental health, supervision, parent support, and resources available during stressful circumstances.

Promoting Safe and Stable Families

Promoting Safe and Stable Families (PSSF) is an important funding stream for Oklahoma child welfare and provides Oklahoma with the ability to better collaborate and work with tribes, find and work with families of children that have been removed from their home, and support local services and placements to keep children close to their homes of origin, which can lead to more effective and timely reunifications. Oklahoma uses PSSF to facilitate pilot projects that help decrease the time to reunification and provide funding to overcome any barriers obstacles to reunification or to prevent families from court involvement.

Oklahoma's total PSSF grant is $3,978,177 of which Family Preservation Services account for $854,896 (21%), Family Support accounts for $893,117 (22%), Family Reunification Services account for $902,212 (23%), and Adoption Promotion and Support accounts for $930,134 (23%) of the grant amount.

Service Decision-Making Process for Family Support Services

In preparation for CFSP planning, DHS defined the state's major components of its service continuum. Direct services are performed by a combination of both state agencies and community-based contract provider agencies. Contracts for federal, state, and DHS funds are awarded by the Oklahoma Office of Management and Enterprise Services and are based on a fixed-rate or competitive bidding process in accordance with state law. Bids are generally awarded based on best value for DHS, proven records of providing quality services, and aligned with community needs. Each request for proposal specifies the communities and/or population targeted for services, emphasizes the use of and collaboration with community services whenever possible, and includes outcomes and/or deliverables specific to the community and/or population's identified needs.

Populations at Greatest Risk of Maltreatment

The National Child Abuse & Neglect Data System (NCANDS), the Adoption & Foster Care Analysis and Reporting System (AFCARS), and the Chapin Hall Multi-State Foster Care Data Archive are routinely utilized to identify populations at greatest risk of maltreatment in Oklahoma. The section below provides current data and trends related to children under five years of age who, by virtue of age, are identified specifically in policy and protocols to be considered "vulnerable."

This age group accounts for 57.8 percent of the children who entered care in the FFY 18. Additionally, 88 percent of the cases in which abuse or neglect was substantiated occurred in the 12 years of age and under category. As reflected in both quantitative and qualitative data substance abuse and domestic violence have a high rate of occurrence in substantiated reports of child abuse and neglect. According to NCANDS data for SFY 18, 54.8 percent presented with substance abuse as a contributing factor and 31.5 percent with domestic violence.

Oklahoma House Bill (H.B.) 3104, passed in 2018, amended statute Section 1-1-105 of Title 10A of the Oklahoma Statutes (10A O.S. § 1-1-105) by updating the definition of "Drug Endangered Child" and included a definition of "Plan of Safe Care". 10A O.S. § 1-2-101 was amended regarding reporting requirements for children who test positive for alcohol or a controlled dangerous substance or have a diagnosis of Fetal Alcohol Spectrum Disorder (FASD) or Neonatal Abstinence Syndrome (NAS). 10A O.S. § 1-2-102 was amended to provide statutory direction to DHS regarding infants diagnosed with FASD or NAS, but are not identified as being at risk of abuse or neglect.

Oklahoma H.B. 2610, passed in April 2019, directs the Bureau of Vital Statistics to notify the Oklahoma Commission on Children and Youth (OCCY) of any child death. The Commission then submits the information for a child maltreatment medical review to a child abuse examiner or a child abuse pediatrician. The findings of the child maltreatment review are forwarded to OCCY, DHS, law enforcement, and the child advocacy center or child abuse multidisciplinary team where the suspected maltreatment occurred, and to the Child Death Review Board. The findings of the child maltreatment medical review are considered prior to the closing a child death investigation conducted by DHS.

Oklahoma H.B. 1075, passed in April 2019, added a new section of law, 10A O.S. § 1-4-28 requiring every child taken into DHS custody to be given a standardized assessment within 21-calendar days of entering custody, unless otherwise prescribed by the assessment. The assessment evaluates the child's physical, developmental, medical, mental health, and educational needs and is considered when developing placement and services plans for the child. The assessment is updated at regular intervals while the child is in DHS custody to ensure the child's needs are being addressed.

Senate Bill (S.B.) 833, passed in April 2019, directs DHS to provide OSDH access to the identifying information of all individuals who have had their parental rights terminated and the conditions which led to the termination. The Division of Vital Records then provides birth information to the Office of Child Abuse Prevention for a child born to an individual with a previous termination of parental rights. The Office of Child Abuse Prevention, when appropriate, provides an assessment of the family and offers services when needed.

Over the next five years, the further development of policy, practice, collaboration, and response affected by these laws will be highlighted as DHS and other state agencies, state and local governments, community partners, and the Oklahoma citizens work together to protect the population of children at highest risk of maltreatment.

Monthly Caseworker Visit Formula Grants

Quality monthly visits are a priority for CWS and this commitment is seen in the consistent performance in exceeding the target outcome of 95 percent of the total visits to children in foster care made monthly. Quality visits are fundamental to achieve stable

placements and timely permanency for children, provide opportunities to assess and address children's safety and well-being, and support foster parents in their care of foster children. Additionally, CWS, through the Pinnacle Plan, made a commitment to substantially shift case practice by prioritizing the importance of having the same, primary caseworker meet with the same child each month. This supports better outcomes for children through consistent case planning by the same caseworker to secure a child's placement stability, safety, and permanency. The CFSR PIP, has led to continued enhancement to quality caseworker visits with children through strategies to enhance policy and staff guidance; revision of training to promote behaviors and competencies needed to ensure the safety, permanency, and well-being of children; and the streamlining and alignment of practice documents and supporting tools to ensure clear and consistent messaging about practice expectations. Refer to pages 32-34 for more information regarding Oklahoma's standards for the content and frequency of caseworker visits for children who are in foster care.

Monthly caseworker visit grant funds are being utilized to fund the cost of smart phones for child welfare specialists. This allows child welfare specialists to access the web, email, and other online resources needed to meet the increasing demands of child welfare work. In addition, the technology provides child welfare staff better access to their supervisors while allowing them to meet the critical demand of spending more time in the field. The smart phones also contain high-quality cameras that assist staff with more accurate documentation, resulting in more effective supervisor consultation.

Child Welfare Demonstration Activities

Oklahoma's Title IV-E Waiver Demonstration Project was applied for to address the large increase in the overall number of children in care. While CWS has serviced children in the home, since 2009, utilizing the evidence-based SafeCare model through Comprehensive Home Based Services (CHBS), it is only appropriate for families where children are at moderate risk of removal. The DHS Waiver demonstration project targets those families where the removal risk is higher and therefore not appropriate for CHBS. The flexible use of Title IV-E funds permits DHS to shift funding to services, which safely prevent removals, allowing more children to remain in the home. This demonstration project utilized the provision of Intensive Safety Services (ISS), for those higher risk cases, to help address the increase of children in care.

