



PINNACLE PLAN MEASURES

SEMI-ANNUAL SUMMARY REPORT

August 20, 2019

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Overview

The Oklahoma Department of Human Services (DHS) is committed to improving the safety, permanency, and well-being of children served by the child welfare (CW) system. The Pinnacle Plan is the roadmap and public reporting is critical to ensuring transparency and accountability. The [OKDHS Metrics, Baselines, and Targets Agreement - 3/7/13](#) outlines how the outcomes and other indicators are measured and reported. Monthly and semi-annual reports are made available to the public.

Oklahoma is committed to good faith efforts and positive trending toward the goals outlined in the plan. Twice per year DHS provides an analysis in which the agency outlines: (1) the strategies employed to improve performance in the areas identified in the Compromise and Settlement Agreement; and (2) the progress toward improving performance. The report includes an update regarding performance improvement strategies implemented to date and, when possible, an assessment of the effectiveness of those strategies. Each semi-annual report addresses seven performance areas comprised of 27 specific metric elements. The seven areas are: Foster Care Safety, Counts for New Foster Homes, Worker Contacts, Placement Stability, Shelter Usage, Permanency Timeliness, and Workloads.

The Compromise and Settlement Agreement requires the Co-Neutrals to determine the extent to which DHS makes good faith efforts to achieve substantial and sustained progress toward each Target Outcome. This report summarizes the most significant strategies implemented for each Target Outcome and, where possible, draws connections between those efforts and progress toward the Target Outcomes established in the Metrics, Baselines, and Targets Agreement.

Measurement Notes

DHS was the first state agency in the nation to have a federally-approved statewide automated child welfare information system (KIDS) and continues to strive for high quality data. **The findings in this report are subject to change due to ongoing data entry, changes in policy, changes in practice, and changes in definitions, or data quality issues that may be discovered through the process.**

Organization of the Report

To align the metrics in this report with the elements of a continuous quality improvement (CQI) process, DHS believes it is important to clarify how the various metrics relate to the levers that DHS can potentially influence to improve outcomes for children in care.

The CQI process is based on the premise that improving outcomes for children requires some degree of system reform and system reform involves changing one or more elements of the traditional way of doing business: (1) the process of care, (2) the quality of care, and (3) the capacity to deliver care. Process changes pertain to how the work is done; quality changes pertain to how well it is done; and capacity changes pertain to the tangible resources the agency devotes to delivering care. CQI presumes that a combination of these three types of reforms will lead to improved outcomes (i.e., safety, permanency, and well-being) for children.

To clarify how the various Settlement Agreement metrics relate to these particular aspects of DHS' ongoing reform efforts, the report begins with some contextual information and is then organized by metric type:

SECTION 1: Contextual information. This section provides a general description of entry and exit trends since the enactment of the Settlement Agreement and trends in the demographic profile of the children captured during the history of reporting periods.

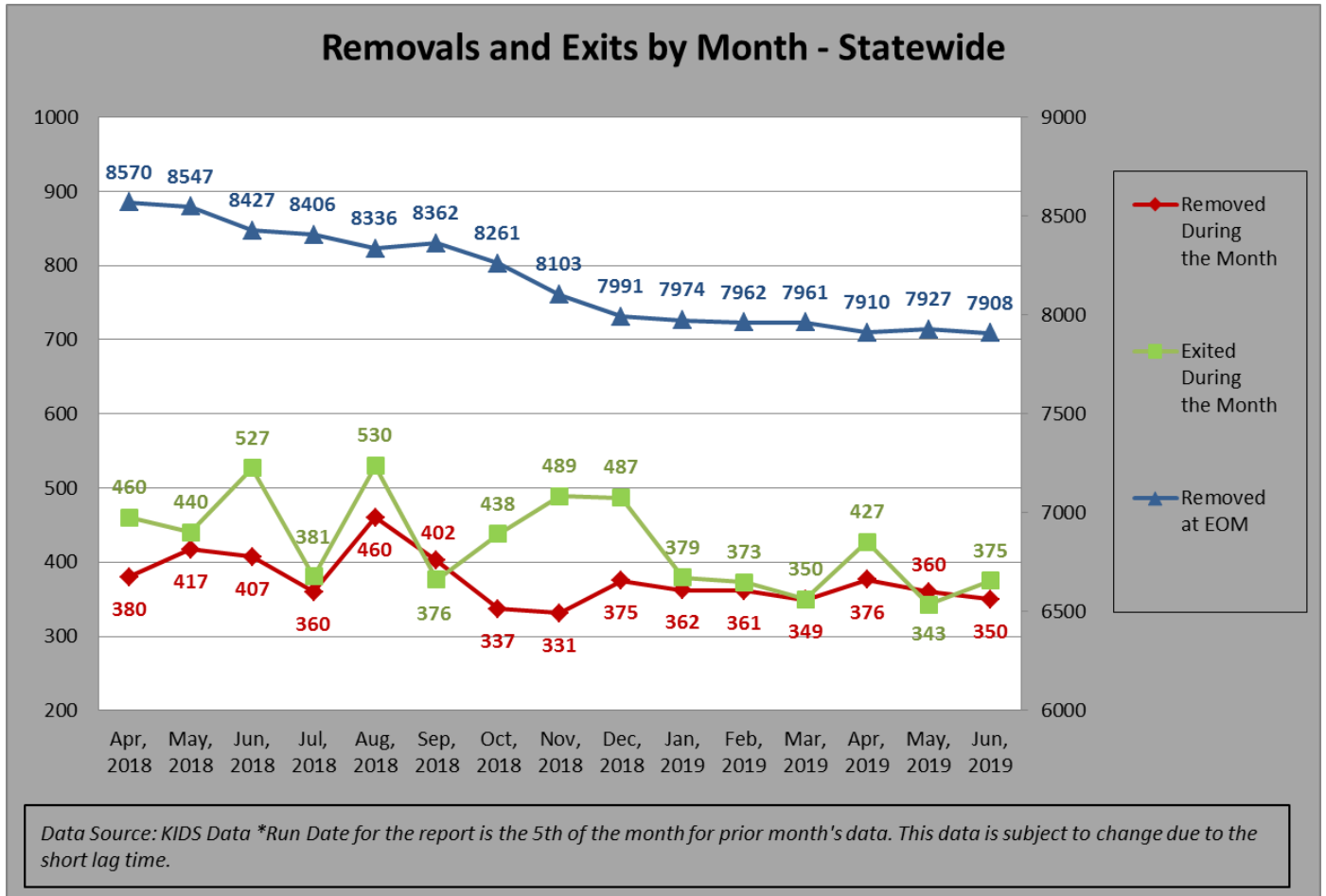
SECTION 2: Child outcomes. This section reports on metrics related to safety and permanency outcomes for children in care. These include indicators pertaining to **maltreatment in care, frequency of worker contacts, placement stability, shelter placement, and permanency.**

SECTION 3: Capacity indicators. This section reports on metrics designed to measure the capacity of DHS to deliver foster care services. These include metrics pertaining to **foster home development and caseload/workload.**

SECTION 1. Contextual Information

Entry and Exit Trends

The Oklahoma Department of Human Services (DHS) began Pinnacle Plan implementation in July 2012, six months after the Settlement Agreement was reached. In July 2012, just over 9,000 children were in care, and this number continued to rise before peaking at 11,303 in October 2014. In November 2014, the number started to decline for the first time since Pinnacle Plan implementation began. As of June 2019, the number of children in care reached 7,908, a 30.0 percent decrease since October 2014, which continues the reduction in the number of children in care. Section 1, Graph 1 shows the number of children removed and the children who exited care during each month from April 2018 through June 2019. Throughout state fiscal year (SFY) 2019, the total number of children exiting care outnumbered the number of children removed.

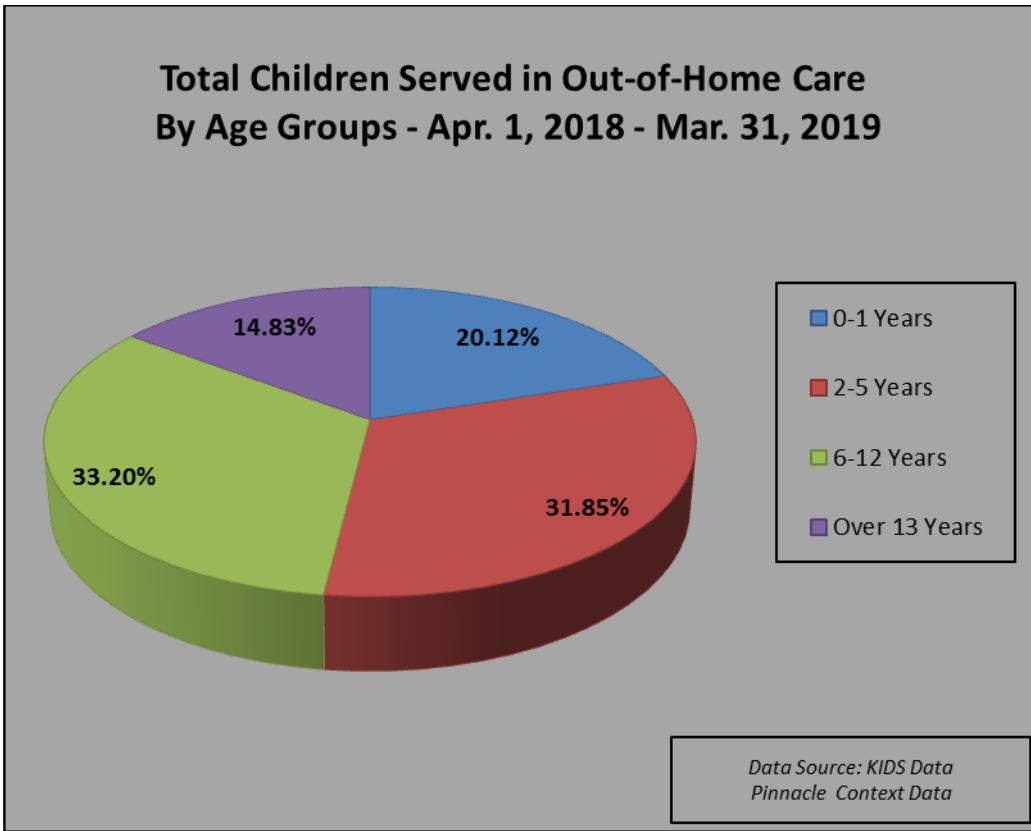


Section 1, Graph 1

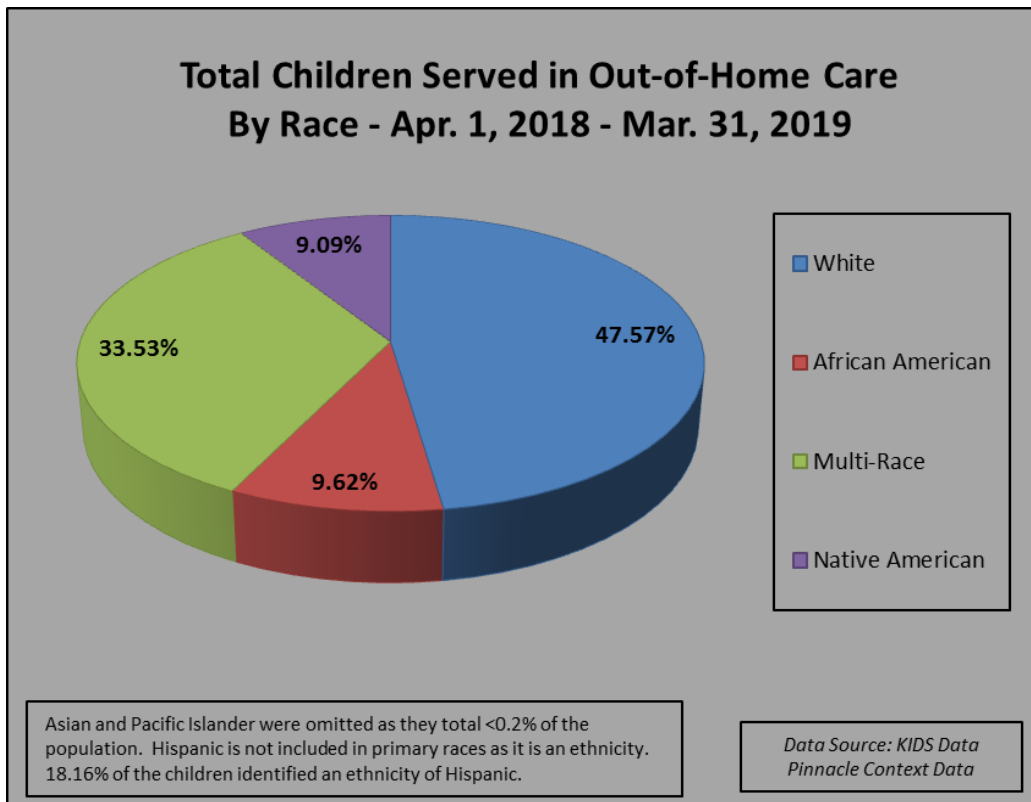
Demographic Information by Reporting Period

During the reporting period of April 1, 2018 through March 31, 2019, according to Adoption and Foster Care Analysis Reporting System (AFCARS), DHS served 13,441 children. The "served" population includes all children who were in care for at least 24 hours. This number also includes children in tribal custody. For the purposes of Pinnacle Plan reporting, children in tribal custody are not included in the measures, except for the Absence of Maltreatment in Care measure that includes all children served. This leaves a served population of 13,189 excluding children in tribal custody.

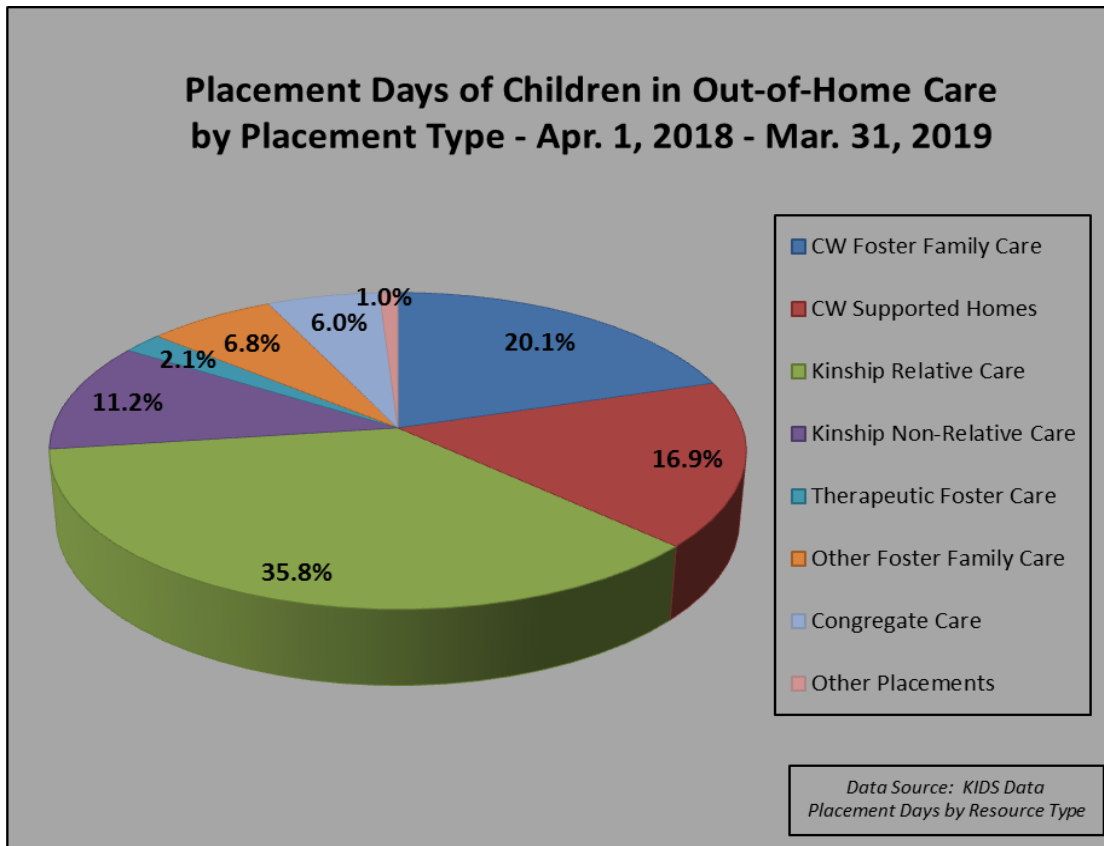
Section 1, Charts 1, 2, and 3 show the children's demographics by age, race, and placement type. For race, when a child claims more than one race, the child is counted in the Multi-Race category. Hispanic or Latino origin is no longer counted as a primary race.



Section 1, Chart 1



Section 1, Chart 2



Section 1, Chart 3

SECTION 2. Child Outcomes

1.1: Absence of Maltreatment in Care by Resource Caregivers

Operational Question

Of all children served in foster care during the 12-month reporting period, what percent were **not** victims of substantiated or indicated maltreatment (abuse or neglect) by a foster parent or facility staff member?

Data Source and Definitions

For the semi-annual report, Oklahoma uses the logic from the official federal metric. This measure is a 12-month period based on the federal fiscal year (FFY) of October 1 through September 30. Oklahoma uses the two official state-submitted Adoption and Foster Care Analysis Reporting System (AFCARS) (18B & 19A) files combined with a non-submitted annual National Child Abuse and Neglect Data System (NCANDS) file covering AFCARS 18B & 19A periods to compute the measure. The NCANDS file used for this report is calculated the same as the file submitted to the federal government, which includes running the data through the official validation tool. However, the official submission to NCANDS occurs only once annually and is due yearly by January 31, so NCANDS data is subject to change until that date.

- Counts of children not maltreated in foster care (out-of-home care) are derived by subtracting the NCANDS count of child maltreatment by foster care (out-of-home care) providers from the AFCARS count of children placed in out-of-home care during the reporting period.
- This metric measures performance over 12 months and differs from the monthly data collected from KIDS.
- The federal metric only counts a victim once during the FFY, even if a child is victimized more than once in the course of a year. In the monthly report, a victim is counted for every substantiated finding of abuse or neglect.
- NCANDS does not include any referral when the report date and completion date do not both fall during the same FFY reporting period.

- The total population in this measure includes tribal custody children, as these children are included in the federal submission to NCANDS.

This measure includes all children placed in traditional foster care homes, kinship homes (relative or non-relative), therapeutic foster care homes, group homes, shelters, and residential facilities. Oklahoma began including children substantiated for maltreatment by the Office of Client Advocacy (OCA) in institutional settings in March 2013.

Description of Denominator and Numerator for this reporting period

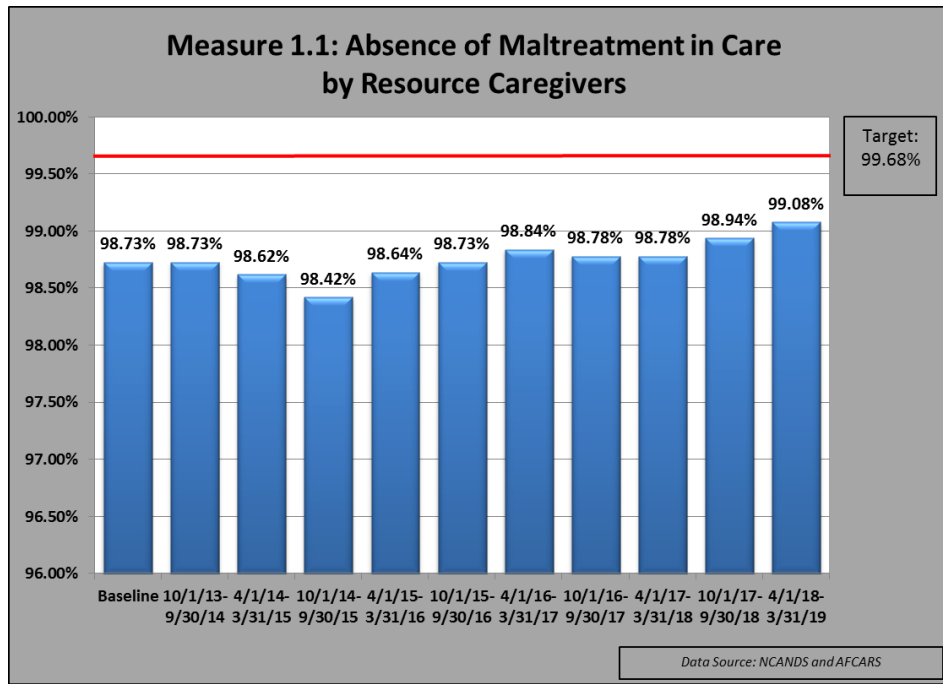
Denominator: All children served in foster care from 4/1/2018 through 3/31/2019.

Numerator: The number of children served in foster care from 4/1/2018 through 3/31/2019 who did not have any substantiated or indicated allegations of maltreatment by a foster parent or facility staff member during that period.

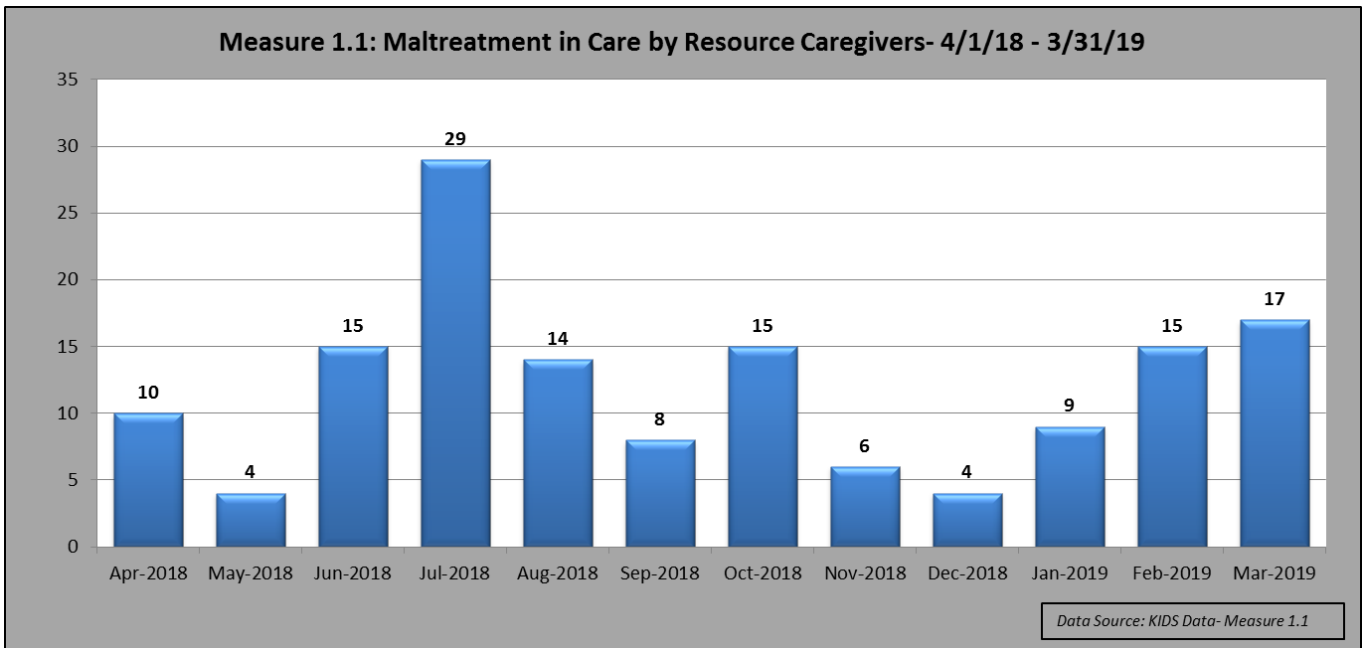
Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014	15,605	15,806	98.73%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014	16,066	16,272	98.73%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015	16,410	16,640	98.62%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015	16,543	16,808	98.42%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016	16,323	16,548	98.64%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016	16,037	16,244	98.73%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017	15,571	15,753	98.84%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017	14,929	15,113	98.78%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018	14,229	14,405	98.78%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018	13,754	13,901	98.94%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019	13,317	13,441	99.08%
Target				99.68%

Section 2, Table 1.1-1



Section 2, Graph 1.1-1



Section 2, Graph 1.1-2

Children in Out-of-Home Care						Ending 9/30/18
April 1, 2018 - March 31, 2019						MIC Rate per 100,000 days
Placement Type	Placement Days	Percent	Placement Type	MIC	Percent	
CW Foster Family Homes	564,103	20.1%	CW Foster Family Homes	35	24.0%	6.2
CW Foster - Supported Homes	474,441	16.9%	CW Foster - Supported Homes	17	11.6%	3.6
Kinship Foster Care - Relative	1,003,557	35.8%	Kinship Foster Care - Relative	37	25.3%	3.7
Kinship Foster Care Non-Relative	312,286	11.2%	Kinship Foster Care Non-Relative	12	8.2%	3.8
Therapeutic Foster Care Homes	59,927	2.1%	Therapeutic Foster Care Homes	3	2.1%	5.0
Congregate Care	190,807	6.8%	Congregate Care	35	24.0%	18.3
Other Foster Family Care	168,467	6.0%	Other Foster Family Care	7	4.8%	4.2
Other Placements	27,474	1.0%	Other Placements	0	0.0%	0.0
Total	2,801,062	100%	Total	146	100%	5.2

Data Source: Pinnacle MIC Data for 12 months ending 3/31/19; Run Date: 5/31/19 and Placement Days by Resource Type; Run Date: 4/5/19

Section 2, Table 1.1-2

Commentary

This indicator is based on the federal measure for maltreatment in care and produces representative information about the incidence of maltreatment in care (MIC). For NCANDS reporting, 124 victims were reported.

For the reporting period April 1, 2018 - March 31, 2019, 146 substantiations of maltreatment while in out-of-home care were reported in the monthly MIC Pinnacle Plan Measure. These 146 victims were included in 93 separate referrals: 68 referrals for children in foster care and 25 referrals to the Office of Child Advocacy (OCA). Of the 146 victims, 111 were placed in foster care settings and 35 were placed in congregate care settings:

Foster Family Care Types: 111 Victims

- 37 children were in a Kinship Foster Care - Relative Home (33.3%);
- 35 children were in a child welfare (CW) Foster Family Home (31.5%);
- 17 children were in a CW Foster-Supported Home (15.3%);
- 12 children were in a Kinship Foster Care Non-Relative Home (10.8%);
- 4 children were in a Tribal-Approved Foster Home (3.6%)
- 3 children were in a Therapeutic Foster Care (TFC) Home (2.7%);
- 2 children were in an Adoptive Home (1.8%); and
- 1 child was in a Contracted Foster Care Home (0.9%).

Congregate Care Placement Types: 35 Victims

- 22 children were in a Level D or E Resource Facility (62.9%);
- 6 children were in an Oklahoma Department of Human Services (DHS) Shelter (17.1%);
- 3 children were in a Detention Center (8.6%);
- 2 children were in a Residential Individual Therapeutic Service (5.7%); and
- 2 children were in a Youth Services Shelter (5.7%).

The difference between the two measures is explained in Data Source and Definitions.

FOSTER CARE

Screen-Out Consultations on Out-of-Home Referrals			
Screen-Out Referral Month	Total Screen-Out Referrals	Screen-Out Referrals with Screen-Out Consultation	% in Compliance
Baseline (Sept-Nov 2016)	312	122	39.1%
Oct-18	95	95	100.0%
Nov-18	57	57	100.0%
Dec-18	79	79	100.0%
Jan-19	99	98	99.0%
Feb-19	47	47	100.0%
Mar-19	70	70	100.0%
TOTAL	447	446	99.8%
<i>Data Source: Y1790B - Out-of-Home Screen-Out Detail; Run Date: 6/24/19</i>			

Section 2, Table 1.1-3

10-day Staffing on Out-of-Home (OOH) Investigations			
Investigation Closure Month	Total Children in OOH Referrals Assigned	Children with 10-day Staffing	% in Compliance
Oct-18	114	114	100.0%
Nov-18	102	102	100.0%
Dec-18	72	72	100.0%
Jan-19	95	95	100.0%
Feb-19	108	108	100.0%
Mar-19	119	119	100.0%
Total	610	610	100.0%
<i>Data Source: Y1751 - Out-of-Home Investigations; Run Date: 6/18/19</i>			

Section 2, Table 1.1-4

Statewide Automated Child Welfare Information System (SACWIS)/KIDS

A screen-out consultation guide in KIDS was released on 2/9/19. This enhancement displays relevant information about the resource home, such as the number of referrals, number of investigations, and number of written plans of compliance (WPCs), as well as provides staff different text areas to document information that needs to be discussed in the consultation. Additionally, the enhancement includes an approval area for each responsible CW specialist to ensure accountability, similar to the 10-day staffing. The Out-of-Home (OOH) Screened-Out Referrals Y1790B report was updated on 2/9/19, to reflect the KIDS changes for screen-out consultations. For easy identification, the report highlights when a screen-out consultation does not include required approvals for each responsible CW specialist and is noted as incomplete. Resource family partner (RFP) liaison supervisors conduct screen-out consultations for supported foster homes, monitor the Y1790B report, and share information to RFP agencies, as applicable.

The Open WPC/Child Protective Services (CPS) Y1025 report and progress report/scorecard is sent out monthly to Resource staff. The Foster Care and Adoptions (FC&A) field deputy director and field managers review the information

and use it to guide practice. The YI025 report contains all foster care homes with an open WPC and/or an open investigation. For easy identification, the report also highlights when a resource home has an overdue WPC. The FC&A field deputy director reviews and monitors this report as well for the RFP supported foster homes.

The WPC Summary YI043 WebFOCUS report released in February 2019 provides WPC trend information. The report includes monthly data and a current fiscal year count of all WPCs for foster care resources, including closed resources. The report also features the number of new WPCs created monthly and all resources with an open WPC that subsequently have or had an open investigation. The report provides statewide, regional, and agency specific trends to further guide practice and provide a proactive approach to reducing MIC.

During this reporting period, planning and development continued on the project to track exception requests and policy violations within KIDS, which is set to release in November 2019. Adding exception requests and policy violation tracking to KIDS assists with appropriate follow-up by CW staff and help identify practice trends. An additional KIDS enhancement is set to release in May 2020 to provide details on why a WPC was implemented as well as congregate data to inform practice change.

To improve practice related to CW specialists' contacts, updated guides were developed to provide staff guidance on what steps to take before, during, and after a quality contact. Those guides, *Quality Contact with a Parent* and *Quality Contact with a Child*, replaced all previous guidance on CW specialist contact with parents and children. Regional leadership, including district directors and deputy directors, were trained in August and September 2018 on both of the new quality contact guides. Each guide's use and documentation were explained. These guides are also included in training number one of the *Supervisory Framework Series, Best Practices*. Region 1 received training on the subject starting 8/10/18 and finishing on 10/10/18. Since the Supervisory Framework Series rolled out to each region over a span of time, Region 2 was specifically trained on the use of both guides on 8/23/18; Region 4 on 9/21/18; Region 5 on 9/28/18; and Region 3 on 10/12/18. *CWS Numbered Memo 18-11, Quality Child and Parent Contacts* was sent to all CW staff 10/30/18, informing them of the new guidance.

CPS programs staff continues to review every out-of-home (OOH) screened-out referral to ensure policy guidelines are adhered to in the disposition process. In early 2018, a KIDS enhancement started capturing the review process. CPS programs staff documents findings to concur or not concur with the screen-out disposition for foster homes in KIDS. When CPS programs staff does not concur with the referral's disposition, programs staff overrides the original disposition and assigns it in KIDS for investigation.

Foster Home Assessments

In November 2018, the FC&A field deputy director presented and discussed the resource family assessment (RFA) state and regional analysis with the field managers. By 12/31/18, each field manager presented and discussed the state and regional analysis with his or her supervisors. The goal was for each area's leadership team to assume ownership of their practice and focus on areas that may impact safety the most based on the state and regional analysis. In January 2019, each FM developed a Continuous Quality Improvement (CQI) Action Plan based on their specific practice areas needing the most improvement. Examples of the practice areas impacted include, but are not limited to: thorough assessment and documentation of criminal and CW history, obtaining all applicable references, documenting exceptions to resource requirements, and timely approval of resource homes. Plans were submitted to the FC&A field deputy director for final review. All plans were implemented in January 2019, with the exception of one plan which was implemented in March 2019. Each action plan was monitored for a minimum of 90-calendar days by the field manager and his or her supervisors. Each plan included random FM reviews of newly approved resources to monitor quality practice and provide feedback to the assigned specialist and supervisor. Eleven action plans were developed and implemented; nine action plans were closed as a result of practice improvement; and two remain open for further monitoring. Examples of action taken during the plans include, but are not limited to: training, mentoring, utilization of the RFA Review tool and Initial Kinship Approval Checklist, and development of tracking logs. Two additional action plans were opened by field

managers in May 2019 to address additional practice concerns found during the initial plan. These plans are ongoing and monitored for 90-calendar days. ***CQI Action Plan – Regions 2 and 3 – Resolved*** is attached.

RFP agencies reviewed the initial information from the RFA analysis of their respective homes within their agencies and identified areas of needed improvement. FC&A programs staff completed a tips packet for RFP agencies to provide guidance for the trends identified in the RFA analysis and the most recent Quality Assurance (QA) reviews. The information included examples, guidance, and step-by-step instructions for agency leadership to utilize in shared learning activities for improving practice. This packet was provided to all agencies on 3/28/19. The information included:

- *RFA Assessment Tip Sheet* – tips for assessing CW history, criminal history, references and information in the RFA;
- *RFA Interview Tip Sheet* – information about the purpose of the RFA and tips for conducting interviews during the RFA;
- *Records Check Guide* – guide for completing the Records Check Documentation form for all resource household members, which was updated 2/8/19 to reflect the change in no longer requiring printouts of public searches;
- *Example Records Check* – example of a completed Records Check Documentation form;
- *RFP Addendum Tip Sheet* – tips for completion and approval of addendums;
- *Exception Tip Sheet* – tips and example for completion of the Request for Exception to Resource Requirements;
- *Resource Alerts Question & Answers (Q&A) for RFP* – for leadership to use in discussions regarding resource alerts; also includes the RFP resource alert protocol;
- *CWS Numbered Memo 18-09 Documenting Resource Contacts* – Numbered memo regarding resource alerts;
- *RFA Review Tool Guide* – tips for completion of the RFA Review tool prior to approval of a resource or as a case review; and
- *RFA Review Tool* – blank tool from 8/15/18.

The finalized RFA forms were released in September 2018, and provided to contractors for use beginning October 2018. Quarterly RFA contractor meetings are held to address questions and concerns, and to ensure clarity and consistency in the assessment process of resource homes.

In October 2018, annual update and reassessment forms were released for use, after the development of the annual update process and revision of the reassessment process and guidelines. The revision's purpose was to update guidelines and expand the assessment of ongoing protective capacities to ensure the safety of children placed in resource homes. FC&A programs staff provided *Annual Update and Reassessment* training between January and March 2019, for all Resource and RFP staff responsible for writing, reviewing, or approving annual updates or reassessments. The training was also offered to therapeutic foster care (TFC) contractors and tribal partners. The training objectives were to assist staff in assessing ongoing protective capacities, identifying any family supports or needs that are lacking in the home, and ensuring the family's ability to provide safety and well-being for children placed in the resource home. This information will be incorporated into training for new Resource and RFP staff and will be offered on an ongoing basis.

FC&A programs staff provided *FC&A Policy Update* training between November 2018 and January 2019, for all Resource and RFP staff. The training provided staff with information regarding changes to foster care and adoption policy, new protocols, and new forms. An updated records check guide and information about assessing and documenting criminal and CW history was also included in the training.

Overfill requests continue to be reviewed and approved at an elevated level. The assigned Resource specialist gathers information regarding the child, resource family, and family unit as a whole to assist in assessing the situation. When the request is for seven total children in the foster home, the FM reviews and makes an approval decision. When the request is for eight or more children in the foster home, the FC&A field deputy director and the regional deputy director

review and make an approval decision. When a resource home is overfilled, Resource staff and the child's assigned CW specialist continue working to make sure families are supported and the safety and well-being needs of children and families are addressed. Overfilled resources are tracked for evaluating if supports are in place when necessary to aid the resource family. FC&A programs staff was previously responsible for completing a monthly statewide report of overfilled resources, including any updated supports or action steps for ongoing monitoring. On a statewide level, ensuring support plan accountability proved to be difficult. In November 2018, the report's completion and tracking of support plans for overfilled resources shifted to the administrative staff assigned to each field manager. The responsibility of monitoring support plans for supported foster homes was shifted to the RFP agency directors with the expectation that Child Welfare Services (CWS) may request verification and/or documentation at any time. This reassignment of duties allows for more accountability at the local level and includes managerial oversight to ensure appropriate supports are established and modified as needed to ensure child safety in the resource home. Overfilled resources are not a common factor found when MIC occurs; therefore, the elevated approval process and ongoing monitoring process appears to be effective in reducing the likelihood of MIC occurring.

To assist staff in assessing and remediating concerns in a resource home, *Assessing Concerns in Resource Homes* training was added to the required Level II curriculum for Resource staff. Both FC&A staff and RFP staff received this training in 2017, but it is now a required training for all new Resource and RFP staff. The training is also offered to any staff that requests the training or needs a refresher. The first Level II session was completed in January 2019, and is offered to Resource and RFP staff on a quarterly basis. This training develops and enhances Resource staff skills in determining the appropriate level of intervention required when concerns are present in a foster home, including addressing policy violations, and developing and monitoring WPCs.

In the previous reporting period, FC&A leadership worked with KIDS to develop enhancements to assist when an issue or concern in a resource home requires follow-up or ongoing monitoring. In September 2018, *CWS Numbered Memo 18-09 Documenting Resource Contacts* was released and provided to all CWS and RFP staff. The memo provided instructions on documenting and tracking issues or concerns in the resource home identified by Resource staff or the child's assigned CW specialist. The protocol took effect on 9/17/18. This documentation, or resource alert, increases communication between programs when concerns in a resource home arise and ensures the continued safety of children placed in the resource home. When an issue or concern is identified by Resource staff or the child's assigned CW staff at any point during the approval process or after the home was approved and open, a resource alert is entered to notify all assigned staff of the need for ongoing monitoring. Ongoing monitoring of issues or concerns includes communication between assigned staff prior to initiating monthly contacts, and discussion of the resource alert during a screen-out consultation or 10-day staffing when a referral is received for the resource home.

- When an issue or concern requiring ongoing monitoring is identified by Resource staff during the initial kinship approval, it is documented in the *Initial Kinship Safety Evaluation and Approval* document.
- When an issue or concern requiring ongoing monitoring is identified by Resource staff during the resource approval process, it is documented in the *RFA Review* tool.

The *Initial Kinship Safety Evaluation and Approval* document and the *RFA Review* tool include identification of items currently requiring action or follow-up; however, not all issues or concerns are documented as a resource alert. The nature of the issue or concern and necessity of ongoing monitoring are critical factors in determining if a resource alert is appropriate. The *Initial Kinship Safety Evaluation and Approval* and the *RFA Review* tool were slightly modified to clarify where to document information requiring ongoing monitoring and notifying staff that a resource alert must be added in the KIDS resource. The modified document and tool were provided to FC&A and RFP staff on 9/12/18.

In November 2018, a KIDS enhancement further improved resource alert notification and tracking. This includes initiation and resolution of a resource alert within one contact. The enhancement also included an automated alert to the assigned Resource staff, as well as to all CW staff with children placed in the home, when the issue or concerning information is entered. Each KIDS user has the ability to see the number of unviewed alerts and total alerts for the

children or resource families on their workloads. Resources with these contact purposes generate to the Resource Homes with an Open Resource Alert Issue YI102 report for monitoring by Resource staff and CW staff with children placed in the home. The report is emailed monthly with an expectation that field managers, supervisors, and RFP agency staff use the report as a management tool to track open and resolved resource alerts.

To promote the transfer of learning (TOL) and embed resource alerts into practice, a communication plan was prepared by FC&A leadership. A weekly discussion question was disseminated to all Resource staff, including RFP directors, originating from the FC&A field deputy director. The first discussion question was sent on 9/25/18, regarding Resource Alerts and continued for eight weeks, with the last weekly discussion question sent to staff on 11/19/18. A booster question was then disseminated to staff on 1/2/19. Resource alerts implementation included information sharing during leadership and supervisory meetings in September and October 2018. The information was also incorporated into *Assessing Concerns in Resource Homes* and *Supervisory Framework* training.

Resource alert information was provided to RFP directors in July 2018, to allow them time to prepare their staff. RFP protocol, which mirrors Child Welfare Services (CWS) protocol, was distributed to all RFP agency directors on 9/10/18, with instruction that resource alerts would go into effect 9/17/18. All agency partners trained their staff regarding the resource alert protocol, which is recorded by sign-in sheets. Resource alerts were added to the agenda for the directors meeting held on 10/17/18, and allowed for follow-up discussion and feedback on the usage of resource alerts.

As part of ongoing evaluation of new processes and practice implementation, FC&A leadership continually reviews the implementation of resource alerts and feedback from field staff. In June 2019, FC&A programs staff explored KIDS enhancements and edits for resource alerts. Enhancement or edits needed include the ability to specifically track ongoing monitoring, generation of an automated alert to newly assigned staff upon case transfer or a new child being placed in the resource home, and the inability to close a resource with an unresolved alert. The anticipated release date for these enhancements is May 2020. Additional details regarding the resolution of a resource alert was requested to be included on the Resource Homes with an Open Resource Alert Issue YI102 report. This includes the narrative details for the basis of a resource alert closure.

Following introduction of the resource alert protocol, the number of new resource alerts and resolutions steadily increased. On 2/1/19, 79 resource alerts were open and 18 resource alerts were resolved. On 7/1/19, 148 resource alerts were open and 95 were resolved. This point-in-time data indicates positive trending in the usage of resource alerts. The increased usage of alerts represents improved, proactive practice in addressing potential safety concerns and/or risk factors identified in a resource home. This effort is to ensure the safety of children and further prevent MIC. Common anecdotal risk factors requiring ongoing monitoring might include, but are not limited to, history of substance abuse, increased family stress, individuals identified as unsafe potentially having access to the custody child, unclean or hazardous home environment, and criminal action taken against a resource parent that does not result in automatic closure. In addition to increasing and improving communications between Resource staff and each child's assigned CW staff, resource alerts improve support for resource families. As part of this enhanced ongoing monitoring process, increased communication and addressing the needs of a resource family, provides a positive customer service experience and furthers efforts to retain resource families. Resource alerts are highlighted in the MIC Level 2 training.

In November 2018, *CWS Numbered Memo 18-03 Placement Assessment Conversation* was released and provided to all CWS and RFP staff. The memo referenced the need for better communication to make the best placement decision possible and ensure the resource family has the necessary information and support to provide care for a child placed in their home. The memo established protocols and guidance for documentation of placement assessment conversations between an assigned Resource specialist and the child's assigned CW specialist prior to placement, when possible. The Resource Information Sheet (RIS) guides the placement assessment conversation to discuss the family's strengths, history, and needs. The memo instructs that a thorough conversation is necessary with regard to the resource home's history requiring further monitoring, WPCs, injury alerts, and resource alerts. The placement assessment conversation also includes information about the child considered for placement, such as family information, siblings, visitation,

reason for CWS' involvement, special needs, personality, strengths, behavior, and current services. The family is better able to ensure safety when pertinent information about the child is shared. The assigned Resource specialist and child's assigned CW specialist also discuss any support the family may need to better meet the child's needs. When the placement assessment conversation is unable to occur prior to placement, the conversation takes place within two-business days. RFP agency staff does not have direct access to the RIS; therefore, it is sent to the RFP agency when a foster home they support was identified for a specific child. The process as outlined above remains the same for RFP agency staff and supported foster homes. Placement assessment conversations are highlighted in the MIC Level 2 training.

In previous reporting periods, overdue annual updates and reassessments were determined to be a barrier to reaching permanency goals, assessing safety timely for children, and identifying needs for families. As a result, FC&A leadership developed a backlog plan to address this issue. Each FM develops his or her own plan to resolve the backlog issue and reports the plan the first Monday of each month to the FC&A field deputy director. The goal is to resolve the backlog, increase expectations, and hold staff accountable. This review process began in January 2019 and shows positive trending on improvements across the state. This model decreased the number of overdue annual updates/reassessments each month, and also ensured the staff assessed child safety more timely, addressed any needs for the child and family, and provided exceptional customer service to resource families. CWS believes that each of these strategies will increase placement stability, timeliness to permanency for children, and decrease MIC.

FC&A programs staff provided the annual *RFA Update* training in May and June 2019. This training is for RFA contractors and RFP staff responsible for writing, reviewing, or approving RFA's. The training was also offered to the Therapeutic Foster Care (TFC) contractors and tribal partners. The training objective was to provide information to enhance the RFA's quality and the applicant(s)' initial assessment process. Topics covered in training include, but are not limited to: assessing protective capacities of resource parents, MIC statistics, resource alerts, enhanced communication with CWS, and assessment of criminal and CW background information. A resource book was created and provided to all participants. The resource book included information about the kinship and traditional resource approval process, Resource Family Model, numerous policies related to safety, RFA example sections, and publications developed to support resource parents. As part of this training, all participants are required to complete the Foster Child's Bill of Rights online training and MIC online training.

Over the previous reporting periods, the FC&A QA team was established and began conducting resource reviews. To ensure consistent reviews and to more accurately compile data, an RFA review instrument, focused on the approval process, was developed with input from the CWS CQI team. This instrument reviews recently approved samples of traditional, kinship, and adoption resources. During the development of the approval review instrument and the QA process, the QA team met regularly to ensure the quality and consistency of reviews, as well as discuss any needed revisions to the instrument. The final revisions were completed in October 2018. The QA team completed four training reviews to ensure team consistency and quality reviews.