ISS consists of a master's level provider delivering intensive home based services three-to-five times per week for four-to-six weeks. The services provided by the ISS worker are based on individual family needs and include, but are not limited to: Motivational Interviewing (MI); Cognitive Behavioral Therapy (CBT); and Healthy Relationships. Additionally, the ISS worker connects the family to appropriate community resources and assists the family in overcoming barriers to accessing these resources, including addressing concrete needs. At the appropriate time, again based on family needs, CHBS is provided to the family and overlaps with ISS, facilitating the step down so there is continuity of care. Although the CHBS worker is generally only in the home once a week, CHBS services can be in the home for up to six months. CWS

contracted for ISS and cases are assigned to FCS. The service array available through ISS provides the FCS specialist with an option for working with families whose children are at higher risk of removal and allows the child to remain safely in the home, whenever it is safe to do so.

In planning for continuation of ISS post completion of the Title IV-E waiver, CWS' Core Waiver Team will continue to discuss the level of service, geographic area, and fiscal feasibility by which Oklahoma can continue ISS. The Core Waiver Team is in the process of analyzing the cost of ISS compared to pre-Waiver services as usual to determine the continuation of ISS and what areas of the state it is feasible. These recommendations will be taken to the DHS Executive Team for review. DHS has continued to complete Title IV-E claiming on all cases and therefore can revert to pre-Waiver services as usual claiming quickly. DHS continues to review the Family First Prevention Services Act and the implications it will have on ISS and other prevention services from a programmatic and fiscal perspective.

Adoption and Legal Guardianship Incentive Payments

Oklahoma received $5,859,000 in adoption incentive payments for FY 2018. This funding was used within the 36-month expenditure period to fund additional adoption staff to continue the recruitment and licensure of homes adopting children from the Oklahoma foster care system.

Adoption Savings

Oklahoma has been calculating adoption assistance saving according to the Children's Bureau (CB) Method with Actual Amounts since Federal Fiscal Year (FFY) 2015 and plans to continue this same method. The adoption savings is a calculation of the state dollars saved by the implementation of Section 473(a)(8) of the Social Security Act by applying the "Applicable Child" criteria to adopted children that did not meet the traditional eligibility factors of Title IV-E. This was also referred to as "AFDC delinking" and expands Title IV-E eligibility to children that would have otherwise been funded with state dollars, hence the "Adoption Savings." These saved funds must be spent on Title IV-B and Title IV-E activities with 30 percent on post-adoption and post-guardianship services. Positive permanent outcomes for children at-risk of entering foster can substitute for up to 10 percent.

Since 2010, when the applicable child criterion was first implemented, Oklahoma has seen a significant growth in its adoptions and subsequent post-adoption services budget. In the past four years, Oklahoma has almost doubled the number of adoptions completed each year to an average of 2,287 adoptions. This marks significant efforts and progress of obtaining permanency for children that could not return home. The expenditures have also grown from $46 million to over $130 million in this same time period. These were also years that DHS was facing its most difficult budget years on the heels of committing to increasing the rates for foster care and adoptions, which was long overdue. Adoption savings has been instrumental in Oklahoma's ability to increase

the post-adoption budget by 185 percent since its inception and will continue to play a valuable role in funding permanency for children in Oklahoma over the next five years.

Since FFY 2015 when the CB methodologies where put into place, Oklahoma has saved over $19 million and as of September 2018, had over 1,800 children eligible to receive Title IV-E adoption assistance because of the applicable child criteria. So far, Oklahoma has reported spending $6.7 million of the savings with another estimated $5 million to be reported this upcoming October for a total of $11.7 million in spending. The remaining $7.3 million is budgeted for the upcoming fiscal year. There is a lag in spending savings because of the timing of identifying the expenditure on the federal fiscal year and the budgeting cycle of the state fiscal year. The savings are calculated for the federal fiscal year that ends on September 30th of each year, the funds are then budgeted during the next state fiscal year which begins on July 1st of each year.

Consultation and Coordination between States and Tribes

The primary method of face-to-face consultation and coordination between tribes and the state continues to occur through the Tribal/State Workgroup (TSW). The TSW began in 2008, meets quarterly, and has been enhanced through the Oklahoma Indian Child Welfare Act (ICWA) Partnership. This partnership agreement was formalized in a Memorandum of Understanding between the Oklahoma Department of Human Services (DHS) and the Oklahoma Indian Child Welfare Association (OICWA). The TSW serves as the "working space" of the ICWA Partnership. All Indian child welfare (ICW) directors and key DHS field and program leadership are invited to attend the quarterly meetings and engage in conversation and planning around ICWA practice improvements.

The ICWA Partnership, comprised of DHS, OICWA, and the Court Improvement Project (CIP), was developed in 2016, as the evolution of previous partnerships, and committed to working together to strengthen ICWA practice, with a shared, stated goal to "improve safety, permanency, and well-being of American Indian children and families through improved communication, training, and accountability of child welfare and court systems as it applies to ICWA". Specific objectives include: (1) building or enhancing relationships between state child welfare, court, and tribal systems; (2) building or enhancing ICWA compliance with clearly defined policies and procedures within state, court, and tribal systems; and (3) building or enhancing current management information systems resulting in more timely and effective communication among tribes, state governments, and courts. In October 2016, the partnership was one of three states awarded a five-year, federal ICWA Partnership grant to improve ICWA practice. Not only was Oklahoma one of only three awardees, it was the largest, and was the only one whose primary state partner was the child welfare agency. This demonstrates the commitment Oklahoma's DHS and Child Welfare Services (CWS) has to partnering effectively with tribes.

Work of the partnership is being built around a collaborative model that includes group agreement to take action to improve outcomes, gathering consensus about priority needs and actions that should be taken, identifying needed technical expertise and resources, developing local "demonstration" or "innovation" projects to improve ICWA practice and evaluating those projects, and adjusting and disseminating success. The ICWA Partnership is utilizing a shared governance model to build a continuous quality improvement process to improve ICWA practice, with local projects feeding information to a statewide TSW that can recommend dissemination or other statewide steps.

Face-to-face key informant interviews were conducted with every ICW director of the state's 38 federally-recognized tribes between November 2017 and March 2019, see attached ***Tribal Representatives*** list. The ICW directors helped identify challenges, strengths, ideas and actions for change, technical expertise and resources, and community partners. This information was used in informing the development of the CFSP and goals for the next five years. Broad themes were identified and include:

- Collaboration;

- Communication;
- Community;
- Courts;
- Human Resources;
- Leadership;
- Policy/practice/processes;
- Respect/relationship/attitudes;
- Services/financial resources;
- Support services;
- Training; and
- Tribal culture/sovereignty.

It is expected that demonstration projects will address several of these themes. In keeping with the model of collaboration, areas of practice selected are and will be based on consensus by the partnership. It is expected that demonstration projects will address one or more of these themes. And, while each project will have its own evaluation, the TSW created a Research and Evaluation subcommittee that will assist with the development and oversight of evaluation, monitor ICWA data, and provide feedback to the TSW on practice improvements.

Training was identified as a strategy to help in improving ICWA practice. The enhancement and expansion of the annual OICWA conference provides an opportunity to implement this strategy. OICWA is expanding their website, which will provide a platform for information useful to tribes, DHS, courts, and other stakeholders. OICWA entered into a contract with DHS to receive funding to support these efforts. Funding from this contract also includes staff support for OICWA, which helps them in accomplishing these activities. A training inventory is also being established as a partnership effort that will help to identify current available ICWA trainings, as well as gaps in training. This will help in knowing what ICWA related trainings may need to be developed, who should develop the training, and work toward tying outcomes to practice improvement.

In support of the goals expressed through the ICWA Partnership, DHS/CWS staff have identified the following areas of focus for the 2020-2024 CFSP:

- increase the percentage of Indian children placed in ICWA compliant homes. Presently, only 35 percent of DHS custody children identified as Native American are placed in a home identified as ICWA compliant or having Native American heritage;
- timely identification of Native American heritage;
- early and timely notification of tribes;
- recruitment of tribally-approved homes;
- improve identification within the CW system of ICWA-compliant CWS homes;
- continued collaboration efforts throughout the life of the case to identify and approve relative/kinship placements, and improved coordination between the

CWS Tribal Coordinator Unit and CWS Foster Care and Adoptions to secure ICWA compliant placements;

- integrate the Family First Prevention Services Act (FFPSA) into Tribal/State contract agreements for foster care. This will include coordination between CWS and tribes to incorporate Title IV-E foster care payment standards; payments to parents in residential treatment with children in custody; and inclusion of FFPSA services available to children, parents, foster and adoptive homes. Tribes and CWS will work together around FFPSA planning and implementation, through the TSW;
- enhancing the training opportunities around ICWA by making them available to every single county office. In addition to the initial and supervisor training that is currently in place, enhancements, such as understanding sovereignty, working with out of state tribes, and implicit bias will be added, as feedback from tribes indicates these are topics that need strengthening. This work will be conducted in conjunction with the development of the training inventory;
- increase accuracy of data input to the KIDS system through monitoring and review of the ICWA dashboard and reports, including AFCARS, maltreatment in care, foster home referrals, child tribal information, placement information (ICWA compliance) and other measurable data. This data is provided to tribes on a regular basis, as well as utilized internally; and
- continued improvements by the CWS Tribal IV-E Unit to improve the eligibility rate through ongoing training and partnership with Tribal courts to obtain court orders, and continued support of tribes around tribal foster homes and Title IV-E.

CWS has responsibility to provide child welfare services for the protection of tribal children as detailed in DHS policy, Subchapter 19: Working with Indian Children and the Tribal State Agreement. Annually, DHS Legal Services and/or DHS Tribal Programs offer meetings to tribes to discuss any revisions or updates to the agreements. The Tribal State Agreements address service areas provided through DHS to individual tribes. Service areas include: case reviews on tribal children in DHS custody; notification to tribes of abuse/neglect referrals and investigations; removal of Indian children by DHS; payment to tribal foster homes for tribal custody children in care; difficulty of care payment for tribal children in custody; foster care payments for voluntary placement of Indian children; Title IV-E subsidized guardianship; adoption subsidies for Indian children in DHS or tribal custody; residential care for tribal custody children; kinship start-up stipends for tribal custody children; and Successful Adulthood services for tribal custody children through the John H. Chafee Foster Care Program for Successful Transition to Adulthood. Additionally, tribal child welfare staff and tribal foster homes are offered training through DHS. Tribes are provided e-KIDS access through the Tribal/State agreements to view and update certain case elements. Tribes are also provided access to Interstate Compact on the Placement of Children services through the state.

Copies of the 2020-2024 CFSP and subsequent APSR's will be shared with Tribes electronically and through the Tribal/State Workgroup and Title IV-B meetings.

John H. Chafee Foster Care Program for Successful Transition to Adulthood (The Chafee Program)

Agency Administering Chafee

Oklahoma Department of Human Services (DHS) is responsible for both administering and supervising the state's Independent Living (IL) Program, Oklahoma Successful Adulthood (OKSA), as described in the Chafee Program, the Education and Training Voucher (ETV) Program, and in Section 477 of the Social Security Act to youth in the custody and care of DHS and tribal youth in the care and custody of federally-recognized tribes. The authority for DHS to administer children and family services, such as IL, is based on Section 176 of Title 56 of the Oklahoma Statutes (56 O.S. 21 O.S. § 176) to provide "for the protection and care of homeless, dependent and neglected children, and children in danger of becoming delinquent" and 10A O.S. § 1-7-103. DHS is appropriated state funds based on annual budget requests to the Oklahoma legislature along with matching federal funds. The Governor of Oklahoma serves as oversight. DHS is committed to efforts towards achieving positive outcomes for youth in its custody. DHS participates in the National Youth in Transition Database (NYTD) survey process to track outcomes and determine the program's effectiveness in achieving the Chafee Program's purposes.

Program Design and Delivery

2020-2024 five-year plan recommendations:

The OKSA program emphasizes the importance of early planning for a successful transition to adulthood and promotes the importance of permanent connections by encouraging a multi-disciplinary approach using culturally-relevant and age-appropriate resources and services. Over the next five years the OKSA program will continue to collaborate with other State agencies and community providers to supply and support resources and services focusing on assessment and transition planning; permanency for older youth; cultural and personal identity formation; education; employment; housing; and strengthening the alumni network-Oklahoma Foster Youth Advocates (OKFYA).

Assessment and Transition Planning

Goal: Create an evidence-informed tool to assess youth.

- Objective 1.1: Partner with the Hope Research Center (University of Oklahoma School of Social Work) to begin to develop the contract and begin work on the assessment tool.
    - Strategy 1.1.a: Schedule initial meetings with the Hope Research Center.
    - Strategy 1.1.b: Negotiate and finalize contract.
    - Strategy 1.1.c: Hold bi-weekly teleconferences to set priorities and time frames.
- Objective 1.2: Collect data to inform the assessment tool through a baseline survey of youth, child welfare staff, and focus groups of former foster youth.
    - Strategy 1.2.a: Administer the Hope scale to:
        - Child welfare staff in first year training; and

        - Child welfare staff designated as OKSA county coordinators during Fall annual meeting.
    - Strategy 1.2.b: Administer the scale to current youth through the mail.
    - Strategy 1.2.c: Administer the scale to focus groups of former foster youth organized through the OKFYA board.
- Objective 1.3: Provide training to lay the foundation for a process of working with youth based on the Hope model.
    - Strategy 1.3.a: Hope Research Center director will provide Training of Trainers on the model to all OKSA staff.
    - Strategy 1.3.b: Integrate model training into Level I OKSA training, informed by baseline survey results.
- Objective 1.4: Create and finalize assessment tool.
    - Strategy 1.4.a: Create a draft assessment tool.
    - Strategy 1.4.b: Gather input on the draft tool from:
        - All OKSA staff at an all staff retreat;
        - All county coordinators at annual meeting; and
        - A focus group of OKFYA members.
    - Strategy 1.4.c: Partner with the Hope Research Center to evaluate the tool.
    - Strategy 1.4.d: Create a finalized assessment tool.