An additional review instrument was developed in October 2018, with input from the CQI team. The Ad Hoc instrument was retitled the Comprehensive Resource Review Instrument to reflect the scope of information reviewed. The Comprehensive Resource Review Instrument encompasses a review of the initial approval process and any ongoing work with a kinship, foster, or adoptive family. This instrument is also utilized for supported resource reviews and addresses differences in obtaining information from the RFP agencies. This comprehensive instrument also allows for ad hoc reviews focused on a specific issue or concern to be conducted by gathering information in the corresponding section of the instrument. The *Tallgrass Review*, an ad hoc review of 20 resources for an RFP agency, was completed in October 2018 and was followed by a debriefing in November 2018, with the agency and the assigned liaison. An ad hoc reviews' purpose is to fulfill requests made by leadership to develop a better understanding of the overall comprehensive quality of fieldwork and practice.

The QA team completed 16 face-to-face TOL debriefings in discussions with FC&A field staff between November 2018 and January 2019. Each debriefing was based on the information obtained during the review process and focused on opportunities for practice improvement. The QA team also met with several RFP agencies following the review of various foster homes to discuss strengths and any identified trends. On 2/21/19, the QA team modeled debriefing of a review tool to FC&A management. Field managers then began debriefing completed review tools with applicable Resource staff to create a feedback loop, to improve practice, and to provide accountability. Moving forward, the QA team will complete debriefings by request with the approval of the QA program supervisor.

The QA team presented the *Kinship Review Summary Report* to FC&A management in February 2019, for TOL regarding practice concerns and practice trends for kinship resources based on the review conducted July – September 2018. The issues identified for training were criminal and CW searches and documentation, the need for policy exceptions and how to complete the form, identifying areas needing follow-up in the RFA, and completing addendums. Information regarding criminal and CW searches and documentation, as well as policy exceptions was presented to all Resource and RFP staff as part of *Policy Update* training from November 2018 through January 2019. FC&A programs staff developed a packet of best practice tips and guidance that address the identified areas of improvement. The packet was distributed to all Resource staff on 5/7/19. Furthermore, CWS is reviewing its practices concerning the retrieval of archived CW records and the timeliness of resource approvals to improve quality, efficiency, and customer service.

The QA team and FC&A programs team met on 3/22/19 to collaborate and create a feedback loop regarding QA reviews. The QA team explained the resource review process, tools utilized, and overall findings of the reviews. After discussion of criminal and CW searches and documentation, the decision was made to conduct a Training of Trainers (TOT) for completing records searches. Each FM and Recruitment field administrator will identify two staff to attend training with programs staff. The materials for training are developed by programs staff and provided to field staff for use within their region. A TOT allows for consistency in the regional staff training. The TOT will be provided in the summer of 2019. Future discussions will be held regarding the developing of online records check training for Resource staff. The QA team and FC&A programs team are to meet on a quarterly basis to discuss review findings, trainings needs, and policy or procedure revisions at a programs level.

In May 2019, the QA team identified a need to conduct resource approval reviews on a regional basis, rather than statewide. Regional reviews allow for a better understanding of strengths and areas of staff development. Regional reviews also permit the QA team to review a larger sample of resource approvals from a specific group of staff and complete a debriefing with the supervisors and field managers. Field managers debrief the review tool with applicable resource staff to ensure TOL. In May 2019, the QA team began resource approval reviews in Region 3. A debriefing was held in June 2019 and included the QA team, Region 3 supervisors, field managers, and FC&A programs staff. The debriefing was beneficial and allowed interaction between programs and field staff to clarify information regarding the results and discuss training needs. FC&A programs staff will be in attendance at all regional debriefings to offer support and receive feedback from field staff.

The QA team will continue to review a random sample of newly, approved kinship and traditional foster home approvals from one region each month. The QA team will continue to utilize the Resource Approval Review instrument in completing regional reviews. The QA team will conduct a training review in July 2019 to ensure continued consistency in reviews. The QA team will review a random sample of supported resources on a quarterly basis. CWS will establish a baseline of regional review data that can then be compared to findings in subsequent regional reviews. The qualitative data provided to FC&A leadership will determine any additional next steps for practice improvement. FC&A leadership will continue to evaluate the progress and make adjustments as needs are identified. While the QA team continues to review resource approval quality, there was some confusion regarding the MIC team and FC&A QA team conducting a joint review. The intent is for the two teams to jointly develop a communication plan of how CWS staff in both programs can share practice strengths, practice issues, and emerging trends identified in all QA reviews. The MIC team and FC&A QA teams will not both review the approval of foster homes but rather, the FC&A QA team will share emerging trends from their reviews of newly approved homes and the MIC team will ensure that the MIC strategies

consider those findings in continued implementation. The MIC team will also share trends identified in unsubstantiated and substantiated MIC case reviews. Jointly, both programs will decide if additional efforts to reduce and prevent MIC are needed, as well as continuing to strengthen the home approval processes.

MIC Expanded Strategies

A steady decrease in MIC in foster care occurred over the past three reporting periods. To continue that positive trending and maintain the momentum of MIC reduction, practice improvements in all areas remain a high priority for CWS. The MIC leadership team maintained regular monthly meetings with good attendance from members. Meetings continue to focus on improving CW practices, specifically the known contributing factors to MIC. Another focus of the meetings includes the continued qualitative reviews and TOL occurring in each district. Implementation of MIC reduction and prevention processes, such as case reviews, case analysis, and regional action plans, specific to the needs of each region, continued during this reporting period. Each of those processes and the progress for this reporting period are detailed below. The regional MIC teams continue to meet at least every other month to discuss statewide and regional prevention strategies, to present MIC data and trends within the districts, and to discuss ongoing implementation efforts. As detailed in the previous reporting period, the statewide MIC leadership team will continue to meet monthly until the MIC Expanded Strategies are fully implemented and operating as intended, as determined by the MIC leadership team. When this is accomplished, the statewide MIC leadership meetings will change to quarterly.

MIC program staff continue to aid the field and regional MIC teams in identifying system strengths and needs, in providing ongoing analysis and evaluations of ongoing performance, and in collectively making adjustments to implemented strategies as needed. MIC program staff continues to review all substantiated referrals in a family-like setting as well as a random sample of 10 unsubstantiated referrals selected by the Co-Neutrals, eight in a family-like setting and two in congregate care. Beginning January 2019, those reviews were sent to each involved district director and field manager to increase understanding and communication on the reviews at the regional and district levels. Additionally, a summary of MIC trends, based on the substantiated program staff reviews, was presented to the executive team on 6/6/19. Each region's MIC lead and regional director was also provided with another copy of the specific MIC reviews highlighting the trend reports case examples. The specific MIC reviews were also provided to the Foster Care and Adoptions leadership team on 6/6/19. This concrete information sharing aids in stimulating an ongoing process for TOL specific to each region and district.

Case Reviews

To enhance practices at the regional and district levels, district directors continue monthly reviews of two substantiated and two unsubstantiated family-like setting referrals from the previous month within their district when enough are available for review. The objective remains for leadership staff to be able to identify contributing MIC factors and trends within a district to monitor if specific regional strategies are reducing MIC and having the intended impact. The *District Director Review Tool* and the *Field Manager Review Tool* are used to capture MIC contributing factors present in field practice as identified by the monthly case reviews. The tools also track TOL efforts that stem from the reviews. Review trends were tracked within each region and the first anecdotal reports on those reviews were produced by each region.

Case Analysis

MIC regional leads began the process of presenting a case analysis to their regional staff between February through June 2019. In all but one of the regions, the MIC regional leads worked alongside their regional district directors and field managers to present an MIC case analysis to all of the region's leadership team. Upon completion, TOL focuses on the opportunities to enhance risk assessment skills and prevention strategies for all staff going forward. Discussions also include any identified practice strengths. All regions completed the case analysis process for this last quarter; however, Region 3's case analysis was not implemented by the regional MIC lead. The statewide MIC lead partnered with another district director from the region to demonstrate the case analysis process and all of Region 3's leadership was present. One RFP agency participated in the regional case analysis process, but to-date RFP agencies have not yet completed their own case analysis. Instruction was for all agencies to complete a case analysis by 10/1/19.

Regional Implementation

Between January 2019 and March 2019, each region developed and finalized a targeted strategic action plan to improve practice and decrease the presence of contributing MIC factors. Each region's targeted strategy specifies an action that is anticipated to reduce MIC and aligns with a contributing factor specific to the region. Each region's strategy includes a specific action step and monitoring strategies so that regional staff can eventually determine the action step's impact on practice. The goal is overall improvement in practice in relationship to MIC contributing factors. Attention to the contributing factors is expected to reduce MIC incidents and increase CWS staff awareness and the likeliness of recognizing MIC risks before incidents occur. Progress on the strategic action plans can be found in ***Regional Expanded Strategies***.

Each regional MIC lead produced a report narrating their own analysis of the trends and outcomes from the case reviews, case analysis, and the strategic action plans. Findings from all reviews and case analyses is to be considered in coordination with the findings from the Child and Family Services Reviews (CFSRs), program reviews, permanency safety consultation (PSC) reviews, placement stability data, and permanency data to produce quality responses in policy updates and continued trainings. Sharing these report findings creates a feedback loop that can be implemented using those findings to make changes to trainings, policy, and/or MIC activities, as needed. The Office of Performance Outcomes & Accountability has agreed to assist the MIC strategy lead with a more thorough and sound analysis of the monthly case reviews. This analysis process is currently underway and is expected to be complete by October 2019.

Resource Family Partners

The RFP agencies' participation in the RFA analysis aids agencies in identifying areas needing improvement. Also in keeping with the expanded strategy efforts, the previously explained Quarterly RFA contractor meetings help address ongoing questions and concerns, thus ensuring clarity and consistency in the assessment process of resource homes for RFP agencies. Trend analysis based on the RFP home case reviews is somewhat difficult for two primary reasons. First, the number of reviews to conduct on RFP homes is much smaller with only 42 MIC referrals on RFP homes eligible. Secondly, there are only 14 RFP agencies so that number is even smaller when divided by agency. For these reasons, a longer analysis period is required for fruitful trend data to be reflected in the monthly reviews. Of the 14 RFP agencies, only 10 of them had any eligible MIC reviews since implementation began. The RFP review process begins with the RFP MIC lead sending the agency a list of any homes/cases that require review. To-date, 14 out of 42 reviews were completed and returned to the RFP MIC lead. From March to June 2019, review compliance is as follows:

- Angels: 3 out of 9 reviews complete
- Circle of Care: 1 out of 6 reviews complete
- Home Based Services: 1 out of 1 reviews complete
- Oklahoma Families First Inc.: 0 out of 3 reviews complete
- St. Francis: 0 out of 1 reviews complete
- Sunbeam: 2 out of 2 reviews complete
- Tallgrass: 0 out of 4 reviews complete
- TFI Family Connections: 6 out of 8 reviews complete
- Wesleyan: 0 out of 7 reviews complete
- Anna's House: 1 out of 1 reviews complete

No RFP case analyses conducted by the RFP agencies. One RFP agency attempted to participate in Region 3's case analysis although it was not one of the successful case analysis presentations. The MIC statewide lead met with the RFP agency directors on 4/10/19, to explain MIC expanded strategies implementation. All agencies were also invited to participate in the Performance Improvement Plan (PIP) Training 3 Safety through Supervision to learn the proper process for case analysis.

Predictive Analytics

As of January 2019, the predictive analytics project was discontinued. The MIC program team and KIDS team analyzed the predictive model and found no correlations between MIC incidents and children generating the highest predictive

scores. No valid predictions were observed through cross-reference analysis. Given that this predictive model is not producing actionable results with any validity, it is not functional and cannot be built into CW operations at this time.

Supervisory Framework

The Supervisory Framework series training, part of Oklahoma’s Program Improvement Plan (PIP) focused on best practices, quality worker contacts, effective multi-program communications, and supervisions strategies, is still being implemented statewide. The Safety through Supervision Framework training began implementation in August 2018, and is fully implemented in Regions 1 and 3. The training is currently ongoing in Region 5 with an expected completion date of July 2019. Region 2 receives Safety through Supervision Framework training 8/6/19 through 11/7/19. Region 4 will receive Safety through Supervision Framework training 1/7/20 through 4/9/20. Each of these trainings is followed up with individual TOL between leadership and the PIP lead that lasts for 90-calendar days following each region’s Safety through Supervision Framework training. TOL is currently underway in Regions 3 and 5. Guidebooks that highlight many of the MIC prevention processes are provided to all CW staff attending this training series and eventually will be combined with the current Child Safety guidebooks and updated annually.

Screen-Out Consultations

Screen-out consultations continue in a positive direction with a steady increase in the number of screen-out consultations completed. The previous report from period October 2018 through March 2019 indicated that the overall percentage rate for compliance in conducting screen-out consultations was 97.7 percent. That rate increased this reporting period to 99.3 percent as noted in Section 2, Table 1.1-3. The screen-out consultation process was added into KIDS in February 2019. The screen-out consultation guide is still presented to all CW staff through the Supervisory Framework PIP trainings. Regions 1, 3, and 4 have already received this training. In January 2019, MIC program staff began another screen-out consultation review looking at its quality and effectiveness. The actual data was reviewed and compiled into a spreadsheet for further analysis. That trend analysis is currently underway and a screen-out consultation report is currently in development; the analysis and report is expected to be complete by September 2019.

Training

To further prevent and reduce MIC incidents, a second-level online training course was developed that requires mandatory participation for all CW specialists I – IV as well as RFP staff. The MIC 2 training was released to CWS on 7/1/19. The training launches to RFP staff on 8/1/19 through the contractor’s learning management system portal. The later launch is for better completion tracking and to minimize logistical log-on access issues that were problematic in the first MIC training. The MIC 2 course focuses on how to prevent MIC through quality placement assessment conversations; how to thoroughly assess protective capacities for children in care; and how to develop quality support plans and WPCs. This training explains the proper uses for injury alerts and resource alerts and also focuses on how to obtain quality information from monthly and quarterly contacts. It is intended for specialists and supervisors assessing safety during ongoing cases in homes and facilities; however, the training is open for all CWS staff. Notice for this training was sent out by email to all CWS on 7/1/19. These subsequent MIC trainings were developed with other strategy leads, specifically the leads of Core Strategy MIC-Facilities, Core Strategy Placement Stability Improvement, Core Strategy Resource Home Recruitment-Foster Care, and Core Strategy Targeted Permanency Consultation. To help field staff apply what this course offers to the actual work they are doing and relate it to their specific cases, a separate TOL session is assigned to supervisors of ongoing specialists beginning 8/1/19. This TOL is a guided group style learning session that provides supportive and interactive engagement between the individuals on each team/unit. The TOL session is accompanied by the ***MIC Training – Transfer of Learning Group Case Learning Guide*** for supervisors to use for preparing a setting in which they can engage and support specialists in implementing the learned concepts into practice as well as to help reinforce understanding of concepts. ***MIC Level 2 Training – Introduction, MIC Level 2 Training – Module 1, MIC Level 2 Training – Module 2, MIC Level 2 Training – Module 3, MIC Level 2 Training – Module 4, MIC Level 2 Training – Module 5, and MIC Level 2 Training – Module 6*** are attached.

The first online MIC training is still required by staff who onboard into CWS and is a part of CORE. An analysis of the booster questions from the first online MIC training was conducted 6/28/19 and received by the MIC statewide lead on

7/1/19, **MIC Training 1 Booster Analysis**. The results were positive overall: 2,938 staff completed the Boosters out of the 4,169 employees who started the MIC 1 modules for a 70.5 percent completion rate. Three Booster sets were offered and the first Booster set bolstered a 95.3 percent completion rate. The second Booster set yielded a 90.1 percent completion rate while the third Booster set dropped to 85.3 percent completion rate. The most significant outcomes were found within the qualitative analysis from the third Booster set. The sample set revealed that the top three things staff do differently in their practice in support of MIC efforts was, improved communication, quality, and assessing safety. These qualitative questions also showed that 71 percent of the sample encountered practices which work against the MIC efforts and those practices were related to communications, assessing safety, and unscheduled visitations. Seventy percent of the sample set reported improved communications with program staff. Seventy-one percent of the responses indicated there is not a responsibility presented in the MIC training that is challenging to perform. Another question in the third Booster set asked staff to report what they think might help impact MIC positively and if there was a practice or policy they thought might help. The top three common answers were:

- consistent communication/be proactive/continued assessments/be more observant;
- more accountability; and
- more communication between programs.

The MIC efforts known as contributing factors are indeed what staff also recognizes in their practices to be issues needing improvement. More importantly, staff recognizes these areas as necessary for improvement and that they report taking action in these top areas since receiving the MIC training. It is expected that the launch of the MIC 2 training will continue to bolster conducive practices to MIC prevention and thereby, MIC reduction.

CONGREGATE CARE

Core strategy initiatives designed to impact MIC in higher-level settings continue. Current Semi-Annual Report data indicates an increase of two MIC victims in congregate care when compared to data from the last report. Despite this slight increase, the overall MIC in congregate care remains significantly lower when compared to other past semi-annual data sets. Current semi-annual data indicates a decrease of 34 MIC victims when compared to the 69 victims in the April 2017-March 2018 semi-annual data set and a decrease of 25 MIC victims when compared to the 60 victims in the October 2016-September 2017 data set. This appears to be indicative of positive sustained trending related to this measure. Additionally, 15 of the total 35 MIC incidents in congregate care during the current reporting period occurred in resources of facilities whose contracts were terminated or are no longer providing services. Of the five group home or shelter level resources identified as in need of heightened monitoring based on data from the 12th, 13th, 14th data periods, two had MIC victims during the 15th data period. Action was taken with regard to one of these resources to not renew their contract and as a result, the resource is no longer providing services for CWS. The other resource is currently making marked progress in completion of their action plan as part of the heightened monitoring process. There were no MIC incidents in hospital settings during the 12th, 13th, 14th data periods resulting in no resources identified as in need of heightened monitoring at this level of care during the current reporting period.

As detailed in previous semi-annual reports, the three major areas of focus for reducing MIC in OOH care in higher-level settings consists of: heightened monitoring of those facilities identified with the highest number of MIC incidents; policy, practice and technical enhancements; and contract enhancements.

Children with Substantiations of Abuse or Neglect while in Out-of-Home Care OCA Heightened Monitoring Facilities (HMF)								
Heighten Monitored Period	Closure Month	Group Homes / Shelters						Total
		Group Home/ Shelter 1	Group Home/ Shelter 2	Group Home/ Shelter 3	Group Home/ Shelter 4	Group Home/ Shelter 5	Group Home/ Shelter 6	
12th Data Period	Apr-2018							0
	May-2018							0
	Jun-2018							0
13th Data Period	Jul-2018			1				1
	Aug-2018		1					1
	Sep-2018							0
14th Data Period	Oct-2018				2			2
	Nov-2018					1	1	2
	Dec-2018							0
15th Data Period	Jan-2019	1		4				5
	Feb-2019			4			1	5
	Mar-2019							0
TOTAL		1	1	9	2	1	2	16
<i>Data Source: KIDS Data Measure 1.1 MIC; Run Date: 5/31/19 -Numbers indicate children with substantiations while in DHS custody and placed at Facility. Substantiations for children in DHS custody only.</i>								
11th Period Data ID'd as HMF		12th Period Data ID'd as HMF		13th Period Data ID'd as HMF		14th Period Data ID'd as HMF		

Section 2, Table 1.1-5

Children with Substantiations of Abuse or Neglect while in Out-of-Home Care OCA Heightened Monitoring Facilities (HMF)			
Heighten Monitored Period	Closure Month	Hospitals	
		Acure/ RTC 1	Total
12th Data Period	Apr-2018		0
	May-2018		0
	Jun-2018		0
13th Data Period	Jul-2018		0
	Aug-2018		0
	Sep-2018		0
14th Data Period	Oct-2018		0
	Nov-2018		0
	Dec-2018		0
15th Data Period	Jan-2019		0
	Feb-2019		0
	Mar-2019		0
TOTAL		0	0
<i>Numbers indicate children with substantiations while in DHS custody</i>			
11th Period Data ID'd as HMF	12th Period Data ID'd as HMF	13th Period Data ID'd as HMF	14th Period Data ID'd as HMF

Section 2, Table 1.1-6

Note: The color blocking denotes the data period when a facility was identified as requiring heightened monitoring. Data reporting periods are for three months.

Heightened Monitoring

The specific activities and detailed processes on the selection of and the work completed with facilities in need of heightened monitoring based upon thirteen initial data sets were summarized in previous semi-annual reports. This reporting period includes heightened monitoring activities based upon the 14th and 15th MIC data sets.

14th MIC Data Set - October-December 2018

A quarterly heightened monitoring team (HMT) meeting was held 10/5/18 to identify facilities in need of enhanced support through heightened monitoring based on data from October through December 2018. Monthly HMT conference call updates were held 10/3/18, 11/7/18, and 12/5/18. During the monthly calls, action plans were reviewed and updates were suggested based on information from weekly on-site monitoring by Specialized Placements and Partnerships Unit (SPPU) liaisons, bi-monthly visitation by the SPPU program field representative (PFR) assigned to HMT activities, DHS Child Care Licensing, and OCA feedback.

The 14th MIC data set was received January 2019. Review of this data set identified three resources in need of heightened monitoring at the group home and shelter level of care. An initial heightened monitoring meeting was held with the first resource on 1/22/19. A new program assessment did not occur with this resource as the program hired a new executive director in January 2019 in response to a Notice to Comply (NTC) and Written Plan of Compliance (WPC) that outlined the requirement for a change in the program's leadership. As a result, heightened monitoring efforts with this resource were focused on supporting the new leadership in re-building the program into one with a focus on trauma-responsive service provision. To that end, the HMT, in conjunction with the program's leadership, developed a support plan monitored by the HMT for implementation progress. Additional supports provided by SPPU to this resource during this time of transition and redevelopment included a hold on the number of youth placed in the program in addition to staggering referrals for new placements.

An initial HMT meeting was held with the second identified resource on 2/5/19. A program assessment was completed for this resource and the final assessment report was received 3/21/19. Review of the program assessment report and development of the corresponding action plan with this resource occurred 4/10/19. Subsequent to the action plan being developed this resource communicated they may not be willing to engage in the HMT process. As a result, the process was delayed and agreement on finalization of the action plan did not occur until early July 2019. With the plan now agreed upon and finalized, the HMT is evaluating progress towards the plan's completion.

An initial heightened monitoring meeting was held with the third identified resource on 1/31/19. A program assessment was completed for this resource and the final assessment report was received 3/21/19. Review of the program assessment report and development of the corresponding action plan occurred 4/4/19. The HMT is evaluating progress towards the action plan's completion.

15th MIC Data Set - January-March 2019

A quarterly HMT meeting was held 4/15/19 to identify facilities in need of enhanced support through heightened monitoring based on data from January through March 2019. Monthly HMT conference call updates were held 1/2/19, 2/6/19, and 3/6/19. During the monthly calls, action plans were reviewed and updates were suggested based on information from weekly on-site monitoring by SPPU liaisons, bi-monthly visitation by the SPPU PFR assigned to HMT activities, DHS Child Care Licensing, and OCA feedback.