Permanency for Older Youth

Goal: A significant number of young people will leave care with supportive, healthy, permanent connections.

- Objective 1.1: Increase the percentage of youth who achieve legal permanency.
    - Strategy 1.1.a: Increase accessibility to pre- and post-adoption resources.
    - Strategy 1.1.b: Explore changes to State legislation to include Chafee services for youth who are reunified.
    - Strategy 1.1.c: Support recruitment and retention to increase placement options affirming of teens and their needs.
    - Strategy 1.1.d: Support child welfare field staff through educational resources and trainings surrounding the importance of legal permanency for teens.
- Objective 1.2: Increase the number of support and resource opportunities for youth who achieve relational permanency.
    - Strategy 1.2.a: Explore the potential creation of a resource guide to connect young people with community partners and organizations surrounding the interest and needs of the young person and create opportunities for community engagement.
    - Strategy 1.2.b: Increase opportunities for young people to support one another through peer-to-peer support groups and/or events.
    - Strategy 1.2.c: Support recruitment and retention of placement options for teens to increase placement options affirming of teens and their needs.

Cultural and Personal Identity Formation

Goal: Young people will have the opportunity to connect with their cultural, spiritual, and personal identity.

- Objective 1.1: Increase the number of opportunities for young people, professionals, and placement providers to explore cultural, spiritual, and personal identity formation.
    - Strategy 1.1.a: Increase the number of OKSA-sponsored events that provide information related to cultural, spiritual, and personal identity formation.
    - Strategy 1.1.b: Increase the supports for young people to ease barriers to participation in events that explore cultural, spiritual, and personal identity formation.
    - Strategy 1.1.c: Review field tools and assessments to ensure cultural competence.
    - Strategy 1.1.d: Support recruitment and retention of placement options for teens to increase culturally-appropriate placement options.

Education

Goal: Young people will be equipped with the support and skills to attain their educational goals.

- Objective 1.1: An increased percentage of young people will attain a high school diploma or high school equivalency.
    - Strategy 1.1.a: DHS will create materials on important Oklahoma education laws, regulations, policy, and resources to be used by placements and caseworkers.
    - Strategy 1.1.b: DHS will create and maintain a listing of credit recovery and high school alternatives for students to complete high school. OKSA will consider providing funding for these options.
    - Strategy 1.1.c: DHS will coordinate training and/or materials on Individualized Education Program (IEP) laws and regulations to be used by placements and caseworkers.
    - Strategy 1.1.d: OKSA will coordinate a way to track youth graduation rates.
- Objective 1.2: Increase awareness and access to higher education or training.
    - Strategy 1.2.a: DHS will coordinate with Upward Bound, Talent Search, and Gear Up to come up with a plan to refer young people who may be interested in pursuing education. The purpose is to create readiness for post-secondary education.
    - Strategy 1.2.b: DHS and the National Resource Center for Youth Services (NRCYS) will create a youth event that will incorporate post-secondary education, technical school education, and apprenticeship options for exploration.

- Strategy 1.2.c: OKSA and ETV staff will seek opportunities to offer skill building and information workshops to those in education systems. Those will include a Positive Youth Development and Trauma-Informed Lens.
- Strategy 1.2.d: ETV will work to develop notification systems.

Employment

Goal: Significantly increase employment opportunities for OKSA youth.

- Objective 1.1: Increase reciprocal communication with potential employers.
  - Strategy 1.1.a: Explore creation of an Employment Navigator position to communicate directly with potential employers.
  - Strategy 1.1.b: Develop and implement Positive Youth Development training for potential employers.
  - Strategy 1.1.c: Develop and host annual OKSA youth job fair event.
  - Strategy 1.1.d: Explore partnerships with work-based learning programs, such as trade apprenticeships statewide.
- Objective 1.2: Increase youth access to employment information and resources
  - Strategy 1.2.a: Develop and host job fairs for OKSA youth.
  - Strategy 1.2.b: Create an online portal as a hub of information for youth employment, apprenticeship, and shadowing opportunities.
  - Strategy 1.2.c: Explore partnerships with local Workforce and Chambers of Commerce to gather and disseminate local employment resource information.
- Objective 1.3: Work with OKSA youth to increase employability.
  - Strategy 1.3.a: Work with youth to create individual employment plans.
  - Strategy 1.3.b: Create a youth workshop focusing on resume building and soft skills related to employment.
  - Strategy 1.3.c: Ensure youth have access to resources needed to secure and maintain employment, including transportation and essential documents.

Housing

Goal: Increase the number of safe and stable homes that support healthy well-being.

- Objective 1.1: Youth and young adults will have homes that support positive youth development.
  - Strategy 1.1.a: DHS will contract with NRCYS to provide Professional Development trainings on positive youth development.
  - Strategy 1.1.b: DHS will increase the number and availability of housing options that support a youth's transition plan.
  - Strategy 1.1.c: OKSA will support recruitment and retention to increase placement options affirming of youth and their needs.
- Objective 1.2: Increase the number of housing options for youth and young adults.

- Strategy 1.2.a: DHS will continue to contract with NRCYS to provide a housing navigator to identify and facilitate access to the housing continuum available for youth and young adults.
- Strategy 1.2.b: DHS will partner with the Oklahoma Department of Mental Health and Substance Abuse Services to provide an Annual Housing Summit.
- Strategy 1.2.c: DHS will define and facilitate Supervised Independent Living for the State of Oklahoma.
- Strategy 1.2.d: DHS will expand their relationship with various housing authorities to increase the number of housing vouchers available to youth across the State.
- Strategy 1.2.e: OKSA will support recruitment and retention to increase placement for youth.

Oklahoma Foster Youth Advocates (OKFYA)

Goal: Youth throughout Oklahoma will have the opportunity to have their voices heard by programs and policy makers in Oklahoma's child welfare system and other systems that serve youth and families.

- Objective 1.1: DHS will recruit and train a group of young people with foster care experience.
  - Strategy 1.1.a: The OKFYA blended team will hold quarterly events to recruit young people to fill speaking engagements and focus groups. The secondary purpose of these meetings is to give young people with foster care experience time to build community, even when they do not plan to participate in other events.
  - Strategy 1.1.b: OKFYA will provide training on topics selected by the blended team at least twice per year.
  - Strategy 1.1.c: OKFYA will offer at least two Presenting with Purpose trainings per year to keep speakers trained on sharing their stories.
  - Strategy 1.1.d: DHS and NRCYS will coordinate with the OKFYA blended team to create a facilitator training and Training of Trainers for young people who would like to advance their speaking skills.
  - Strategy 1.1.e: DHS and NRCYS will coordinate to provide professional development opportunities to help advance youth professional skills.
  - Strategy 1.1.f: OKFYA blended team will create a sustainability plan to recruit and retain young people for OKFYA.
- Objective 1.2: DHS will coordinate with internal and external stakeholders for opportunities to have OKFYA provide training and technical assistance.
  - Strategy 1.2.a: DHS and NRCYS will find at least 10 speaking opportunities per year for young people to participate.
  - Strategy 1.2.b: DHS and NRCYS will find at least five opportunities for young people to provide feedback on new or ongoing initiatives per year.
  - Strategy 1.2.c: DHS will try to coordinate with its legislative liaison to provide youth a voice in pending legislation that would affect DHS.

- Strategy 1.2.d: The OKFYA blended team will coordinate at least one service project per year.

Oklahoma maintains a youth advisory board called the Oklahoma Foster Youth Advocates (OKFYA). Membership is open to any youth who meets the Oklahoma Chafee definition. Core members are a program manager and foster alumni temporary DHS employees, assistant director and program development specialist from NRCYS, and five alumni representatives who participate as a blended team for decision-making. Incentives are given to the group for work completed to ensure participation does not cause a financial burden. Food and locations are provided through NRCYS for meetings.

Information is brought to the group for input, which ranges from policy changes to marketing materials during quarterly OKFYA meetings. In the event the project cannot wait for a quarterly meeting, OKFYA members and the blended team are consulted in a variety of ways, including email and social media. For the CFSP a three-hour focus group was conducted to get feedback on gaps in service. Youth were invited and in attendance at the general DHS CFSP planning meeting and the OKSA stakeholders meeting.

Collaboration with OKFYA is just one way in which OKSA promotes positive youth development. The OKSA program emphasizes building on youth's strengths. OKSA offers supports, resources, and experiences for youth as well as promotes the building of positive relationships. OKSA is focused on providing the opportunities needed to help youth transition to adulthood in a productive, healthy manner.

DHS frequently shares information on NYTD outcomes and service reports with multiple state agencies, community partners, and youth. NYTD data was shared with all of the partners of the Homeless Alliance and with the court workgroups in Oklahoma County. NRCYS distributes NYTD data to community partners at least annually. NYTD data is also shared with the DHS Communications Department to distribute to media venues as requested. As part of the creation of the state's five-year plan, OKSA staff hosted a stakeholder feedback session so that community stakeholders could provide input in the state's plan. At this meeting, OKSA staff distributed and discussed the most recent NYTD snapshot report data for Oklahoma. The survey's outcome data is an important part of the ongoing evaluation and continuous improvement of the OKSA program.

The Administration for Children and Families (ACF) found Oklahoma in compliance with the NYTD requirements for the submission of NYTD data for the period ending 3/31/19. Collection of NYTD survey data is an effective collaborative effort within DHS and NRCYS. The survey process begins with a birthday card that is sent to 17 year olds that mentions they will be getting a NYTD survey, which is received within a week of receiving the birthday card. A letter is also sent to the placement provider with information about the survey. OKSA has one part-time position dedicated to ensuring NYTD surveys are sent out as well as follow-up to ensure the surveys are completed and received within the 45-calendar day time frame. CWS contracts with NRCYS to

complete the surveying of the young adults at ages 19 and 21. The Yes I Can! aftercare network, social media, and KIDS are used to maintain contact with this population to gather survey information. Response rates for the NYTD surveys consistently exceed minimum expectations. Over the next five years the State's statewide automated child welfare information system (SACWIS) will be incorporating a method to gather all survey information online.

Serving Youth Across the State

The greatest strength of the Oklahoma Successful Adulthood program service array is that the following resources and services are available statewide, easily accessible, and offer flexibility and creativity in supporting the youth's plan.

The OKSA community contractor, NRCYS, is the single point of contact for all CWS and tribal workers, care providers, and youth statewide to access technical assistance, resources, services, or aftercare support.

Youth development funds support youth in care and youth in transition across the State:

- Preparation funds for youth 14-18 years of age include education, work, essential document, and normalcy-related expenses. Normalcy purchases include, but are not limited to, driver education classes, purchases of laptop for school work, and expenses related to high school, such as yearbooks, senior pictures, and graduation announcements. Also, in limited circumstances OKSA may consider matching a youth's efforts to purchase a vehicle.
- Supportive funds for young adults 18-21 years of age in transition include education, work, essential documents, and transportation-related expenses, including matching a youth's efforts to purchase a vehicle, furniture and appliances, medical expenses, and miscellaneous items.
- Housing funds for young adults 18-21 years of age who exited care at, or after age 18, and are transitioning. These funds include rent deposits and payments and utility deposits and payments.

Aftercare services are provided through the Yes I Can! Alumni network. Yes I Can! assists young adults 18-21, who are no longer in DHS or tribal custody. Supports can be financial assistance through youth development funds, resource referrals, and case management provision. Yes I Can! is responsible for answering a technical assistance line, 1-800-397-2945, and an email address, oksa@ou.edu, made available to youth and young adults statewide.

In addition to data available via the NYTD surveys, OKSA staff each month generate a comprehensive report of OKSA-related activities, including assessment, planning, and NYTD service documentation. The data for this report is pulled from a database generated from the state's SACWIS system. This report presents data at the state, region, county, and worker levels. DHS and contract OKSA staff members utilize this data to provide targeted training and technical assistance. Analysis of these reports have yielded little variation in service delivery to youth based on region or county, with the exception of dedicated units in Oklahoma County specifically focused on OKSA

activities with youth. Completion rates of OKSA activities in these counties are an average of 10-20 percent higher when compared with statewide averages.

Serving Youth of Various Ages and Stages of Achieving Independence

Participants of the Oklahoma Successful Adulthood program are youth and young adults at various ages and stages of achieving permanency. They are youth currently in foster care, young adults who have aged out of foster care at the age of 18 and have not reached the age of 21, youth who entered a permanent guardianship or adoption after 16 years of age, and young adults ages 21 to 26 who are participating in the ETV program. These youth and young adults are to be served through assessments and youth-driven planning, youth development funds, events, and alumni services. All of these activities are centered around the 7 Key Elements of Success, which include health, housing, education, employment, essential documents, life skills, and permanent connections. When youth and young adults have information, knowledge, and practice in these seven areas, it is believed that they will be more likely to be successful as they transition into adulthood.