The 15th MIC data set was received April 2019. Review of this data set identified three resources in need of heightened monitoring at the group home and shelter level of care. Initial heightened monitoring meetings were not held with two of these resources since they were already involved in the heightened monitoring process as a result of prior heightened monitoring identifications. A NTC and WPC were issued to one of these resources as a result of concerns for the amount of contractually-mandated individual and group therapy provided at the program. The resource met the obligations outlined in the NTC and WPC and as a result no further contractual actions were taken at that time. Subsequently, additional concerns arose with this provider and action was taken to not renew this resource's contract. The end of service provision to child welfare by this resource took effect 6/30/19. The other resource previously identified as in need of enhanced support through heightened monitoring showed a willingness to engage proactively in the heightened monitoring process and is making significant progress on their heightened monitoring action plan including demonstrating of a nearly forty percent decrease in physical interventions from May to June 2019. An initial heightened monitoring meeting occurred with the third identified resource on 4/26/19. A program assessment was completed for

this resource and the final assessment report was received 6/25/19. A meeting is scheduled for 7/11/19 to develop the corresponding action plan to support and enhance trauma-responsive service provision within the program. Subsequent to the development of the corresponding action plan, the HMT will monitor progress towards completion.

Policy, Practice, and Technical Enhancements

Efforts regarding support for the use of the Assessing Safety in Residential Settings Contact Guide were detailed in prior semi-annual reports. These efforts were further bolstered and supported during this reporting period through the roll out of the annual online MIC Training Module 1 in November 2018 and Module 2 in July 2019.

Utilization of the SPPU Facility Services Plan (FSP) screens and reports in KIDS is ongoing and led to the identification of additional needed enhancements to support SPPU staff's work. These enhancements were brought to the attention of KIDS staff as necessary changes for inclusion in development of the new state automated child welfare information system (SACWIS) to best support the SPPU team's work.

Case reviews, using the substantiated and unsubstantiated case review tools for facilities, continued through this reporting period. Monthly, all substantiated referrals involving youth in DHS custody and placed in CWS-contracted facilities are reviewed along with a random selection of unsubstantiated referrals. Any areas of concern involving SPPU staff practice identified during the completed reviews are followed up on and addressed.

A more comprehensive, informed, and supportive process on all referrals for placement to group homes involved in heightened monitoring and for youth with histories of problematic sexual behavior that includes the development and execution of an individualized safety or support plan began 4/30/18 and continued through this reporting period.

Contract Enhancements

Provider performance report cards, based on data and reports from 1/1/17 to 9/30/18, were shared with D+ and E group home providers previously and included in earlier semi-annual report submissions. **Group Home Provider Performance Report Card D+ and E October-December 2018** and **Group Home Provider Performance Report Card D+ and E January-March 2019** were shared with the D+ and E providers during this reporting period.

Since Managing Aggressive Behavior (MAB) implementation in January 2017, SPPU, through the Trauma-Informed Care Project (TICP) with the National Resource Center for Youth Services (NRCYS), provided MAB supportive services to facility staff to build organizational capacity, support the internalization of the training concepts within each agency, provide direct care staff with competent on-site coaches, and build a statewide trainer network. Efforts in this regard continued throughout this reporting period and are as follows:

MAB Training, Co-Training, & Trainer Development

- Action Learning Set East – 10/12/18
- Action Learning Set West – 12/14/18
- MAB Trainer Certification Course – 12/3/18 through 12/7/18
- Crisis Management Skills Practice Co-trained – 1/30/19
- MAB Direct – 2/6/19 through 2/7/19
- Crisis Management Skills Practice Co-trained – 2/14/19

MAB Trainer Webinars & Newsletters

- Using Data to Inform Practices Webinar – 11/16/18
- Prevention [https://mailchi.mp/ou/quarterly-okticip-mab-trainer-newsletter-2kizfjlw5k-1174157?e=\[UNIQID\]](https://mailchi.mp/ou/quarterly-okticip-mab-trainer-newsletter-2kizfjlw5k-1174157?e=[UNIQID]) – 2/28/19
- Intervention [https://mailchi.mp/ou/quarterly-okticip-mab-trainer-newsletter-2kizfjlw5k-1174777?e=\[UNIQID\]](https://mailchi.mp/ou/quarterly-okticip-mab-trainer-newsletter-2kizfjlw5k-1174777?e=[UNIQID]) – 6/25/19

Additional MAB supportive activities included ongoing technical assistance in multiple formats, new program training and development orientation, creation of a provider shared training calendar, and MAB resource giveaways.

1.2: Absence of Maltreatment in Care by Parents

Operational Question

Of all children served in foster care during the 12-month reporting period, what percent were **not** victims of substantiated or indicated maltreatment (abuse or neglect) by a parent while in Oklahoma Department of Human Services (DHS) custody?

Data Source and Definitions

For the semi-annual report, Oklahoma uses the same logic as Data Element XI. Children Maltreated by Parents while in Foster Care on Oklahoma's Federal Data Profile. This element uses a 12-month period based on the time frame of October 1 through September 30. Oklahoma used the two official state-submitted AFCARS (18B & 19A) files combined with a non-submitted annual NCANDS (Covering AFCARS 18B & 19A periods) file to compute the measure. The NCANDS file used for this report is calculated the same as the file submitted to the federal government, which includes running the data through the official validation tool. The official submission to NCANDS occurs only once annually and is due yearly by January 31, so the NCANDS data is still subject to change until that date.

- This metric measures performance over 12 months and differs from the monthly data collected from KIDS.
- The federal data element requires matching NCANDS and AFCARS records by AFCARS IDs.
- The NCANDS report date and completion date must fall within the removal period found in the matching AFCARS record.
- The federal metric only counts a victim once during the federal fiscal year (FFY), even when a child is victimized more than once in the course of a year. Whereas in the monthly report, a victim is counted for every substantiated finding of abuse or neglect.

The federal data element includes all victims of substantiated abuse or neglect by a parent while in care, even when the reported abuse occurred prior to the child coming into care.

Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2018 through 3/31/2019.

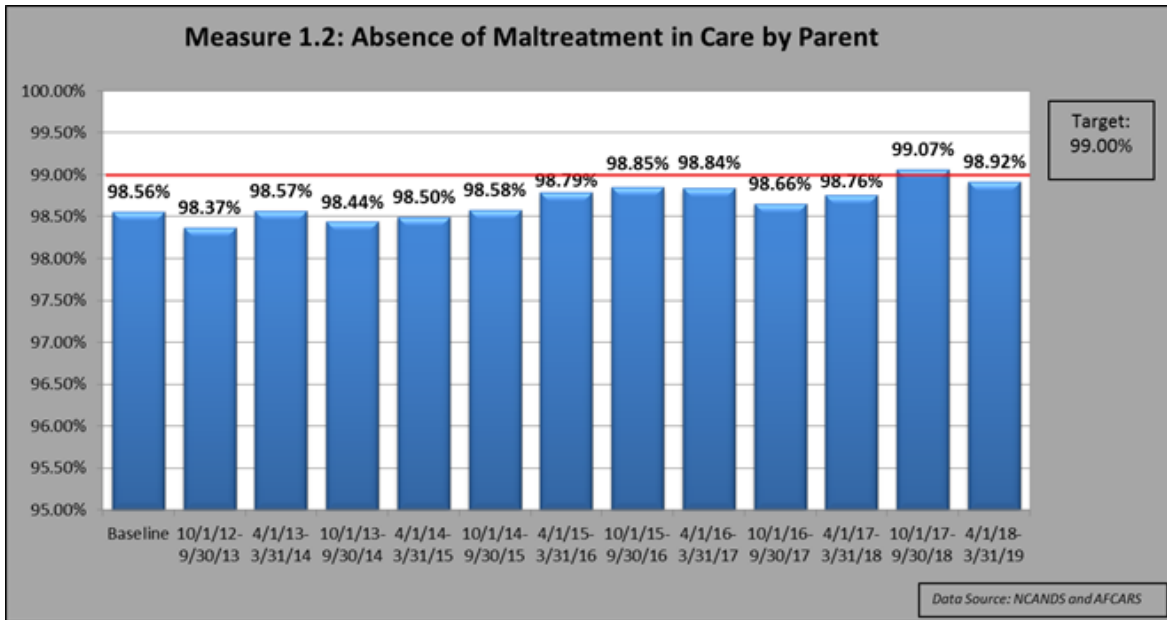
Numerator: The number of children served in foster care from 4/1/2018 through 3/31/2019 that did not have any substantiated or indicated allegations of maltreatment by a parent during that period.

Trends

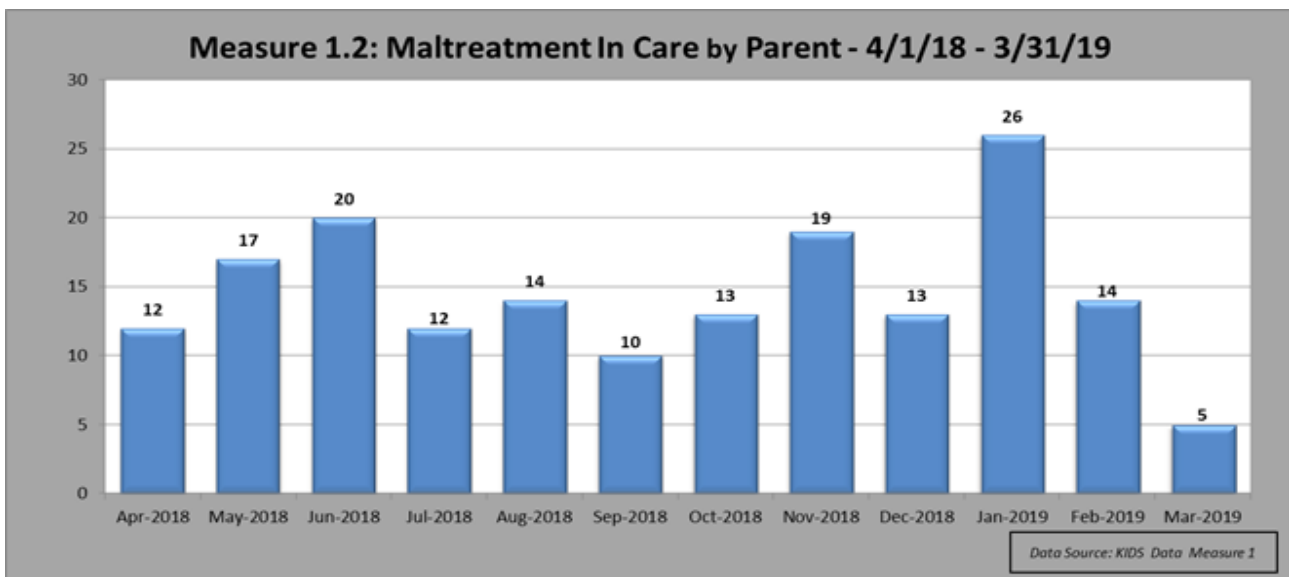
Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2010 – 9/30/2011	All children served from 10/1/2010 - 9/30/2011	12,352	12,533	98.56%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013	14,800	15,045	98.37%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014	15,580	15,806	98.57%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014	16,018	16,272	98.44%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015	16,390	16,640	98.50%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015	16,571	16,808	98.58%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016	16,348	16,548	98.79%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 -- 9/30/2016	16,057	16,244	98.85%

4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017	15,570	15,753	98.84%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017	14,911	15,113	98.66%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018	14,226	14,405	98.76%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018	13,772	13,901	99.07%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019	13,296	13,441	98.92%
Target				99.00%

Section 2, Table 1.2-1



Section 2, Graph 1.2-1



Section 2, Graph 1.2-2

Commentary

Section 2, Graph 1.2-1 is based on the federal indicator for maltreatment in care (MIC) and produces representative information about the incidence of MIC by parents. The data shows that the MIC rate slightly dropped from the last reporting period by 0.15 percent. Even with the slight decrease, Child Welfare Services (CWS) remains above the baseline by 0.36 percent and only 0.08 percent away from the target.

In the most recent reporting period, 98.92 percent of children in out-of-home (OOH) care were not abused or neglected by a parent. Of the 13,441 children served in care during the reporting period, 145 had a substantiation of abuse by a parent. For the reporting period 4/1/18 through 3/31/19, a total of 175 MIC substantiations while in OOH care by a parent was reported in the monthly MIC Pinnacle Plan Measure. The 175 victims were included in 93 separate referrals. In the monthly reporting for the same time period, 80 of these victims were excluded based on the alleged abuse/neglect occurring prior to the child coming into OOH care; however, these victims are still reported to NCANDS.

Of the 175 victims in OOH care maltreated by a parent:

- 67 children were in Trial Reunification (38.3%);
- 37 children were in a Kinship Foster Care - Relative Home (21.1%);
- 25 children were in a child welfare (CW) Foster Family Home (14.3%);
- 20 children were in a Kinship Foster Care Non-Relative Home (11.4%);
- 16 children were in a CW Foster-Supported Home (9.1%);
- 3 children were in a Youth Services Shelter (1.7%);
- 2 children were in a Therapeutic Foster Care (TFC) Home (1.1%);
- 2 children were in a Level B Resource Facility (1.1%);
- 2 children were in a Non-DHS Operated Facility (1.1%); and
- 1 child was placed in a Psychiatric Residential Treatment Center (0.6%).

Children Maltreated in Out-of-Home (OOH) Care by Parent, Excluding Prior Abuse

Section 2, Tables 1.2-2 and 1.2-3 provide an additional view of performance on this measure. Understanding not only the type of setting in which the abuse occurred, but also when the abuse occurred is important. Victims with a substantiation of abuse or neglect that occurred prior to the child coming into care are normally excluded in the monthly reports, but are included in the Pinnacle Plan's Semi-Annual Reports. This means the Semi-Annual Report counts substantiations on abuse and neglect by a parent regardless of when the child in DHS custody reports the abuse. When a child while in DHS custody reported abuse that occurred in his or her parents' home prior to custody, and that abuse was substantiated, this child is currently counted in the MIC 1.2 numbers, even though the abuse and/or neglect did not occur while in DHS custody.

MEASURE 1.2a- CHILDREN MALTREATED WHILE IN OUT-OF-HOME (OOH) CARE BY PARENT- Excluding Prior Abuse														
Report Month	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	% Safe
# in OOHC	9246	9202	9171	9031	9120	9000	8978	8871	8762	8645	8623	8588	9441	99.40%
# Safe in OOHC	9246	9195	9162	9028	9111	8998	8965	8864	8758	8627	8615	8588	9361	
# Maltreated in OOHC	0	7	9	3	9	2	13	7	4	18	8	0	80	
<small># in OOH Care is from the Annual File built from the SEP 2018 and MAR 2019 AFCARS files</small>														
<small># Maltreated in OOH Care is from last 6 month of the FFY 2018 and first 6 months of the FFY 2019 NCANDS Files</small>														
<small>Run Date: June 13, 2019 at 12:24 pm</small>														

Section 2, Table 1.2-2

MIC 1.2 Excluding Prior Abuse by Placement Type		
Placement Type	# Children	% Children
CW FOSTER FAMILY CARE	2	2.5%
CW FOSTER FAMILY CARE - SUPPORTED HOME	7	8.8%
KINSHIP/NON-RELATIVE/CW FOST. FAM. CARE	8	10.0%
KINSHIP/RELATIVE/CW FOST. FAM. CARE	13	16.3%
TRIAL REUNIFICATION	50	62.5%
TOTAL	80	100.0%
<i>Data Source: # in OOH is from the Annual File built from the SEPT 2018 and MAR 2019 AFCARS files. # Maltreated is from the FFY 2019 NCANDS File; Run Date: 6/13/19</i>		

Section 2, Table 1.2-3

Based on the monthly reporting that ended 3/31/19, 80 of these victims would be excluded because the alleged abuse/neglect occurred prior to the child coming into OOH care. Fifteen of the 80 victims are already excluded in the NCANDS report as they are not included in the AFCARS population, leaving 65 additional victims that could be excluded due to reported abuse, which was prior to the child’s removal. If those substantiations were to be excluded in the Semi-Annual Report, the overall number of victims would be reduced to 80 victims, from the originally reported 175 victims, out of a served population of 13,441. This would calculate out to a rate of 99.40 percent safe, which is above the federal standard and above the target for this measure of 99.00 percent. Of the 80 victims abused in OOH care by a parent, 50 victims or 62.5 percent were placed in trial reunification at the time of the MIC.

3.1: Frequency of Worker Contacts

Operational Question

What percentage of the total minimum number of required monthly face-to-face contacts occurred with children who were in foster care for at least one calendar month during the reporting period?

Data Source and Definitions

This measure is calculated using the criteria for the federal visitation measure. However, the measure differs from the federal measure since this measure does not include children in tribal custody.

- The data reflects the total number of required monthly contacts due to children in out-of-home care over the course of 12 months and the number of total required monthly contacts made for those visits.
- Only one monthly contact per month is counted even though multiple visits may have occurred.

Description of Denominator and Numerator for this reporting period

Denominator: The number of required monthly contacts due from 7/1/2018 through 6/30/2019.

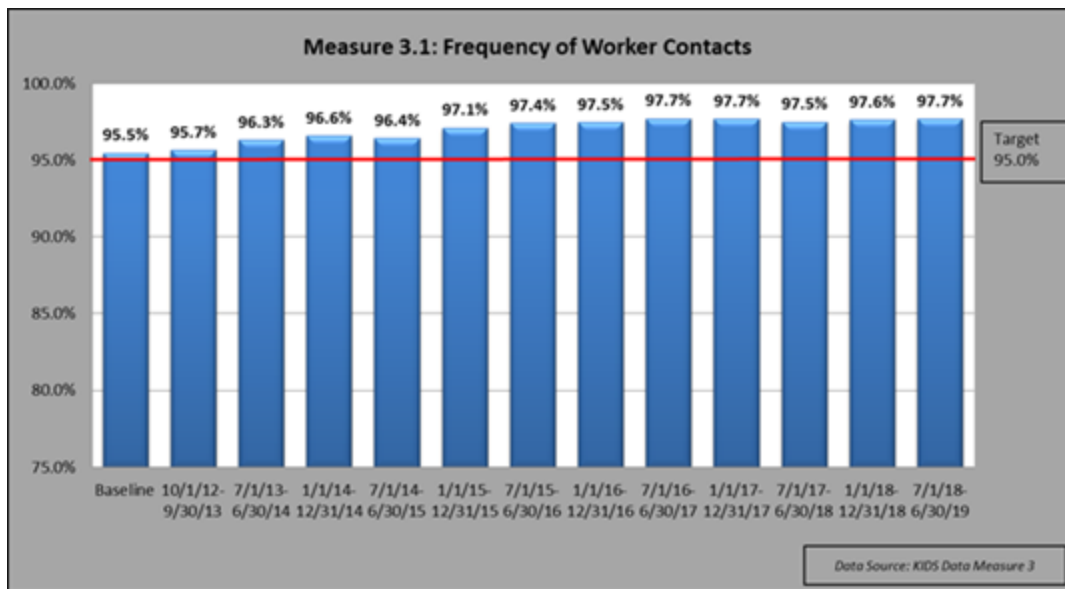
Numerator: The number of qualifying required monthly contacts made.

Trends

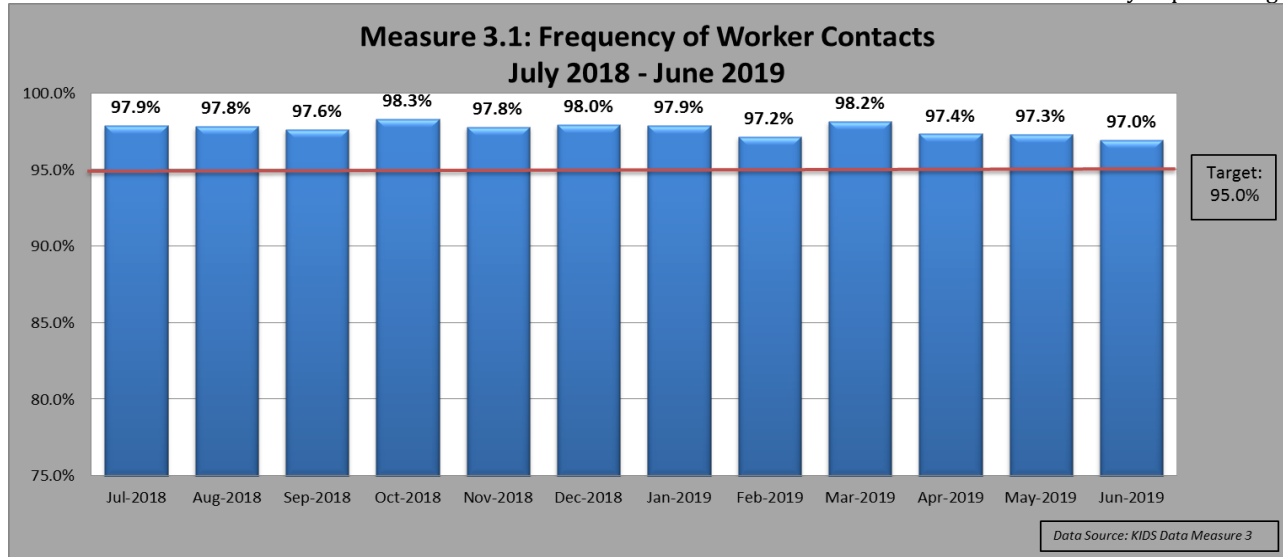
Reporting Period	Population	Numerator	Denominator	Result
Baseline: 7/1/2011 – 6/30/2012	All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012	90,355	94,639	95.5%
10/1/2012 – 9/30/2013	All children due a visit who were in care at least a full calendar month from 10/1/2012 – 9/30/2013	105,868	110,673	95.7%
7/1/2013 – 6/30/2014	All children due a visit who were in care at least a full calendar month from 7/1/2013 – 6/30/2014	118,824	123,343	96.3%
1/1/2014 – 12/31/2014	All children due a visit who were in care at least a full calendar month from 1/1/2014 – 12/31/2014	124,355	128,745	96.6%

7/1/2014 – 6/30/2015	All children due a visit who were in care at least a full calendar month from 7/1/2014 – 6/30/2015	123,596	128,173	96.4%
1/1/2015 – 12/31/2015	All children due a visit who were in care at least a full calendar month from 1/1/2015 – 12/31/2015	121,799	125,417	97.1%
7/1/2015 – 6/30/2016	All children due a visit who were in care at least a full calendar month from 7/1/2015 – 6/30/2016	117,879	120,998	97.4%
1/1/2016 – 12/31/2016	All children due a visit who were in care at least a full calendar month from 1/1/2016 – 12/31/2016	111,659	114,567	97.5%
7/1/2016 – 6/30/2017	All children due a visit who were in care at least a full calendar month from 7/1/2016 – 6/30/2017	106,218	108,704	97.7%
1/1/2017 – 12/31/2017	All children due a visit who were in care at least a full calendar month from 1/1/2017 – 12/31/2017	102,032	104,427	97.7%
7/1/2017 – 6/30/2018	All children due a visit who were in care at least a full calendar month from 7/1/2017 – 6/30/2018	98,321	100,853	97.5%
1/1/2018 – 12/31/2018	All children due a visit who were in care at least a full calendar month from 1/1/2018 – 12/31/2018	94,582	96,870	97.6%
7/1/2018 – 6/30/2019	All children due a visit who were in care at least a full calendar month from 7/1/2018 – 6/30/2019	90,751	92,882	97.7%
Target				95.0%

Section 2, Table 3.1-1



Section 2, Graph 3.1-1



Section 2, Graph 3.1-2

Commentary

The baseline for this measure was 95.5 percent and the target is to sustain 95.0 percent. Over the 12-month period of 7/1/18 through 6/30/19, 92,882 monthly contacts were required and 90,751 monthly contacts were completed which resulted in a rate of 97.7 percent. Performance in this area continues to be above the baseline and exceeds the target.

3.2: Frequency of Primary Worker Contacts

Operational Question

What percentage of the total minimum number of required monthly face-to-face contacts was completed by the primary worker with children who were in foster care for at least one calendar month during the reporting period?

Data Source and Definitions

This measure is calculated similarly to the federal visitation measure. However, the measure only counts visits made by the primary caseworker. In October 2016, for children in trial adoption cases, the monthly contact will be completed by the primary permanency planning worker if the child is being adopted in an identified placement. However if the child is in a non-identified placement, the monthly contact is completed by the adoption worker with a primary assignment. Beginning with the semi-annual reporting period ending December 31, 2015, children who were placed in out-of-state placements will be excluded from the primary worker visitation measure, as these children have an assigned worker out-of-state responsible for monthly visitation.

- The data reflects the total number of required monthly contacts due to children in out-of-home care over the course of 12 months and the number of total required monthly contacts made by the primary assigned worker.
- Only one contact per month is counted even though multiple visits may have been made during the month.
- To be counted as a valid monthly contact completed by a primary worker, the worker who completed the visit must have had a primary assignment at the time of the visit.

Description of Denominator and Numerator for this reporting period

Denominator: The number of required monthly contacts due from 7/1/2018 through 6/30/2019.

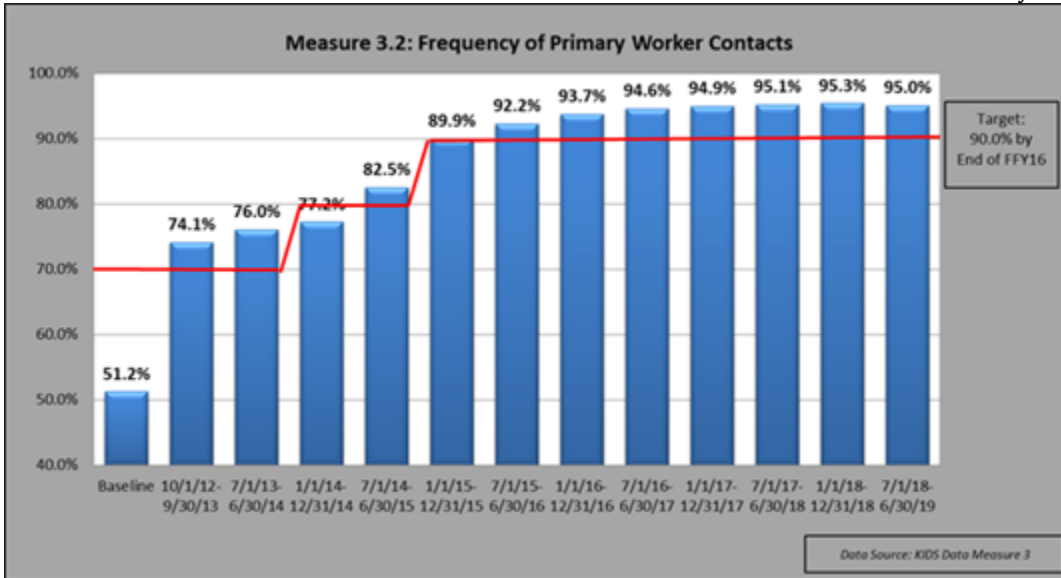
Numerator: The number of qualifying monthly visits made by a primary worker.

Trends

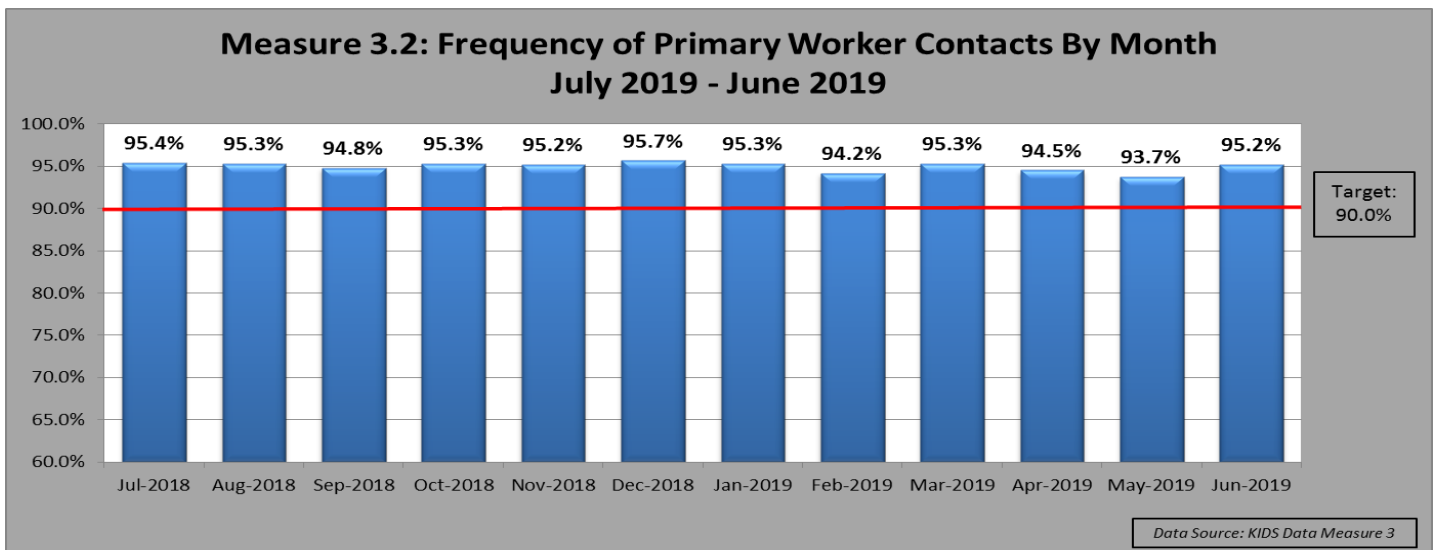
Reporting Period	Population	Numerator	Denominator	Result
Baseline: 7/1/2011 – 6/30/2012	All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012	48,497	94,639	51.2%

10/1/2012 – 9/30/2013	All children due a visit who were in care at least a full calendar month from 10/1/2012 – 9/30/2013	81,971	110,673	74.1%
7/1/2013 – 6/30/2014	All children due a visit who were in care at least a full calendar month from 7/1/2013 – 6/30/2014	93,760	123,343	76.0%
1/1/2014 – 12/31/2014	All children due a visit who were in care at least a full calendar month from 1/1/2014 – 12/31/2014	99,358	128,745	77.2%
7/1/2014 – 6/30/2015	All children due a visit who were in care at least a full calendar month from 7/1/2014 – 6/30/2015	105,749	128,173	82.5%
1/1/2015 – 12/31/2015	All children due a visit who were in care at least a full calendar month from 1/1/2015 – 12/31/2015	108,859	121,024	89.9%
7/1/2015 – 6/30/2016	All children due a visit who were in care at least a full calendar month from 7/1/2015 – 6/30/2016	107,763	116,834	92.2%
1/1/2016 – 12/31/2016	All children due a visit who were in care at least a full calendar month from 1/1/2016 – 12/31/2016	103,881	110,830	93.7%
7/1/2016 – 6/30/2017	All children due a visit who were in care at least a full calendar month from 7/1/2016 – 6/30/2017	99,699	105,424	94.6%
1/1/2017 – 12/31/2017	All children due a visit who were in care at least a full calendar month from 1/1/2017 – 12/31/2017	96,217	101,378	94.9%
7/1/2017 – 6/30/2018	All children due a visit who were in care at least a full calendar month from 7/1/2017 – 6/30/2018	93,124	97,873	95.1%
1/1/2018 – 12/31/2018	All children due a visit who were in care at least a full calendar month from 1/1/2018 – 12/31/2018	89,532	93,917	95.3%
7/1/2018 – 6/30/2019	All children due a visit who were in care at least a full calendar month from 7/1/2018 – 6/30/2019	85,422	89,924	95.0%
Target				90.0%

Section 2, Table 3.2-1



Section 2, Graph 3.2-1



Section 2, Graph 3.2-2

Commentary

The baseline for this measure was 51.2 percent and the final target is 90.0 percent to be met by the end of 6/30/16. Over the 12-month period of 7/1/18 through 6/30/19, 89,924 primary monthly contacts were required and 85,422 of those monthly contacts were made by the primary worker for a rate of 95.0 percent. Performance in this area continues to be above the baseline exceeding the target.

3.3: Continuity of Worker Contacts by Primary Workers

Operational Question

What percentage of children in care for at least six consecutive months during the reporting period were visited by the same primary caseworker in each of the most recent six months, or for those children discharged from DHS legal custody during the reporting period, the six months prior to discharge?

Data Source and Definitions

This measure looks at the percentage of children in care for at least six consecutive months during the reporting period who were visited by the same primary caseworker in each of the most recent six months, or for those children

discharged from DHS legal custody during the reporting period, the six months prior to discharge. This measure does not include children in tribal custody or children placed out-of-state.

- Only one contact per month is counted even though multiple visits may have been made during the month by different workers.
- To be counted as a valid monthly contact completed by a primary worker, the worker who completed the visit must have had a primary assignment at the time of the visit.

For children in trial adoption (TA) cases, the monthly contact must have been completed by the adoption worker with a primary assignment. When the child went into TA status in the last six months of the reporting period or when a child in TA's adoption finalized in less than six months, then they are excluded from this measure.

Description of Denominator and Numerator for this reporting period

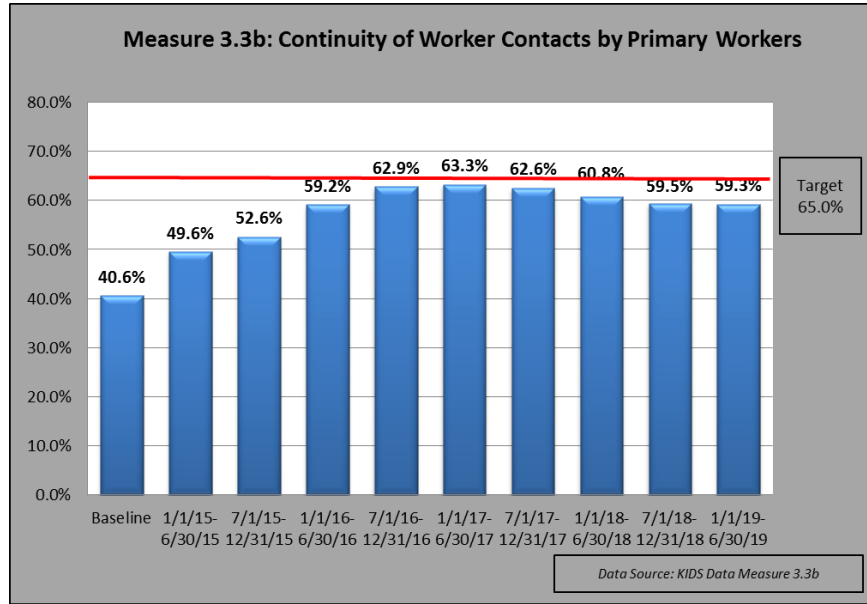
Denominator: Number of children in custody for at least six consecutive months from 1/1/2019 through 6/31/2019.

Numerator: Number of children who were seen for six consecutive months by the same primary caseworker for the last six months of the reporting period or for those children discharged from DHS legal custody during the reporting period, the last six months prior to discharge.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 1/1/2014 – 6/30/2014				40.6%
1/1/2015 – 6/30/2015	All children in care at least 6 full calendar months from 1/1/2015 – 6/30/2015	5,135	10,349	49.6%
7/1/2015 – 12/31/2015	All children in care at least 6 full calendar months from 7/1/2015 – 12/31/2015	5,259	9,997	52.6%
1/1/2016 – 6/30/2016	All children in care at least 6 full calendar months from 1/1/2016 – 6/30/2016	5,717	9,650	59.2%
7/1/2016 – 12/31/2016	All children in care at least 6 full calendar months from 7/1/2016 – 12/31/2016	5,717	9,094	62.9%
1/1/2017 – 6/30/2017	All children in care at least 6 full calendar months from 1/1/2017 – 6/30/2017	5,519	8,718	63.3%
7/1/2017 – 12/31/2017	All children in care at least 6 full calendar months from 7/1/2017 – 12/31/2017	5,238	8,370	62.6%
1/1/2018 – 6/30/2018	All children in care at least 6 full calendar months from 1/1/2018 – 6/30/2018	4,951	8,140	60.8%
7/1/2018 – 12/31/2018	All children in care at least 6 full calendar months from 7/1/2018 – 12/31/2018	4,599	7,726	59.5%
1/1/2019 – 6/30/2019	All children in care at least 6 full calendar months from 1/1/2019 – 6/30/2019	4,393	7,405	59.3%
Target				65.0%

Section 2, Table 3.3-1



Section 2, Graph 3.3-1

Commentary

From 1/1/19 through 6/30/19, 59.3 percent of the children in care were seen by the same primary worker for six consecutive months. The baseline was set at 40.6 percent. Though there was a slight decrease from the last reporting period by 0.2 percent, the measure is 18.7 percent above the baseline reporting.

Efforts are ongoing to ensure the continuity of worker visits. Work to reduce caseloads and improve hiring and staff retention continues to be a vital part of supporting the performance in measures 3.1, 3.2, and 3.3. Implementation of the Supervisory Framework occurred in three of the five regions and the Framework will continue to enhance a supervisor’s ability to support and coach his or her workers, thus improving worker retention and directly impacting measures 3.1, 3.2, and 3.3. Additionally, the use of data reports and other ongoing strategy work will continue to be used to help identify possible trends that might impact the continuity of worker visits such as workload percentages, staff vacancies, and secondary assignments.

4.1a: Placement Stability—Children in Care for Less than 12 Months

Operational Question

Of all children served in foster care during the 12-month reporting period that were in care for at least eight days but less than 12 months, what percent had two or fewer placement settings to date?

Data Source and Definitions

Timeliness and Permanency of Reunification – AFCARS 18B and 19AB

- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

Description of Denominator and Numerator for this reporting period

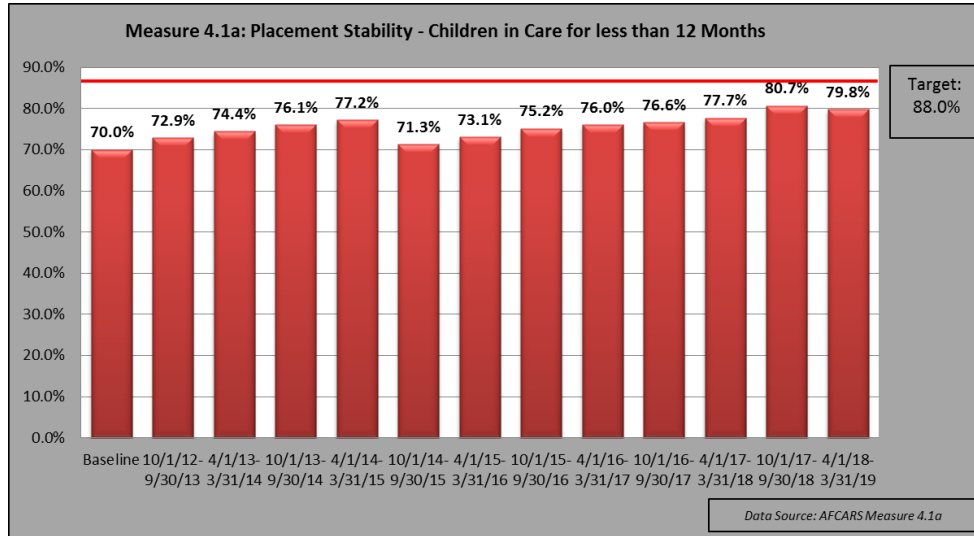
Denominator: All children served in foster care from 4/1/2018 through 3/31/2019 whose length of stay (LOS) as of 3/31/2019 was between eight days and 12 months.

Numerator: All children served in foster care from 4/1/2018 through 3/31/2019 whose length of stay as of 3/31/2019 was between eight days and 12 months and who had two or fewer placement settings as of 9/30/2018.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS between 8 days and 12 months			70.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS between 8 days and 12 months	4,396	6,031	72.9%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS between 8 days and 12 months	4,564	6,136	74.4%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS between 8 days and 12 months	4,513	5,933	76.1%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS between 8 days and 12 months	4,297	5,564	77.2%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS between 8 days and 12 months	3,981	5,585	71.3%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS between 8 days and 12 months	4,048	5,537	73.1%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS between 8 days and 12 months	4,106	5,462	75.2%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS between 8 days and 12 months	4,271	5,617	76.0%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017 with LOS between 8 days and 12 months	4,219	5,506	76.6%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018 with LOS between 8 days and 12 months	4,039	5,196	77.7%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018 with LOS between 8 days and 12 months	4,048	5,017	80.7%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019 with LOS between 8 days and 12 months	3,971	4,975	79.8%
Target				88.0%

Section 2, Table 4.1a-1



Section 2, Graph 4.1a-1

4.1b: Placement Stability—Children in Care for 12 to 24 Months

Operational Question

Of all children served in foster care during the 12-month reporting period that were in care for at least 12 months but less than 24 months, what percent had two or fewer placement settings to date?

Data Source and Definitions

Timeliness and Permanency of Reunification – AFCARS 18B and 19A

- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2018 through 3/31/2019 whose length of stay (LOS) as of 3/31/2019 was between 12 months and 24 months.

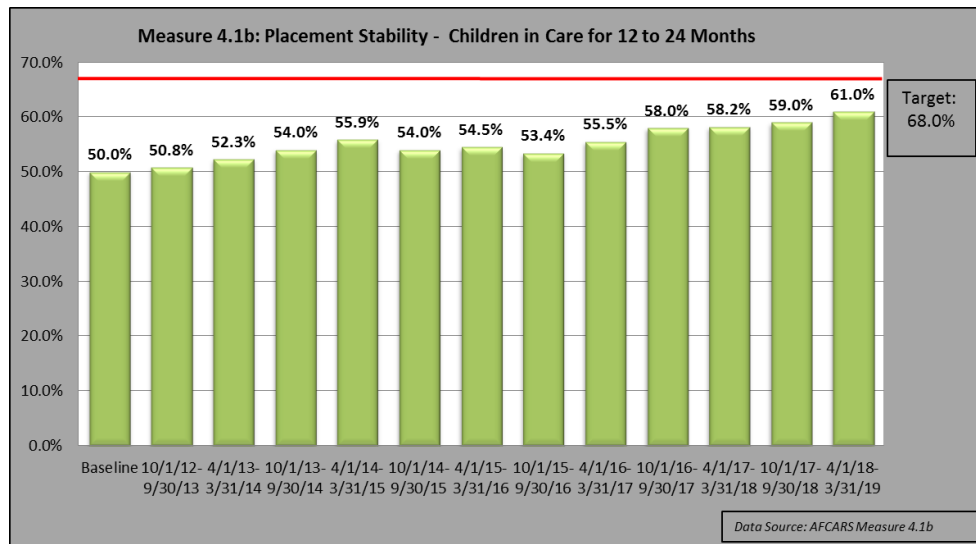
Numerator: All children served in foster care from 4/1/2018 through 3/31/2019 whose length of stay as of 3/31/2019 was between 12 months and 24 months and who had two or fewer placement settings as 3/31/2019.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS between 12 and 24 months			50.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS between 12 and 24 months	2,292	4,514	50.8%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS between 12 and 24 months	2,569	4,909	52.3%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS between 12 and 24 months	2,795	5,174	54.0%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS between 12 and 24 months	3,034	5,430	55.9%

10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS between 12 and 24 months	2,844	5,271	54.0%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS between 12 and 24 months	2,710	4,977	54.5%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS between 12 and 24 months	2,636	4,935	53.4%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS between 12 and 24 months	2,620	4,717	55.5%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017 with LOS between 12 and 24 months	2,719	4,684	58.0%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018 with LOS between 12 and 24 months	2,766	4,750	58.2%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018 with LOS between 12 and 24 months	2,767	4,686	59.0%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019 with LOS between 12 and 24 months	2,698	4,426	61.0%
Target				68.0%

Section 2, Table 4.1b-1



Section 2, Graph 4.1b-1

4.1c: Placement Stability—Children in Care for 24 Months or More

Operational Question

Of all children served in foster care during the 12-month reporting period that were in care for at least 24 months, what percent had two or fewer placement settings to date?

Data Source and Definitions

Timeliness and Permanency of Reunification – AFCARS 18B and 19A

- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2018 through 3/31/2019 whose length of stay (LOS) as of 3/31/2019 was 24 months or longer.

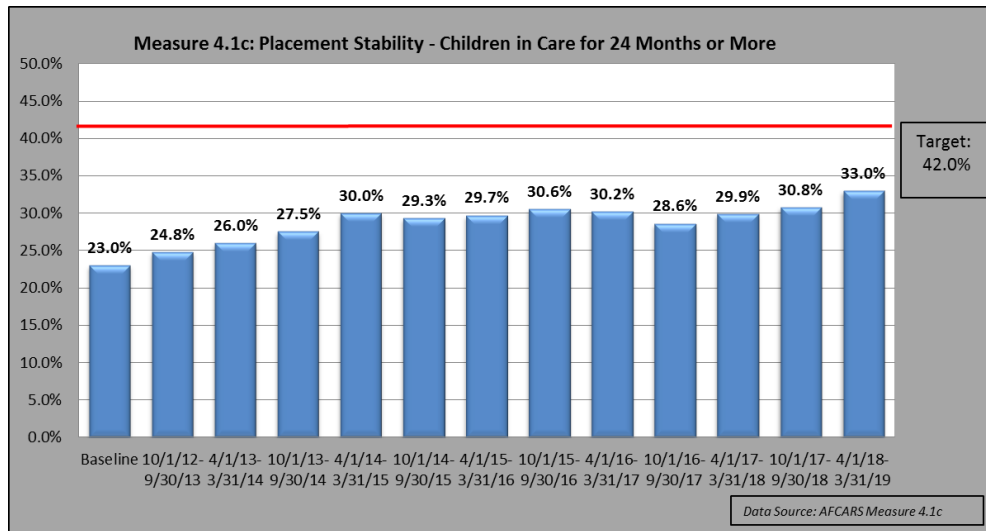
Numerator: All children served in foster care from 4/1/2018 through 3/31/2019 whose length of stay as of 3/31/2019 was 24 months or longer and who had two or fewer placement settings as of 3/31/2019.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS 24 months or longer			23.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS 24 months or longer	1,002	4,035	24.8%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS 24 months or longer	1,112	4,277	26.0%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS 24 months or longer	1,303	4,731	27.5%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS 24 months or longer	1,576	5,260	30.0%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS 24 months or longer	1,632	5,572	29.3%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS 24 months or longer	1,688	5,677	29.7%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS 24 months or longer	1,676	5,486	30.6%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS 24 months or longer	1,524	5,051	30.2%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017 with LOS 24 months or longer	1,324	4,630	28.6%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018 with LOS 24 months or longer	1,236	4,129	29.9%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018 with LOS 24 months or longer	1,207	3,913	30.8%

4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019 with LOS 24 months or longer	1,244	3,772	33.0%
Target				42.0%

Section 2, Table 4.1c-1



Section 2, Graph 4.1c-1

4.2: Placement Stability—Placement Moves After 12 Months in Care

Operational Question

Of all children served in foster care for more than 12 months, what percent of children experienced two or fewer placement settings after their first 12 months in care?