Beginning at age 14, youth receive a comprehensive case assessment to determine eligibility for the program and to identify those youth who will need additional supports and services to achieve self-sufficiency. Eligible youth complete a self-report assessment related to the 7 Key Elements of Success. The assessment's centerpiece is the 40 Developmental Assets, which were incorporated with the written permission of The Search Institute. Developing a tool and process that appropriately assesses the varying needs of 14, 15, 16, and 17 year olds is a challenge. The life skills assessment is a work in progress. After completing the life skills assessment, the youth then participates in the development and completion of their individual plan. Identified needs of each youth are supported by CWS, placement providers, successful adulthood (SA), and community resources and services. A court review every three-to-six months for youth 14 to 18 years of age monitors the progress and appropriateness of the plan and verifies that OKSA services are provided.

OKSA has now begun partnership with the University of Oklahoma Hope Research Center to create a new validated assessment tool, utilizing a trauma-informed and hope centered framework. In State Fiscal Year (SFY) 20, OKSA and the Hope Research Center will complete a baseline survey with current youth, child welfare workers, and supervisors. This baseline survey will expand to include former foster youth and stakeholders who are providing services to current and former foster youth. Moving forward, OKSA and the Hope Research Center will utilize this data to inform the components of the new assessment tool.

Transition planning is encouraged for each youth beginning at 17 years of age and particularly for those youth identified as needing additional supports. A mandatory family team meeting is held with youth and supportive adults 120-calendar days prior to the youth's 18th birthday to discuss and initiate the 90-day transition plan. Youth are strongly encouraged to be present at all court reviews and transition meetings. When the youth is unable to be present, the youth is encouraged to provide written input for

the proceedings. To strengthen the transition process, life skills and services are part of the contractual requirement for every placement provider serving youth 14 to 21 years of age. In SFY 19, the OKSA program began exploring the creation of a new and validated life skills assessment tool, which within the next five years will lend to revision of the transition plan, based on the evaluative data.

Collaboration with Other Private and Public Agencies

The Oklahoma Chafee Program is involved with several public and private agencies in helping youth in DHS and tribal foster care achieve independence.

OKSA is partnering with the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) on the Pay for Success grant. The grant will provide housing for 75 youth who aged out of foster care or the Oklahoma Office of Juvenile Affairs (OJA) at risk of homelessness. The grant is in the implementation year.

In SFY 16, DHS collaborated with the Oklahoma Finance Housing Agency (OFHA) to set aside 50 housing vouchers specifically for youth transitioning out of care. The program serves youth beginning at age 17 years and 9 months of age. Currently there are 26 youth being served across the State with the OFHA vouchers.

In SFY 17, DHS collaborated with the Oklahoma City Housing Authority (OCHA) through the United States Department of Housing and Urban Development (HUD) demonstration project to allow transitioning youth ages 18-24 to apply for housing vouchers for the Oklahoma City metro area. Twenty vouchers were set aside for this program. Currently, 10 young adults are participating in this voucher program.

The Homeless Youth Alliance is a committee made up of governmental agencies including the Department of Rehabilitation Services, ODMHSAS, and DHS Adult and Family Services; and public and private agencies including OCHA, the City of Oklahoma City, and Youth Villages (YV); community service partners including NorthCare, Be the Change, Youth Services of Oklahoma County, and Hope Community Services who work together to address the youth homeless population and the special issues this population faces that put them at risk for human trafficking.

A Way Home for Tulsa (AWH4T) is a collective impact of 24 voting organizations that exists to plan and implement strategies that support a system of outreach, engagement, assessment, prevention, and evaluation for those experiencing homelessness or those persons at risk of homelessness, within Tulsa City/County. DHS is currently a voting member.

In SFY 16, DHS entered into a five-year contract with Youth Villages (YV) to provide the LifeSet program to youth ages 17.5 through the age of 21. These services are aimed at helping youth transition from care. Over the course of five years, DHS pays an increasing percentage of YV total expenses for the YV LifeSet services using Chafee funds. Concurrently, a private philanthropist pays a decreasing percentage of YV total expenses for YV LifeSet services. By year five (SFY 20), DHS will support 90 percent

of YV LifeSet services at the rate of $50 per day per child. Ninety percent of the $50 per day per child rate is $45 per day per child. The contract is in year four and continues to focus on serving youth in two metropolitan areas, Tulsa and Oklahoma Counties, although in the past year they added the Lawton area and assigned a LifeSet specialist to serve these youth out of the Oklahoma City program. YV LifeSet is currently serving 86 youth and young adults in total.

The Oklahoma Institute for Child Advocacy (OICA) was established to create a strong advocacy network that would provide a voice for the needs of children and youth in Oklahoma, particularly those in the state's care. OKSA is currently partnering with OICA on two annual projects, Oklahoma Kids-Leadership Engagement Advocacy Development (OK-Lead) and the UP! Graduation party.

Thrive is an organization in the Oklahoma City Metro area leading a public-private collaboration to reduce the teen birth rate in Central Oklahoma. OKSA is participating as one of the public collaborators.

Next Steps is a collaboration developed by a group of community service providers to create housing options for young adults over age 18 in the Lawton city area. Lawton is the location of a DHS-contracted group home for females, as well as a large number of youth eligible for SA services. In 2012, the local Housing Authority Executive Board in Lawton approved using a five-bedroom unit for housing specifically for female, former-foster youth. This house operates with an onsite overnight house manager, case manager, and mentor. Additional housing was also made available for males over age 18 who exited from foster care.

Project Manna House is a transitional living home in the Tulsa community that equips, guides, and supports young women during their journey to adulthood. Manna House provides stabilized housing in a dorm-style living environment. The program focuses on developing life skills, educating, mentoring, and teaching social skills. They are currently set up to serve six young adults. YV LifeSet provides case management and Yes I Can! assists with supported services and youth development funds.

The Community Transformation Team in Tulsa is a long-established collaboration. This collaborative effort focuses on all youth-related issues in the Tulsa metro area. The collaborative partners are ODMHSAS, Tulsa Mental Health Association, the Oklahoma Health Care Authority (OHCA) that has oversight of the Oklahoma Medicaid program, DHS, OJA, Oklahoma State Department of Health, and Youth Services of Tulsa. In the past five years, this community team encouraged the development of a Post-Adjudicatory Review Board to focus on youth transitioning from foster care in the Tulsa community, supported activities to address a healthy transition for youth with mental health issues, and supported transitional living programs through the local Youth Service agency and the Mental Health Association. This collaboration will continue to be active in the identification and development of services that support youth transitioning from custody.