Data Source and Definitions

Measure 4.2 looks at placement stability that occurs after the child's first 12 months in care. The placement that the child is placed in 12 months after their removal date counts as the first placement, and then the metric shows how many children had two or fewer placement settings after that time.

Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2018 through 3/31/2019 whose current removal was prior to 3/31/2019 and remained in care at least 12 months.

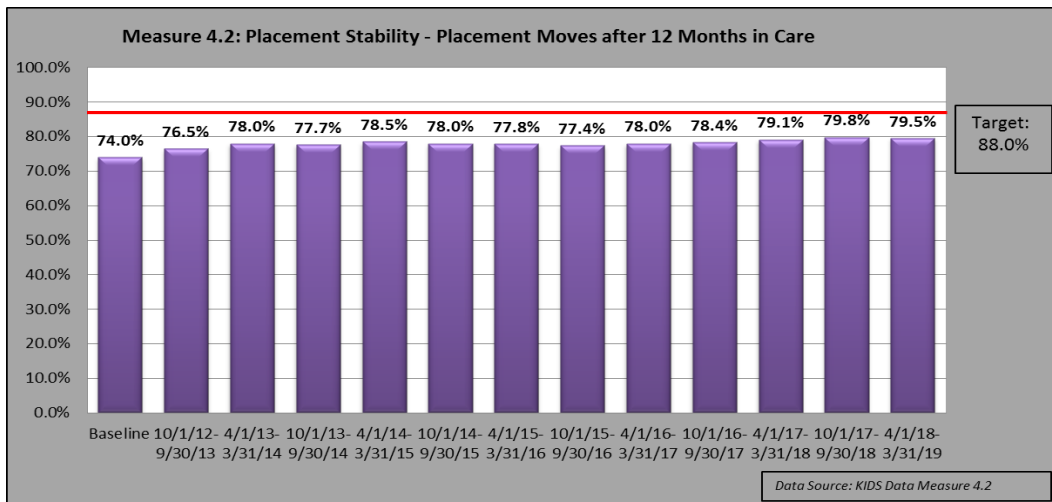
Numerator: All children served in foster care from 4/1/2018 through 3/31/2019 whose current removal was prior to 3/31/2019 and remained in care at least 12 months and had two or fewer placement settings.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with length of stay (LOS) at least 12 months			74.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS at least 12 months	6,404	8,374	76.5%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS	7,026	9,002	78.0%

	at least 12 months			
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS at least 12 months	7,590	9,763	77.7%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS at least 12 months	8,263	10,522	78.5%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS at least 12 months	8,334	10,691	78.0%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS at least 12 months	8,122	10,445	77.8%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS at least 12 months	7,871	10,172	77.4%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS at least 12 months	7,479	9,583	78.0%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017 with LOS at least 12 months	7,112	9,071	78.4%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018 with LOS at least 12 months	6,888	8,711	79.1%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018 with LOS at least 12 months	6,659	8,349	79.8%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019 with LOS at least 12 months	6,360	7,996	79.5%
Target				88.0%

Section 2, Table 4.2-1



Section 2, Graph 4.2-1

First Placement Kinship			
Removal Month	Children Placed in Kinship as 1st Placement	Children Removed during Month and Entered in Countable Placement	% of Kinship as 1st Placement
Baseline: Jul - Dec 2016	878	2540	34.6%
Jan-17	122	399	30.6%
Feb-17	190	443	42.9%
Mar-17	206	517	39.8%
Apr-17	162	432	37.5%
May-17	151	397	38.0%
Jun-17	170	410	41.5%
Jan - Jun 2017	1001	2598	38.5%
Jul-17	176	398	44.2%
Aug-17	240	489	49.1%
Sep-17	158	373	42.4%
Oct-17	149	357	41.7%
Nov-17	136	344	39.5%
Dec-17	150	303	49.5%
Jul - Dec 2017	1009	2264	44.6%
Jan-18	188	402	46.8%
Feb-18	146	350	41.7%
Mar-18	147	312	47.1%
Apr-18	183	353	51.8%
May-18	197	389	50.6%
Jun-18	188	332	56.6%
Jan - Jun 2018	1049	2138	49.1%
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%
Jul - Dec 2018	959	2113	45.4%
Jan-19	146	349	41.8%
Feb-19	146	338	43.2%
Mar-19	168	333	50.5%

Data Source: Baseline-YI844 run date 7/19/2017. YI867: Jan-Sept 2017 run date 10/19/17, Oct 17- Mar 19 run date 20th of each month for previous month data.

Section 2, Table 4.2-2

Placement Stability						
Placement Stability Efforts	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19
Resource Check-In Call	91.7%	96.6%	92.7%	88.3%	84.6%	86.4%
Initial Meeting	77.4%	83.7%	89.6%	83.1%	78.3%	76.4%
First Placement Kinship	41.8%	43.2%	50.5%	46.3%	53.6%	50.7%
Quarterly Visit	95.6%	94.6%	95.2%	95.4%	96.0%	95.8%
<i>Data Source: Y1867; Run Date 20th of each month for previous month's data. Y1840 monthly after 5th got QV.</i>						

Section 2, Table 4.2-3

Commentary

During this reporting period, Child Welfare Services (CWS) improved in two of the four measures for placement stability. CWS saw a slight decrease of 0.9 percent in Measure 4.1a from 80.7 percent to 79.8 percent. Even with this minor decrease, the measure remains 9.8 percent above the baseline data. An increase occurred in Measure 4.1b from 59.0 percent to 61.0 percent, for a two percent increase from the last reporting period. This is the highest this measure has been and is an 11.0 percent overall positive growth since the baseline was established. Measure 4.1b has had five consecutive, positive trending reporting periods. Measure 4.1c increased by 2.2 percent, for an overall total of 33.0 percent, which is the third period of consecutive, positive trending. Measure 4.1c continues to be above the baseline by 10.0 percent. This is the highest overall percentage seen in Measure 4.1c since Pinnacle Plan reporting began. Measure 4.2 saw a slight decrease of 0.3 percent making the overall performance 79.5 percent. At 5.5 percent, the measure continues to be over the baseline.

Placement Stability Efforts

The Placement Stability Team continues to have robust conversations about the practices set forth in the placement stability strategy. The Team consistently collects feedback from child welfare (CW) field staff and develops solutions to best support the CW workforce related to the placement stability strategy. The Team reviews data to identify areas of need and acknowledge bright spots across the state.

Since the last reporting period, the Placement Stability Team conducted a larger scale review of Initial Meetings (IMs) to determine if documented IMs revealed to what extent the true purpose of an IM actually occurred. An official data analysis was not conducted as the vast majority of the reviews concluded the expressed purpose for conducting an IM had not occurred. Some examples of this include workers speaking with foster parents about the child's current adjustment status to the new placement, biological parents not present, and children's needs as well as foster parents not documented. Creation of support plans was not included in the IMs reviewed as well. As a result, emails regarding an IM's purpose were sent to regional leadership in March 2019. Since that time, messaging is communicated monthly through flyers to leadership and CW staff at all levels. The messaging is a reminder about the benefits of placement stability efforts for children, parents and resource families, the IM's purpose, and creating Child & Resource Family Support Plans during IMs. Beginning in April 2019, the statewide Lead began providing the Regional Leads information to share and disseminate during their leadership meetings in addition to the emails and flyers disseminated to all staff.

The Child and Family Services Review (CFSR) program supervisor attended the Placement Stability meeting in June 2019 to discuss case specific placement stability findings from CFSR reviews. This led to the discussion of the importance of assessing children and foster family's needs, which affect various factors, in particular, placement stability.

The Placement Stability Team understands and continues to discuss the importance of how placement stability connects to safety, permanency, and well-being for children in OOH care. CWS is acutely aware when children are in a stable placement, they are more likely to be safe, have their well-being needs met, and move to permanency safely and timely.

When children are in stable placements, CW staff are better able to engage parents in services and visitations, which contribute to permanency. In addition, when children are stable in placements, resource parents are receiving the necessary support that assists with retention and recruitment.

In October 2018, the Placement Stability Team met to discuss ways to partner and align with other core strategies to better support CWS as well as understand each core strategy's connections to and impacts on practice. As a result in December 2018, the Placement Stability Team and the Permanency Leads for 6.2 met to discuss looking at the IM documentation in the Targeted Districts Enhanced Permanency Efforts strategy, specific to 6.2a. The intent of this discussion was to raise awareness of the IM's purpose and how placement stability affects timely permanency.

In August 2018, the Placement Stability Team finalized and submitted the Child and Resource Family Support Plan to the CWS Executive Team for approval. The Child and Resource Family Support Plan was processed and placed online in December 2018. At the same time, CWS issued *CWS Numbered Memo 18-14 Child and Resource Family Support Plan* providing guidance on the plan. The quality example of a Child & Resource Family Support Plan was finalized in April 2019 and dissemination through email began in May 2019. The plan is utilized in the online training. The video characters and scenario are those included on the example quality support plan.

KIDS staff are in the process of providing a count for documented subsequent IMs. The report is to run on the 10th of each month and is focused on children in family-like settings. A barrier is that currently the inability to associate an IM with a specific resource. The next step is for an exception report that can be run daily to assist supervisors with monitoring. The baseline data will be from May 2019 and will be provided in the next reporting period.

A discussion to address the behavioral health consultant (BHC) in the context of placement stability was held on 6/17/19. It was agreed that due to a change in placement stability leads and the previous lead position this work may need to be carried out in another capacity. An opportunity to discuss a plan with the new CWS leadership has not presented itself at the time of the writing of this report.

Training

The Resource Parent Check-In Call and IM video shooting for the online training began mid-June 2019 with editing beginning in the later part of June. When editing is completed, the online training to include all modules and videos will then go through beta testing. The exact time when the training will be available for staff through the Learning Management System (LMS) is contingent upon the amount of time editing and beta testing take.

CWS was provided with a draft outline comprised of six modules with five learning outcomes. Learning Outcomes:

- apply the kinship placement process for children in OOH care;
- support CW team to identify the best kinship placement for children;
- ongoing support to children and families;
- utilization of supporting documents and tools; and
- documentation requirements.

The Enhanced Efforts PowerPoint training used by the Placement Stability Leads is being updated as well as aligned with the online training that will roll out to staff upon total completion and approval.

One Move Report

CWS continues to rely on the One-Move report to inform and guide the placement stability strategy. Discussion began in June 2019 on how this report could be utilized more effectively to identify trends in reasons for kinship not being a child's first placement. As a result, a list of reasons identified in past move reports was compiled and beginning in July 2019 these reasons will be in a drop box list for staff to select from. This will speed up data analysis to determine where the supports and resources are needed to increase first kinship placement for children.

The Placement Stability Lead began utilizing the report to review all subsequent IMs that occurred for the children who fell off this report and provide specific review notes back to the placement stability regional leads which are then disseminated to their peers. This new practice began in May 2019 and will continue monthly to increase awareness of the purpose of initial and subsequent IMs. It is too early to determine the effectiveness of this new qualitative review feedback loop.

Kinship, Resource Parent Check-In Call, IM, and Resource Quarterly Visits

CWS continues to excel in the number of children placed initially in kinship. During this reporting period, CWS continued to exceed the national median of 32 percent of children initially placed in a kinship placement and is frequently above the top 10 percent, which is 42 percent, as reported by Chapin Hall. In addition, CWS continued to make efforts in completion of Resource Parent Check-In Calls, IMs, and Resource Quarterly Visits. CWS efforts related to these practices positively contributed to placement stability for children in OOH care.

Conclusion

CWS continues to learn and self-correct placement stability practices. CWS is focused and continues to coach staff on the importance of early family engagement and identification of services, resources, and supports. Moving forward, CWS will remain focused on the current practices, with an emphasis on quality IMs, ensuring IMs occur in subsequent placements, and finalization of the online training. CWS recognizes re-messaging as to the IM's purpose and intent is needed, as well as the importance of IMs occurring at each subsequent placement. This also encompasses reiterating the importance of creating Child and Resource Family Support Plans at IMs to ensure services, resources, and supports for children and resource families are identified and provided to prevent further placement moves.

5.1: Shelter Use—Children ages 0 to 1 year old

Operational Question

Of all children ages 0-1 year old with an overnight shelter stay from 1/1/2019 through 6/30/2019, how many nights were spent in the shelter?

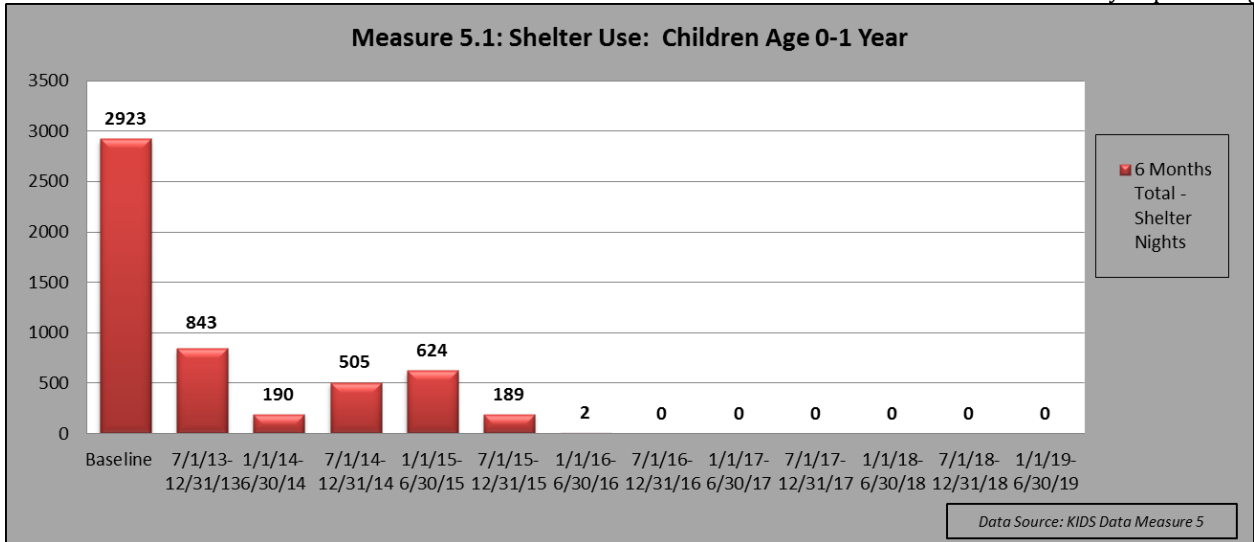
Data Source and Definitions

Data shown is the total number of nights children ages 0-1 year old spent in the shelter during the time period from 1/1/2019 through 6/30/2019. The baseline for this measure was 2,923 nights with a target of 0 nights by 12/31/2012. Automatic exceptions are made when the child is part of a sibling set of four or more or when a child is placed with a minor parent who is also in DHS custody. Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.

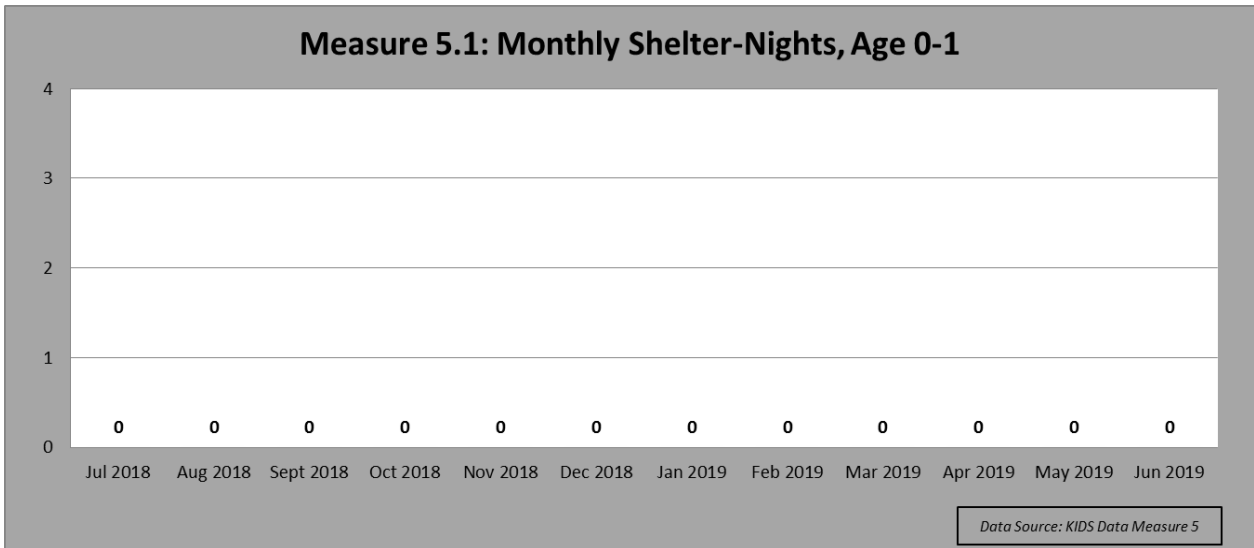
Trends

Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 0-1 year with an overnight shelter stay from 1/1/2012 – 6/30/2012	2,923 Nights
7/1/2013 – 12/31/2013	All children age 0-1 year with an overnight shelter stay from 7/1/2013 – 12/31/2013	843 Nights
1/1/2014 – 6/30/2014	All children age 0-1 year with an overnight shelter stay from 1/1/2014 – 6/30/2014	190 Nights
7/1/2014 – 12/31/2014	All children age 0-1 year with an overnight shelter stay from 7/1/2014 – 12/31/2014	505 Nights
1/1/2015 – 6/30/2015	All children age 0-1 year with an overnight shelter stay from 1/1/2015 – 6/30/2015	624 Nights
7/1/2015 – 12/31/2015	All children age 0-1 year with an overnight shelter stay from 7/1/2015 – 12/31/2015	189 Nights
1/1/2016 – 6/30/2016	All children age 0-1 year with an overnight shelter stay from 1/1/2016 – 6/30/2016	2 Nights
7/1/2016 – 12/31/2016	All children age 0-1 year with an overnight shelter stay from 7/1/2016 – 12/31/2016	0 Nights
1/1/2017 – 6/30/2017	All children age 0-1 year with an overnight shelter stay from 1/1/2017 – 6/30/2017	0 Nights
7/1/2017 – 12/31/2017	All children age 0-1 year with an overnight shelter stay from 7/1/2017 – 12/31/2017	0 Nights
1/1/2018 – 6/30/2018	All children age 0-1 year with an overnight shelter stay from 1/1/2018 – 6/30/2018	0 Nights
7/1/2018 – 12/31/2018	All children age 0-1 year with an overnight shelter stay from 7/1/2018 – 12/31/2018	0 Nights
1/1/2019 – 6/30/2019	All children age 0-1 year with an overnight shelter stay from 1/1/2019 – 6/30/2019	0 Nights
Target		0 Nights

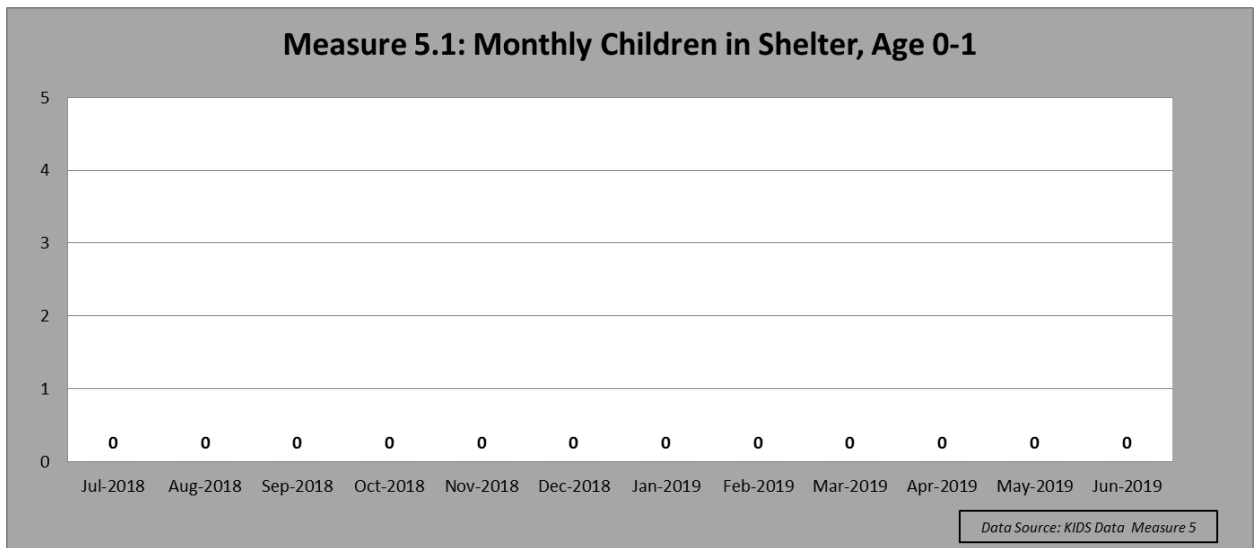
Section 2, Table 5.1-1



Section 2, Graph 5.1-1



Section 2, Graph 5.1-2



Section 2, Graph 5.1-3

Commentary

A total of 0 children ages 0-1 year old spent 0 nights in the shelter from 1/1/19 through 6/30/19. During this time period, 2,143 children ages 0-1 year were in care and 100 percent of those children did not have a shelter stay. A child under the age of 2 years old has not been placed overnight in the shelter since January 2016.

5.2: Shelter Use—Children ages 2 to 5 years old

Operational Question

Of all children ages 2-5 years old with an overnight shelter stay from 1/1/2019 through 6/30/2019, how many nights were spent in the shelter?

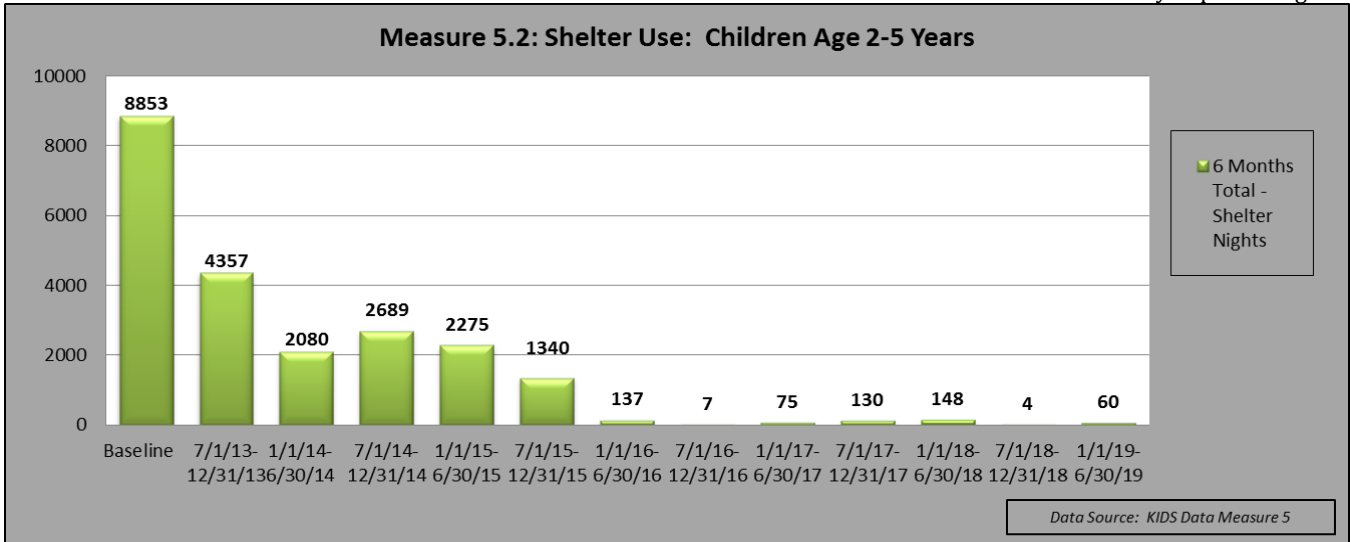
Data Source and Definitions

Data shown is the total number of nights children ages 2-5 years old spent in the shelter during the time period from 1/1/2019 through 6/30/2019. The baseline for this measure was 8,853 nights with a target of 0 nights by 6/30/2013. Automatic exceptions are made when the child is part of a sibling set of four or more or a child is placed with a minor parent who is also in DHS custody. Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.

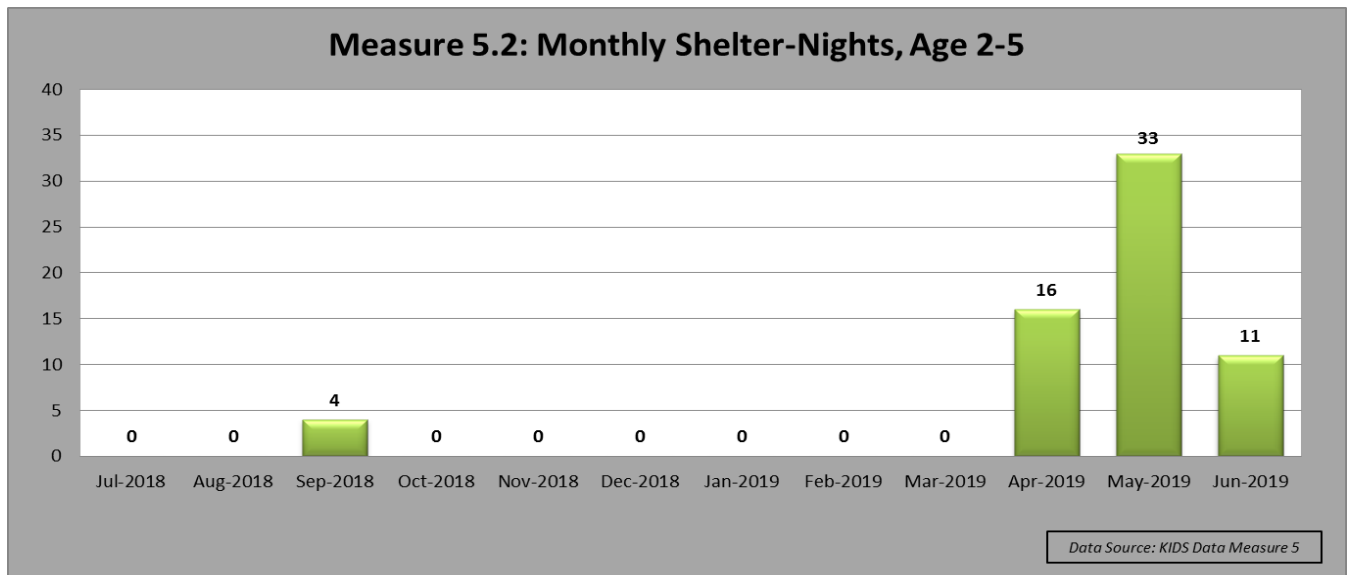
Trends

Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 2-5 years with an overnight shelter stay from 1/1/2012 – 6/30/2012	8,853 Nights
7/1/2013 – 12/31/2013	All children age 2-5 years with an overnight shelter stay from 7/1/2013 – 12/31/2013	4,357 Nights
1/1/2014 – 6/30/2014	All children age 2-5 years with an overnight shelter stay from 1/1/2014 – 6/30/2014	2,080 Nights
7/1/2014 – 12/31/2014	All children age 2-5 years with an overnight shelter stay from 7/1/2014 – 12/31/2014	2,689 Nights
1/1/2015 – 6/30/2015	All children age 2-5 years with an overnight shelter stay from 1/1/2015 – 6/30/2015	2,275 Nights
7/1/2015 – 12/31/2015	All children age 2-5 years with an overnight shelter stay from 7/1/2015 – 12/31/2015	1,340 Nights
1/1/2016 – 6/30/2016	All children age 2-5 years with an overnight shelter stay from 1/1/2016 – 6/30/2016	137 Nights
7/1/2016 – 12/31/2016	All children age 2-5 years with an overnight shelter stay from 7/1/2016 – 12/31/2016	7 Nights
1/1/2017 – 6/30/2017	All children age 2-5 years with an overnight shelter stay from 1/1/2017 – 6/30/2017	75 Nights
7/1/2017 – 12/31/2017	All children age 2-5 years with an overnight shelter stay from 7/1/2017 – 12/31/2017	130 Nights
1/1/2018 – 6/30/2018	All children age 2-5 years with an overnight shelter stay from 1/1/2018 – 6/30/2018	148 Nights
7/1/2018 – 12/31/2018	All children age 2-5 years with an overnight shelter stay from 7/1/2018 – 12/31/2018	4 Nights
1/1/2019 – 6/30/2019	All children age 2-5 years with an overnight shelter stay from 1/1/2019 – 6/30/2019	60 Nights
Target		0 Nights

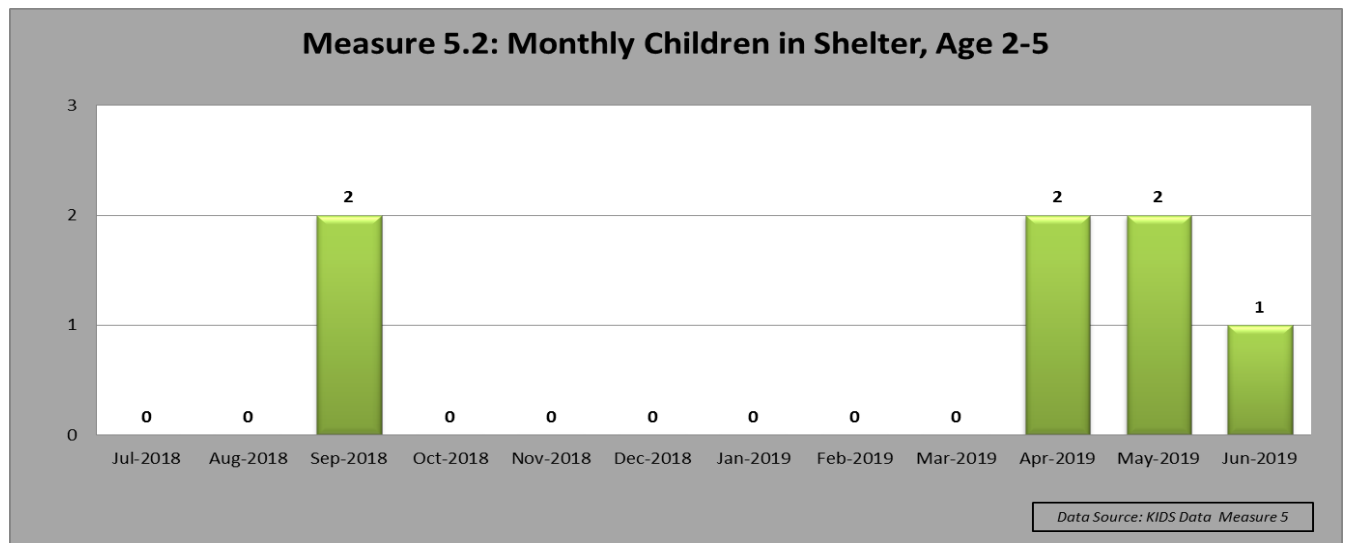
Section 2, Table 5.2-1



Section 2, Graph 5.2-1



Section 2, Graph 5.2-2



Section 2, Graph 5.2-3

Commentary

Three distinct children ages 2-5 years old spent a total of sixty nights in shelter care from 1/1/19 through 6/30/19. Section 2, Graph 5.2-3 identifies 5 children spending time in shelters from January through June 2019. In some cases, the child's shelter stay extended across multiple months, thus the child is included in the count for both months. During this time, 3,223 children ages 2-5 years were in care; 99.9 percent of those children did not have a shelter stay.

5.3: Shelter Use—Children ages 6 to 12 years old

Operational Question

Of all children ages 6-12 years old with an overnight shelter stay from 1/1/2019 through 6/30/2019, how many nights were spent in the shelter?

Data Source and Definitions

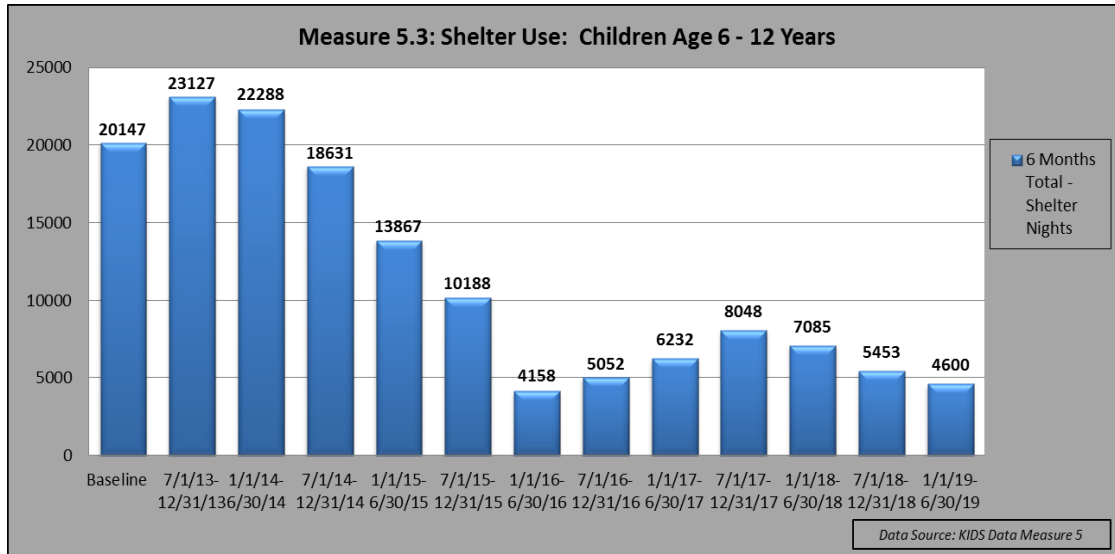
Data shown is the total number of nights children ages 6-12 years old spent in the shelter during the time period from 1/1/2019 through 6/30/2019. The baseline for this measure was 20,147 nights with an interim target of 10,000 nights by 12/31/2013. An automatic exception is made when the child is part of a sibling set of four or more. Note: Children who meet an automatic exception are still included in the count of total nights spent in the shelter.

Trends

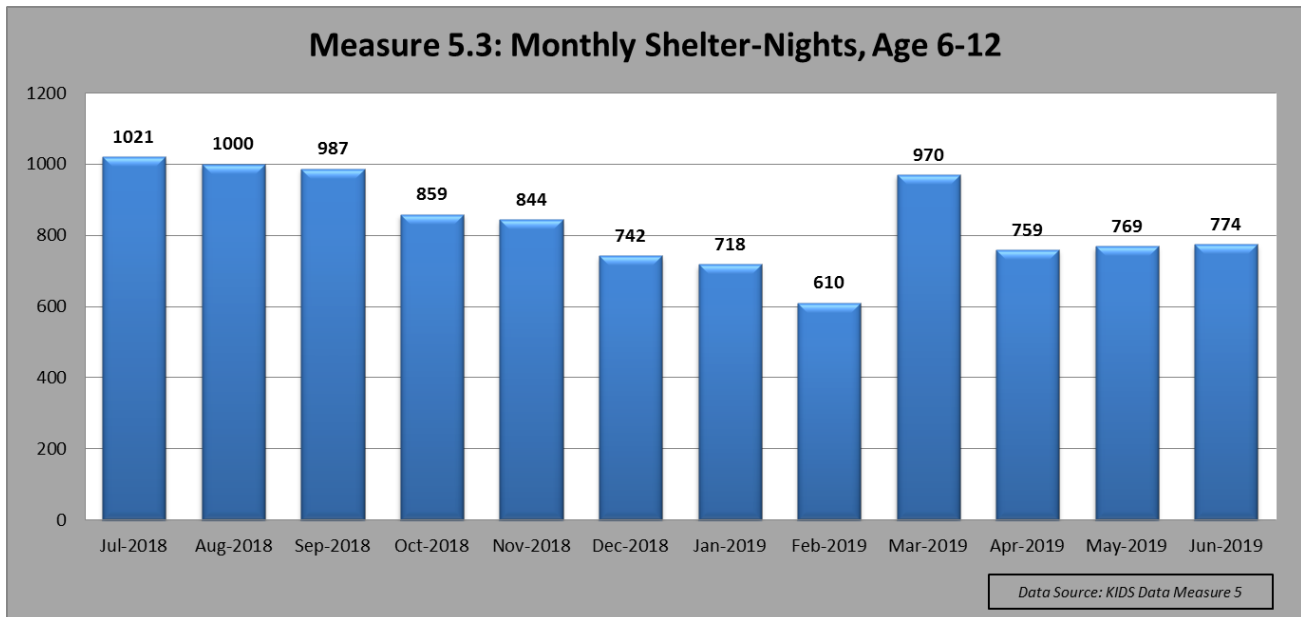
Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 6-12 years with an overnight shelter stay from 1/1/2012 – 6/30/2012	20,147 Nights
7/1/2013 – 12/31/2013	All children age 6-12 years with an overnight shelter stay from 7/1/2013 – 12/31/2013	23,127 Nights
1/1/2014 – 6/30/2014	All children age 6-12 years with an overnight shelter stay from 1/1/2014 – 6/30/2014	22,288 Nights
7/1/2014 – 12/31/2014	All children age 6-12 years with an overnight shelter stay from 7/1/2014 – 12/31/2014	18,631 Nights
1/1/2015 – 6/30/2015	All children age 6-12 years with an overnight shelter stay from 1/1/2015 – 6/30/2015	13,867 Nights
7/1/2015 – 12/31/2015	All children age 6-12 years with an overnight shelter stay from 7/1/2015 – 12/31/2015	10,188 Nights
1/1/2016 – 6/30/2016	All children age 6-12 years with an overnight shelter stay from 1/1/2016 – 6/30/2016	4,158 Nights
7/1/2016 – 12/31/2016	All children age 6-12 years with an overnight shelter stay from 7/1/2016 – 12/31/2016	5,052 Nights
1/1/2017 – 6/30/2017	All children age 6-12 years with an overnight shelter stay from 1/1/2017 – 6/30/2017	6,232 Nights
7/1/2017 – 12/31/2017	All children age 6-12 years with an overnight shelter stay from 7/1/2017 – 12/31/2017	8,048 Nights
1/1/2018 – 6/30/2018	All children age 6-12 years with an overnight shelter stay from 1/1/2018 – 6/30/2018	7,085 Nights
7/1/2018 – 12/31/2018	All children age 6-12 years with an overnight shelter stay from 7/1/2018 – 12/31/2018	5,453 Nights

1/1/2019 – 6/30/2019	All children age 6-12 years with an overnight shelter stay from 1/1/2019 – 6/30/2019	4,600 Nights
Target		0 Nights

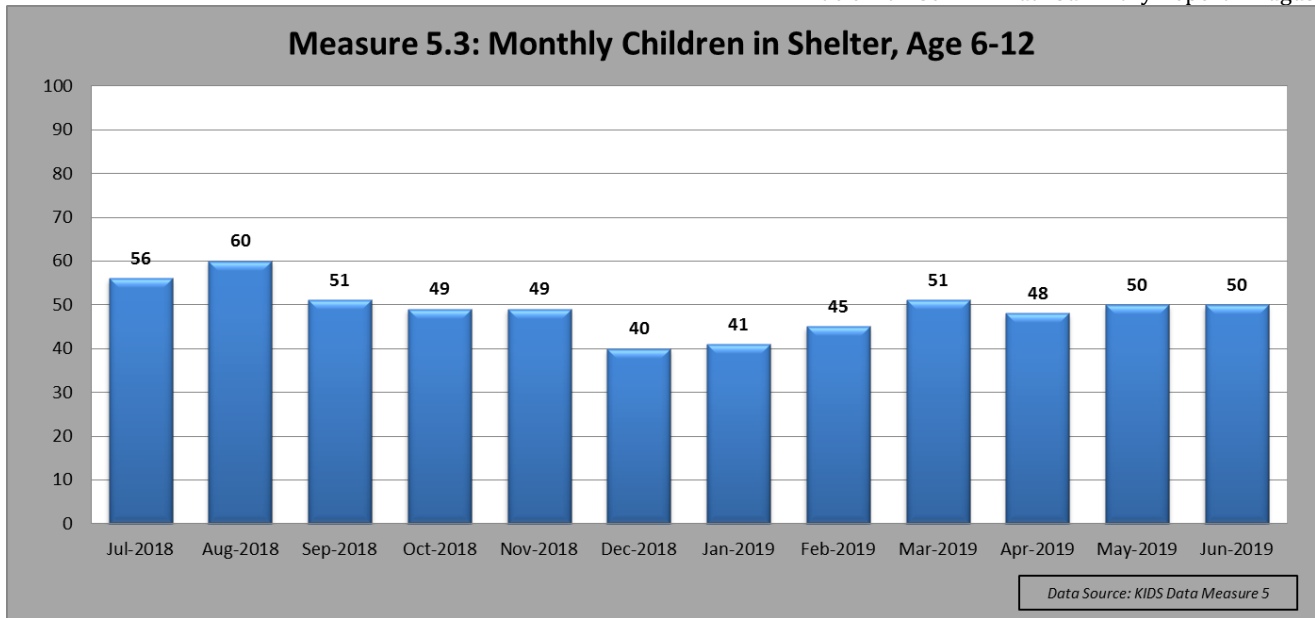
Section 2, Table 5.3-1



Section 2, Graph 5.3-1



Section 2, Graph 5.3-2



Section 2, Graph 5.3-3

Commentary

A total of 144 distinct children ages 6-12 years old spent a total of 4,600 nights in the shelter from 1/1/19 through 6/30/19. Section 2, Graph 5.3-3 identifies 285 children spending time in shelters from January through June 2019. In some cases, the child's shelter stay extended across multiple months, thus the child is included in the count for both months. During this time period, 3,285 children ages 6-12 years old were in care and 95.6 percent of those children did not have a shelter stay. This is the third consecutive reporting period of positive trending.

5.4: Shelter Use—Children ages 13 and older

Operational Question

Of all children ages 13 years or older with an overnight shelter stay from 1/1/2019 through 6/30/2019, how many nights were spent in the shelter?

Data Source and Definitions

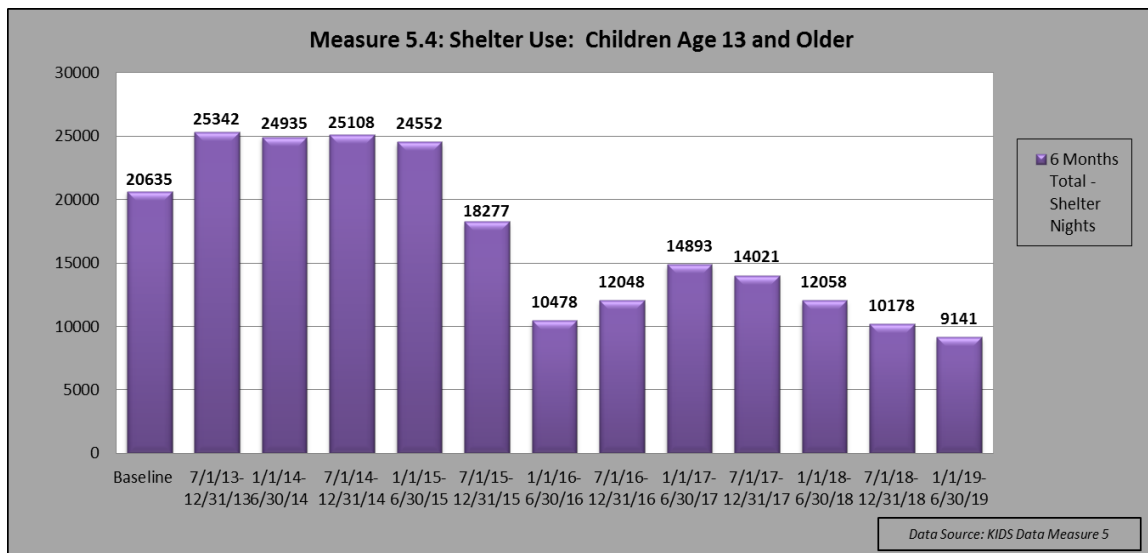
Data shown is the total number of nights children ages 13 years or older spent in the shelter during the time period from 1/1/2019 through 6/30/2019. The baseline for this measure is 20,635 nights with a target of 13,200. Of the children 13 years and older placed in a shelter during this period, the target is 80 percent of the children will meet the criteria of Pinnacle Plan Point 1.17. An automatic exception is made for children when the child is part of a sibling set of four or more. Note: Children who meet and automatic exception are still included in the count of total nights spent in the shelter.