Ris4 Thursday is a collaboration of higher education professionals, community members, and foster alumni college students working toward increased understanding and support of former foster youth who attend, or who graduated from Oklahoma colleges or universities. This initiative was the result of a former foster student who was attending Northeastern State University (NSU) four-year college mentioning to a professor in the social work department the challenges of former foster youth attending college. The professor and a fellow professor at Oklahoma State University (OSU) recognized the need for some type of additional support for these students and launched the Ris4 Thursday project, which began as a Facebook page www.facebook.com/Risforthursday dedicated to former foster youth at four-year higher education institutions. The Facebook page was created in February 2013. The project's initial focus was providing a place for former foster youth to share their experiences, identify obstacles in navigating college life, and to provide assistance and resources to these youth throughout their journeys. This project has spread to additional Oklahoma campuses where staff are identified to be the contact for any student self-identifying as formerly in DHS or federally-recognized tribal custody after the age of 13. One identified goal is to ensure the college students connect through technology with volunteers and services on state campuses and in Oklahoma's communities.

Norman Public Schools Collaborative is a collaborative between the Special Services Department of Norman Public Schools, Department of Rehabilitative Services, ODMHSAS, OJA, Oklahoma Commission on Children and Youth, and DHS. Norman, Oklahoma, which is just south of the Oklahoma City metropolitan area, is the location of 22 facilities that provide residential services to youth with mental health, behavioral, and developmental challenges. This effort combined financial resources of the agencies and local school system to hire an additional vocational rehabilitative counselor to coordinate services to the youth on an Individualized Education Program (IEP). This counselor's responsibilities and activities include participating in the IEP meetings, facilitating career assessments and exploration, connecting the youth with post-secondary education opportunities, and coordinating with other vocational rehabilitative workers in the youth's home community, as the youth transitions from care.

Lou Hartpence Scholarships for young adults 18-23 years of age is available through an endowment to assist youth in DHS custody obtain higher education. Youth are selected through an application process, must maintain a "C" or better average, and be enrolled in 12 credit hours or more. Selected youth receive $1,000 their first and second years of college, $2,000 for their third year, and $3,000 of scholarship assistance for their fourth year. The Oklahoma City Community Foundation administers the scholarship.

Youth With Promise Scholarships for young adults 18-23 years of age are sponsored by private donors, the Oklahoma County Children's League, and Oklahoma City Community Foundation to assist youth with higher education needs, such as tuition at colleges/universities, books, and fees not covered by grants or scholarships.

Transition post-adjudication review boards in Tulsa and Oklahoma Counties review court cases specific to teens in foster care to offer support and suggestions to workers.

The Road to Independence (RTI) project began in 2013, as a two-year planning grant to study the effectiveness of the CW system and local community services in preventing homelessness for foster involved youth. As a part of this grant initiative, a RTI network was established. After the RTI grant period ended, this dedicated group continued meeting and launched a pilot program to support the Oklahoma County CW offices to strengthen transition services, improve placement stability, and increase permanency for youth aged 14 to 18 years in child welfare custody. They successfully engage county offices, caseworkers, and youth in their program and are currently providing services in Oklahoma County Offices 55A and 55B. Since the inception of this project, service delivery to youth in these County offices has increased approximately 150 percent.

DHS collaborated with Developmental Disabilities Services (DDS) in the planning and facilitation of a one-day simulated city independent living event. DDS group home staff, DDS case managers, and administrators worked closely with DHS and NRCYS staff on this event. DDS staff acted as the city's mayor, landlords, employers, and bankers. The result was an extremely excited staff and group of youth.

Oklahoma's Promise is a unique program set up by the Oklahoma Legislature and administered by the Oklahoma Regents for Higher Education that will help pay for tuition at an Oklahoma public two-year college or four-year university. Once enrolled in the program in eighth, ninth, or tenth grade, a youth is eligible for benefits whether he or she remains in DHS custody, as long as the youth maintains the behavioral and scholastic requirements established for OHLAP, www.okhighered.org/ohlap.

Tuition Waivers are provided for post-secondary education and vocational-technical programs at most institutions within the Oklahoma state system of higher education for youth who were in DHS or tribal custody for any nine months between the ages of 16 and 18. Tuition Waivers are provided by the Oklahoma Regents for Higher Education. DHS provides the Regents with eligibility information by maintaining an eligible youth listing. DHS also provides eligibility checks upon request. Waivers are valid until the youth reaches age 26 or completes a baccalaureate degree.

Page Week for youth 16-21 years of age is a yearly event in which DHS youth are invited to participate as pages for a week in the Oklahoma House of Representatives. To participate, the youth must apply and the selection process requires evaluation of the youth's participation in the OKSA program, volunteer, and school activities. Once selected, youth have the opportunity to learn about the legislative process and meet with their legislators. Legislators have the opportunity to listen firsthand to issues that arise with youth in out-of-home placement. In addition, the legislature provides housing for the week, transportation, supervision, and work stipends. In SFY 19, 21 youth from across the State were selected to participate.

Determining Eligibility for Benefits and Services
Youth/young adults likely eligible for the OKSA program are:

- youth ages 14 through 17 years of age who are in DHS or tribal custody and in out-of-home placement;
- young adults ages 18, 19, and 20 years of age who are receiving voluntary extended services or who were in DHS or tribal custody in out-of-home placement on their 18th birthday;
- youth who entered a permanent guardianship with kin or adoption after age 16 and who have not yet reached their 21st birthday ; and
- young adults 21 to 26 years of age participating in the ETV Program.

Oklahoma's Chafee Program and ETV Program are a part of the continuum in the full service array provided by CWS to meet the outcomes of safety, permanency, and well-being. The focus is on youth 14 to 26 years of age as they prepare for, and begin transitioning to adulthood. The program provides the same resources and services to current and former youth in DHS and tribal custody. All services are available on a statewide basis, unless otherwise noted. Youth who are temporarily residing outside of Oklahoma are also able to continue to access Oklahoma services by calling the youth's child welfare specialist, education specialist, the Yes I Can! Alumni network toll-free number, or by requesting services on the OKSA website, www.oksa.ou.edu. The OKSA program provides a brochure outlining Successful Adulthood services, postcards for the ETV services available, location of the OKSA informational website, and a Yes I Can! card containing the toll free number. Both youth and adults can use these items to access services and resources. The OKSA program is currently partnering with OKFYA to create more relevant and accessible versions of these resources, specifically for the youth served.

Cooperation in National Evaluations
The Oklahoma Department of Human Services will cooperate in any national evaluations of the effects of the programs in achieving the purposes of Chafee.

Chafee Training
OKSA training is coordinated through the CWS Training Unit and is contained in that section of this APSR. A two-day overview of the OKSA Program is jointly-trained by OKSA and OKSA community contractor staff. OKSA staff have completed seven sessions of this training in SFY 19, with two additional sessions scheduled. Participant response, per training evaluations, continues to be positive. In SFY 19, DHS and NRCYS staff began a significant rewrite of this training, in order to more effectively train processes of working positively with youth.

Due to overwhelmingly positive feedback, the OKSA community contractor has continued implementation of a model of professional development training in SFY 19. These training sessions focused on knowledge and skill enhancement specific to working with adolescent youth. OKSA made these sessions available to child welfare staff, placement providers, service providers, and other community stakeholders. Topics for these workshops included gang culture, compassion fatigue, adolescent

brain development, and positive youth development. The OKSA community contractor facilitated 18 sessions in SFY 19 with 361 total participants. Participant response was overwhelmingly positive.

OKSA county coordinator training is a two-day conference for all OKSA county coordinators across the State. There are 77 Counties in the State of Oklahoma and the goal is to have at least one coordinator in each county. An OKSA county coordinator has the added responsibility of making sure staff know about the OKSA program and that the youth in their counties are receiving services they need to transition into adulthood successfully. The goal of this training is to support the OKSA county coordinators in their efforts and is designed to help give the coordinators an opportunity to network with one another, gather information on the OKSA program, learn about new policy changes, as well as new opportunities for youth and resources that are available to assist them in providing the best services possible to youth in care.

In addition to the annual OKSA county coordinator training, in SFY 19 the OKSA Program continued facilitation of quarterly trainings with the county coordinators in each region of the state. Participant response, per evaluations and feedback, has continued to be positive.

Education and Training Vouchers (ETV) Program

Oklahoma maintains four full-time child welfare specialist II and one full-time child welfare specialist III to help students navigate post-secondary education. Also, one programs manager is assigned to ensure federal-requirement compliance. The specialists help students face-to-face at the campus of their choice to ensure they have the supports needed to be successful in post-secondary education. They provide resource and referral to programs on campus and in the community to meet the student's unmet needs. The program developed a procedure and expectation guide, contact guides, and training program for new specialists to ensure no matter the school each student receives the same experience. Specialists attempt to reach each young person who may be eligible for a voucher to ensure maximum participation.

Education specialists confirm that each student is only receiving one voucher to equal $5,000 or less, per school year. Also, each specialist coordinates with either the bursar or financial aid office at each individual school and ensures each student does not exceed their cost of attendance. No payments are made until both of these are verified by the school.

ETV attempts to coordinate with any program on a post-secondary campus that may be supportive to our students. Below is a list of current partnerships:

- Oklahoma State Regents for Higher Education
    - Foster Care Tuition Waiver and Oklahoma’s Promise
        - Tuition Waiver – ETV provides eligibility information for the foster care Tuition Waiver. Processes in custody applications for Oklahoma’s

Promise. ETV also coordinates with financial aid to ensure each student receives every award for which he or she is eligible.

- Ris4 Thursday
  - Network of volunteer advocates on each campus to help support former foster youth – Advocates are used as a resource and referral source for each campus.
- Fostering Student Success
  - Program at University of Central Oklahoma serving students with foster care experience – ETV coordinates for resources and referrals to campus-based services through Fostering Student Success. ETV also connects students who request additional supports to program staff.
- Oklahoma Association of Student Financial Aid Administration (OASFAA)
  - Association of Financial Aid Directors – ETV coordinates with them to ensure maximum knowledge of financial aid procedures. ETV also provides technical assistance to them on issues experienced by our students.
- Oklahoma Youth with Promise
  - Scholarship for former foster youth at Oklahoma City Community Foundation – ETV coordinates to verify eligibility and endorse students for scholarships.
- Career Tech
  - Association of state funded technical schools – ETV coordinates to ensure students receive the Foster Care Tuition Waiver at technical schools.
- TRIO/Oklahoma Division of Student Association (ODSA)
  - Oklahoma network of TRIO programs – ETV coordinates with Student Support Services on campuses for resources and referral. ETV is currently working with ODSA to coordinate with local Talent Search and Upward Bound programs to refer young people interested in post-secondary education.
- National Resource Center for Youth Services
  - OKSA Community Contractor – ETV coordinates with NRCYS to provide training and technical assistance to DHS workers.

Oklahoma uses Excel to track each payment made on its ETV Program for each defined school year. Payments are entered for each identified student and at the end of each year, the number of students who received a payment are counted. In the event this method fails, payments made on ETV can be obtained through the fiscal agent. ETV is working to get space in the new SACWIS system to track payments.

Consultation with Tribes

The following are the strategies OKSA uses to coordinate with the tribes:

1. OKSA has a tribal liaison that attends all meetings listed below, performs training and technical assistance as requested, and conducts focus groups annually to determine gaps and needs.

2. OKSA will continue to participate in the Tribal/State Workgroups quarterly, Oklahoma Indian Child Welfare Association (OICWA) Conference annually, Annual Title IV-B Meeting, and Completing the Circle annually. OKSA will explore becoming a member of the OICWA Organization and attend their quarterly meetings. OKSA will perform training and technical assistance upon request from tribal nations.
3. OKSA will make quarterly phone calls to Tribal Nations who have young people in their custody and meet the DHS Chafee definition. OKSA will explain the services and tools available and offer technical assistance to staff. OKSA will target young people who have not accessed services, just turned 14, or are 90-calendar days from transition first. This is the same process done by NRCYS for DHS youth.
4. All services available to DHS custody youth are equally available to youth in tribal custody. This includes youth development funds, training and technical assistance for workers, and all assessment and planning tools.
5. No tribes have requested to take part of their Chafee. In the event they would like to coordinate on this DHS will contact its regional lead with the Children's Bureau for technical assistance.

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Targeted Plans within the CFSP

Foster and Adoptive Parent Diligent Recruitment Plan

See the attached ***Oklahoma Child Welfare Services Foster and Adoptive Parent Diligent Recruitment Plan***.

Health Care Oversight and Coordination Plan

See the attached ***Oklahoma Child Welfare Services Health Care Oversight and Coordination Plan***.

Disaster Plan

See the attached ***Oklahoma Child Welfare Services Disaster Plan***.

Training Plan

See the attached ***Oklahoma Child Welfare Services Training Plan*** and ***Training Plan with Cost Allocation***.

Financial Information

Payment Limitations – Title IV-B, Subpart 1

In SFY 2005, the State expended Title IV-B, Subpart 1, funds as follows: Child Care - $0; Foster Care Maintenance - $340,000; Adoption Assistance - $400,000. The State may not exceed this baseline amount for the corresponding types of payments after FY 2007 and replaces the 1979 baseline amount to which the State was previously held.

In SFY 2005, the state expended $4,953,028 in state funds on State Family Foster Care. These funds were not used as match against any federal funding sources. This amount became the maximum that a State may use as a match for foster care maintenance payments under the Title IV-B, Subpart 1, (Section 424(d)) and will serve as a baseline for future years.

Payment Limitations – Title IV-B, Subpart 2

The FY 2017 State and local share expenditure amounts for the purposes of Title IV-B, Subpart 2 was $953,712 state match at 25 percent and a MOE of $1,520,000 to equal a total expenditure of $2,473,712.

Oklahoma CFS-101, Parts I and II - FY 20 and Part III – FY 17 are attached.