Trends

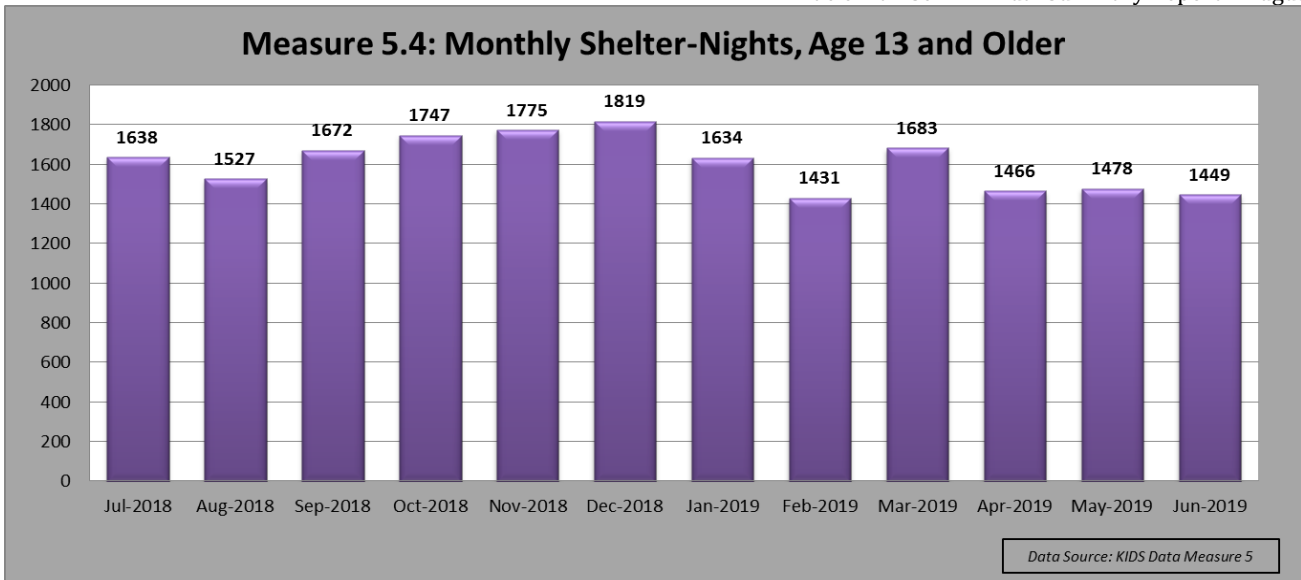
Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 13 or older with an overnight shelter stay from 1/1/2012 – 6/30/2012	20,635 Nights
7/1/2013 – 12/31/2013	All children age 13 or older with an overnight shelter stay from 7/1/2013 – 12/31/2013	25,342 Nights
1/1/2014 – 6/30/2014	All children age 13 or older with an overnight shelter stay from 1/1/2014 – 6/30/2014	24,935 Nights
7/1/2014 – 12/31/2014	All children age 13 or older with an overnight shelter stay from 7/1/2014 – 12/31/2014	25,108 Nights

1/1/2015 – 6/30/2015	All children age 13 or older with an overnight shelter stay from 1/1/2015 – 6/30/2015	24,552 Nights
7/1/2015 – 12/31/2015	All children age 13 or older with an overnight shelter stay from 7/1/2015 – 12/31/2015	18,277 Nights
1/1/2016 – 6/30/2016	All children age 13 or older with an overnight shelter stay from 1/1/2016 – 6/30/2016	10,478 Nights
7/1/2016 – 12/31/2016	All children age 13 or older with an overnight shelter stay from 7/1/2016 – 12/31/2016	12,048 Nights
1/1/2017 – 6/30/2017	All children age 13 or older with an overnight shelter stay from 1/1/2017 – 6/30/2017	14,893 Nights
7/1/2017 – 12/31/2017	All children age 13 or older with an overnight shelter stay from 7/1/2017 – 12/31/2017	14,021 Nights
1/1/2018 – 6/30/2018	All children age 13 or older with an overnight shelter stay from 1/1/2018 – 6/30/2018	12,058 Nights
7/1/2018 – 12/31/2018	All children age 13 or older with an overnight shelter stay from 7/1/2018 – 12/31/2018	10,178 Nights
1/1/2019 – 6/30/2019	All children age 13 or older with an overnight shelter stay from 1/1/2019 – 6/30/2019	9,141 Nights
Target		8,850 Nights

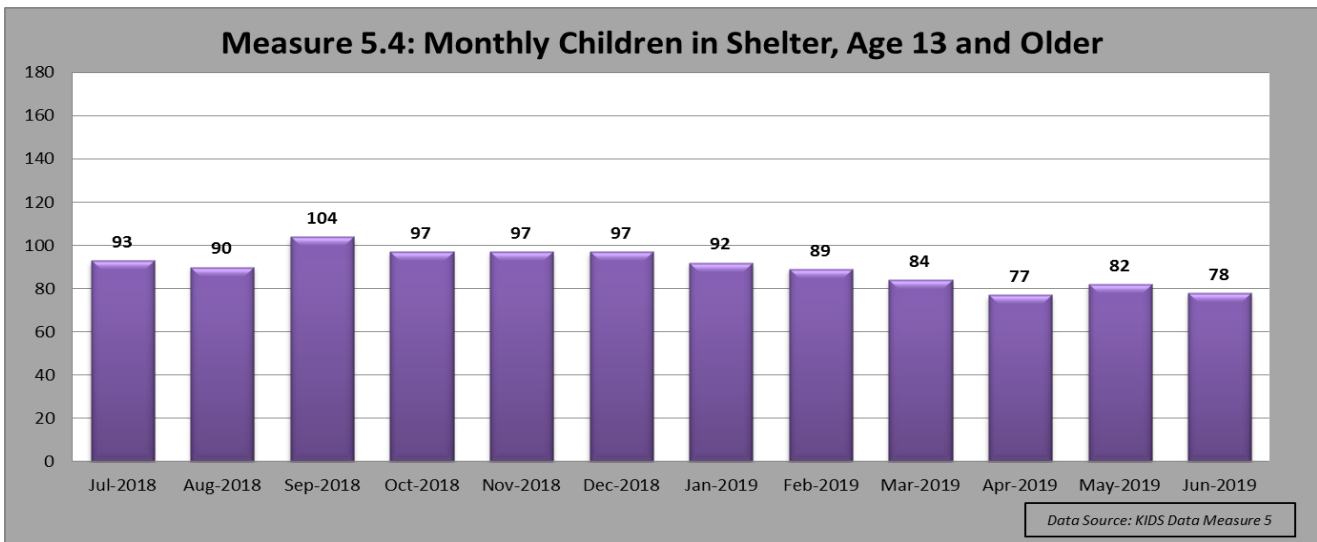
Section 2, Table 5.4-1



Section 2, Graph 5.4-1



Section 2, Graph 5.4-2

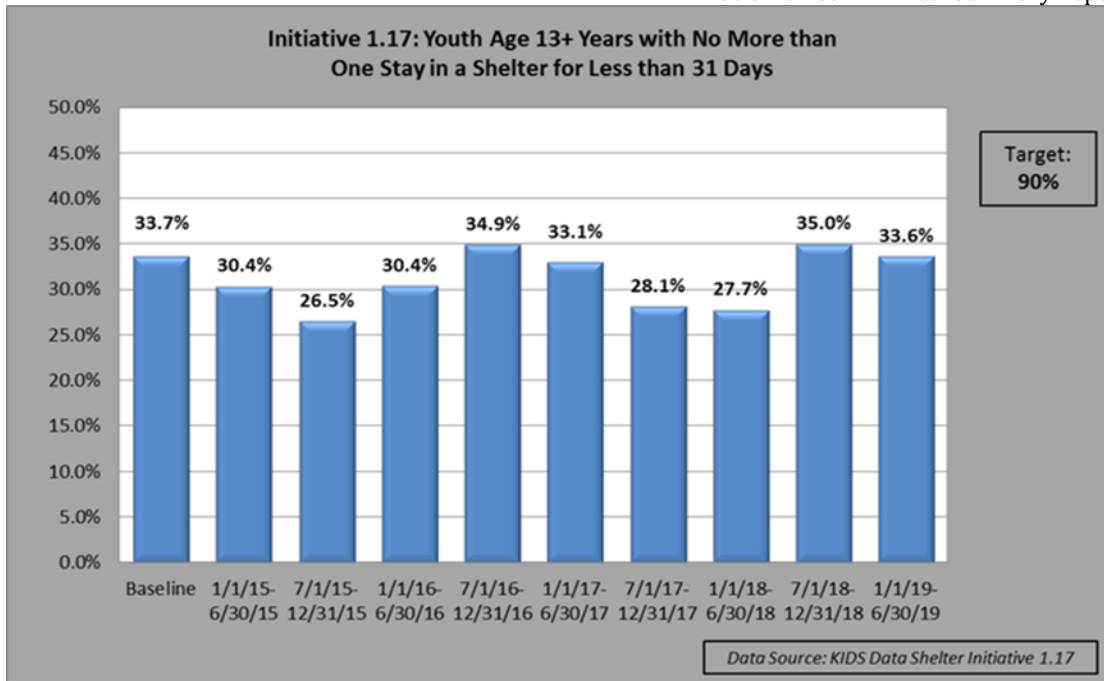


Section 2, Graph 5.4-3

Commentary

A total of 226 distinct children ages 13 years or older spent a total of 9,141 nights in shelter care from 1/1/19 through 6/30/19. Section 2, Graph 5.4-3 identifies 502 children spending time in shelters from January through June 2019. In some cases, the child's shelter stay extended across multiple months; thus, the child is included in the count for both months. During this time period, 1,508 children ages 13 years or older were in care and 85.0 percent of those children did not have a shelter stay. This is the fourth consecutive reporting period of positive trending.

Initiative 1.17: Youth 13 years and older not to be placed in a shelter more than one time within a 12-month period and for no more than 30 days in any 12-month period.



Section 2, Graph 5.4-4

Commentary

For the six-month period ending 6/30/19, 33.6 percent of youth age 13 and older experienced no more than one stay in the shelter lasting less than 31 days. Though there was only a 1.4 percent decrease, 31 fewer youth experienced a shelter stay this review period. Of the 226 youth age 13 and older who had a shelter stay during the reporting period, 76 youth had one shelter stay lasting less than 31 days. Of the remaining 226 youth age 13 and up who had a shelter stay: 51 youth, 22.6 percent, had one stay that lasted longer than 31 days; 16 youth, 7.1 percent, had two or more stays that lasted less than 31 days; and 83 youth, 36.7 percent, had two or more stays that lasted more than 31 days in the shelter.

Data Overview

While the data reflects continued positive trending for Oklahoma children both in regards to the decreasing number of unique children served in shelter care and the average length of time that most children spend when placed in shelter care, the Oklahoma Department of Human Services (DHS) and Child Welfare Services (CWS) recognize work still needs to be done. Shelter utilization for children 0-1 is completely eliminated. A small spike occurred in shelter utilization for children ages 2-5. Of the three unique children, one child spent two nights in shelter care until a home was secured for him and his 17-year-old brother together, and one child spent 56 days in shelter care. The child had multiple previous placement disruptions and shelter placement was used for stabilization while evaluations and services were put in place. This is the third consecutive reporting period with positive trending for children ages 6 – 12 and the fourth consecutive reporting period with positive trending for youth 13 and older. Efforts continue to develop the best ways to support youth immediately by accessing family placements when appropriate and timely treatment placements when needed.

Enhanced Shelter Reduction Plan

The Enhanced Shelter Reduction Plan was initiated in March 2018 to align placement efforts across the state for all children who experience shelter care. Over the last 15 months, the Shelter Programs Team, along with the five regional shelter leads, found areas for modification to best serve children and child welfare (CW) field staff. During the staffing process, the Team explores placement options for children in shelter care that can then be applied to other children prior to ever entering shelter care. The regional leads also believe that the shelter staffing process impacts the length of time that children spend in shelter care. Plan modifications address the continuous quality improvement (CQI) steps, specifically the peer reviews, and the quarterly review of a sample of shelter authorizations by the group. The CQI efforts were initially found to be beneficial, but over time didn't meet expectations. During the August 2019 quarterly

meeting, the uniform shelter staffing guide will be evaluated and revisions made to get the best quality and most useful information on the guide to inform the next best placement. All regions have continued bi-weekly shelter staffing for all children in shelter care and an enhanced shelter staffing has occurred for all regions monthly. The Enhanced Shelter Reduction plan continues to be a useful tool to support the CW field staff in moving children to the most appropriate placement as quickly as possible.

At the last 2018 quarterly meeting, the regional shelter leads identified specific training that they could benefit from: group home referral and program expectations; how to better advise CWS field staff when youth may need to be assessed for a higher level of care; and questions about the Therapeutic Foster Care (TFC) assessment process. Program staff from the Specialized Placement and Partnerships Unit (SPPU), Developmental Disabilities Services (DDS), and TFC trained the regional shelter leads during the 5/15/19 quarterly regional shelter leads meeting.

Collaboration with Youth Service Agencies (YSA) and Office of Juvenile Affairs (OJA)

Twenty-one Youth Service Agencies continue to provide shelter care across the state. No direct personnel changes were made during this reporting period for the Shelter program team. The CWS Shelter Programs Team continues to support YSA shelters with three placement specific liaisons and two program field representatives (PFRs). During May and June 2019, the shelter PFRs began working with four YSA directors from different regions and the OJA contract monitor to consider a new protocol to provide shelter directors contact with CWS Shelter Programs staff to discuss trends on needs and improvement areas. This group agreed that having targeted time set aside for the shelter directors to communicate collaboratively with their peers and the CWS Programs staff would be beneficial, so a monthly call was established. The monthly support calls begin July 2019. Over the next four months, a survey will be sent to all of the YSA directors and shelter directors to gain feedback about the process and consider adjustments. Another continued support available to the YSA shelters is the direct care authorization contracts that provide additional funding from CWS when the YSA provides one-on-one care to a youth in DHS custody while still meeting the minimal staffing requirements per their OJA contract for other youth placed in their shelters. The contracts continue to be in place with four shelters, but were only utilized by one shelter. The youth who are approved for direct care payments have all had developmental delays and some of the children had co-occurring medical needs. The direct care contracts are available for use in all shelters when they have approval from licensing for more placements than currently contracted for with OJA. Minimum staffing ratios are typically based on all youth over the age of six since there are very rarely children under that age in shelter care.

Training

The purpose of shelter placement training is to enhance the knowledge of field staff working with children placed in shelters. The focus is on connecting CWS practice standards to the way children in shelter care are supported by the CW field staff. Shelter Programs recognized that with the closure of the two state run shelters, YSA shelters would likely see youth with unique needs placed in their shelters. The shelter placement training helps CW field staff understand their role by giving practical tips for supporting the youth and shelter staff. The training also provided basic information about the treatment levels and placement processes for group home care, TFC, and hospital care because Shelter Programs recognizes that many youth in shelter care also experience higher levels of treatment placements. A training survey with 501 participants indicated 95 percent "strongly agree or agree" response to the question, "the information presented to me will be beneficial to me in my current job."

The training for CW field staff levels I through IV, created in December 2018, was conducted from December 2018 through June 2019 across the state. More than 700 CW field staff participated in the training. The training was held in 16 county offices for a total of 18 times before the end of July 2019. Currently, two more county offices with training dates are scheduled in August 2019 and training will continue to be available to county offices as requested by regional and/or district directors moving forward.

Summary

While CWS continues to make progress with fewer children spending time in shelter care, the division wants to continue the development of safe, needs-based placements that are in the children's best interest. The CWS recognizes the need

for more placements to care for children of varying ages and developmental and behavioral health needs. While utilizing shelter care is a placement of last resort, CWS Programs is committed to working towards permanency with the child's assigned CWS team. This objective is accomplished primarily through continued regional and elevated shelter staffings completed as directed by the Enhanced Shelter Reduction Plan. Shelter Programs also strives to support the best assessment of safety when children are in shelter care through both the work done by the assigned program staff, but also through the training provided this year to the CW field staff. During this reporting period, CWS Shelter Programs spent time developing ways to support CW field staff working with youth in shelter care, as well as identifying new ways to support YSA. Work on developing additional support for both internal and external partners will be the focus for the Shelter team while continuing to move towards the goal for all children to live in family settings when appropriate.

6.2a: Permanency Within 12 Months of Removal

Operational Question

Of all children who entered foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within 12 months of removal?

Data Source and Definitions

Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively. This data is pulled from the AFCARS files.

Description of Denominator and Numerator for this reporting period

Denominator: All children who entered foster care from 10/1/2017 through 3/31/2018.

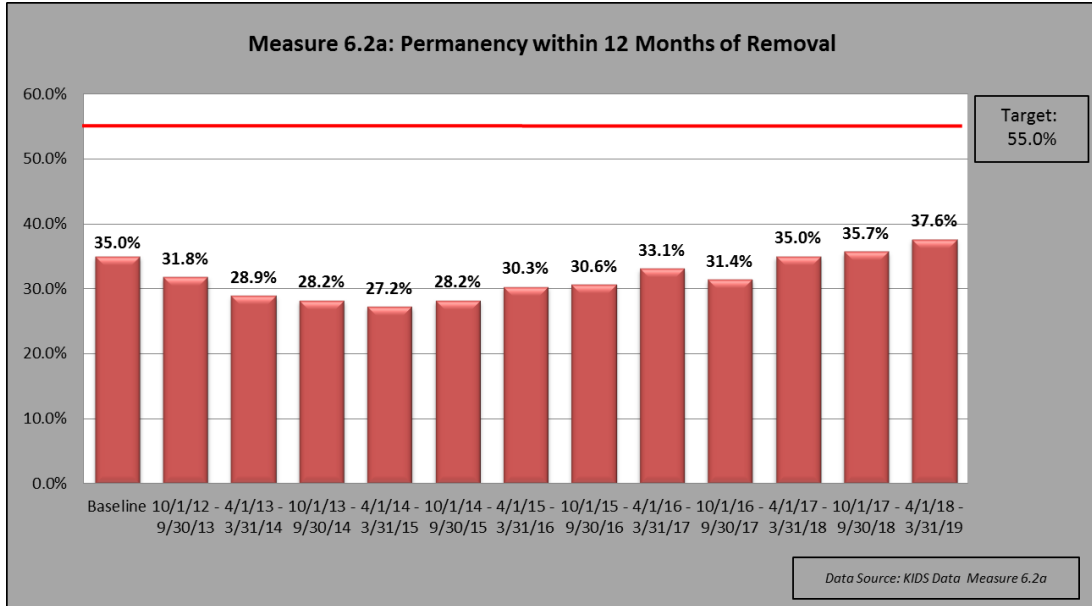
Numerator: The number of children who entered foster care from 10/1/2017 through 3/31/2018 and exited to a permanent setting within 12 months of removal.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2011 – 9/30/2011			35.0%
10/1/2012 – 9/30/2013	All admissions from 4/1/2012 – 9/30/2012	856	2,692	31.8%
4/1/2013 – 3/31/2014	All admissions from 10/1/2012 – 3/31/2013	782	2,707	28.9%
10/1/2013 – 9/30/2014	All admissions from 4/1/2013 – 9/30/2013	818	2,901	28.2%
4/1/2014 – 3/31/2015	All admissions from 10/1/2013 – 3/31/2014	748	2,749	27.2%
10/1/2014 – 9/30/2015	All admissions from 4/1/2014 – 9/30/2014	764	2,705	28.2%
4/1/2015 – 3/31/2016	All admissions from 10/1/2014 – 3/31/2015	714	2,359	30.3%
10/1/2015 – 9/30/2016	All admissions from 4/1/2015 – 9/30/2015	840	2,741	30.6%
4/1/2016 – 3/31/2017	All admissions from 10/1/2015 – 3/31/2016	774	2,340	33.1%
10/1/2016 – 9/30/2017	All admissions from 4/1/2016 – 9/30/2016	788	2,512	31.4%
4/1/2017 – 3/31/2018	All admissions from 10/1/2016 – 3/31/2017	832	2,375	35.0%

10/1/2017 – 9/30/2018	All admissions from 4/1/2017 – 9/30/2017	847	2,372	35.7%
4/1/2018 – 3/31/2019	All admissions from 10/1/2017 – 3/31/2018	792	2,105	37.6%
Target				55.0%

Section 2, Table 6.2a-1



Section 2, Graph 6.2a-1

6.2b: Permanency Within 2 Years of Removal

Operational Question

Of all children who entered their 12th month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within two years of removal?

Data Source and Definitions

Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively.

Description of Denominator and Numerator for this reporting period

Denominator: All children who entered foster care from 10/1/2016 through 3/31/2017.

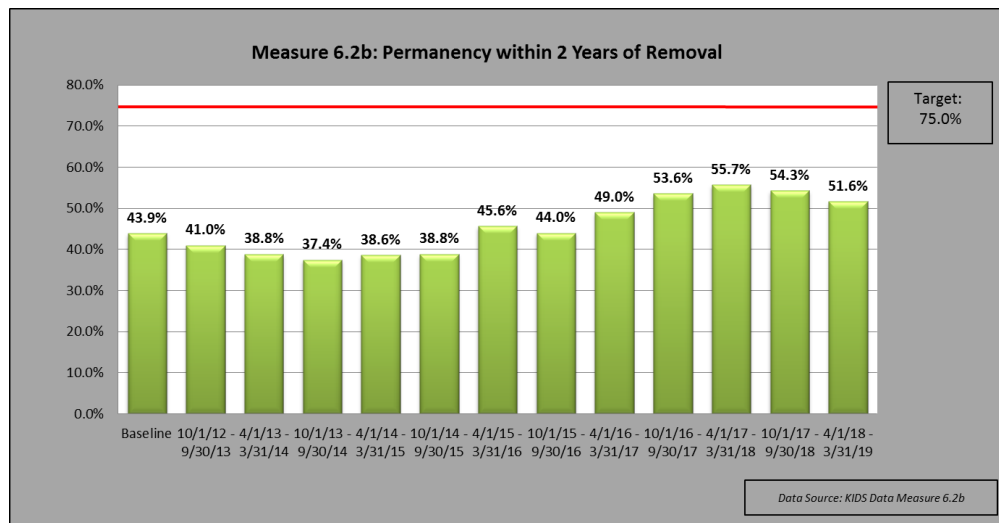
Numerator: The number of children, who entered foster care from 10/1/2016 through 3/31/2017, were removed at least 12 months, and exited to a permanent setting within 24 months of removal.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2010 – 9/30/2010			43.9%
10/1/2012 – 9/30/2013	All admissions from 4/1/2011 – 9/30/2011	667	1,626	41.0%
4/1/2013 – 3/31/2014	All admissions from 10/1/2011 – 3/31/2012	577	1,487	38.8%
10/1/2013 – 9/30/2014	All admissions from 4/1/2012 – 9/30/2012	669	1,787	37.4%

4/1/2014 – 3/31/2015	All admissions from 10/1/2012 – 3/31/2013	713	1,846	38.6%
10/1/2014 – 9/30/2015	All admissions from 4/1/2013 – 9/30/2013	780	2,008	38.8%
4/1/2015 – 3/31/2016	All admissions from 10/1/2013 – 3/31/2014	886	1,944	45.6%
10/1/2015 – 9/30/2016	All admissions from 4/1/2014 – 9/30/2014	821	1,865	44.0%
4/1/2016 – 3/31/2017	All admissions from 10/1/2014 – 3/31/2015	769	1,570	49.0%
10/1/2016 – 9/30/2017	All admissions from 4/1/2015 – 9/30/2015	961	1,793	53.6%
4/1/2017 – 3/31/2018	All admissions from 10/1/2015 – 3/31/2016	831	1,493	55.7%
10/1/2017 – 9/30/2018	All admissions from 4/1/2016 – 9/30/2016	891	1,640	54.3%
4/1/2018 – 3/31/2019	All admissions from 10/1/2016 – 3/31/2017	776	1,504	51.6%
Target				75.0%

Section 2, Table 6.2b-1



Section 2, Graph 6.2b-1

6.2c: Permanency Within 3 Years of Removal

Operational Question

Of all children who entered their 24th month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within three years of removal?

Data Source and Definitions

Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively. This data is pulled from the AFCARS files.

Description of Denominator and Numerator for this reporting period

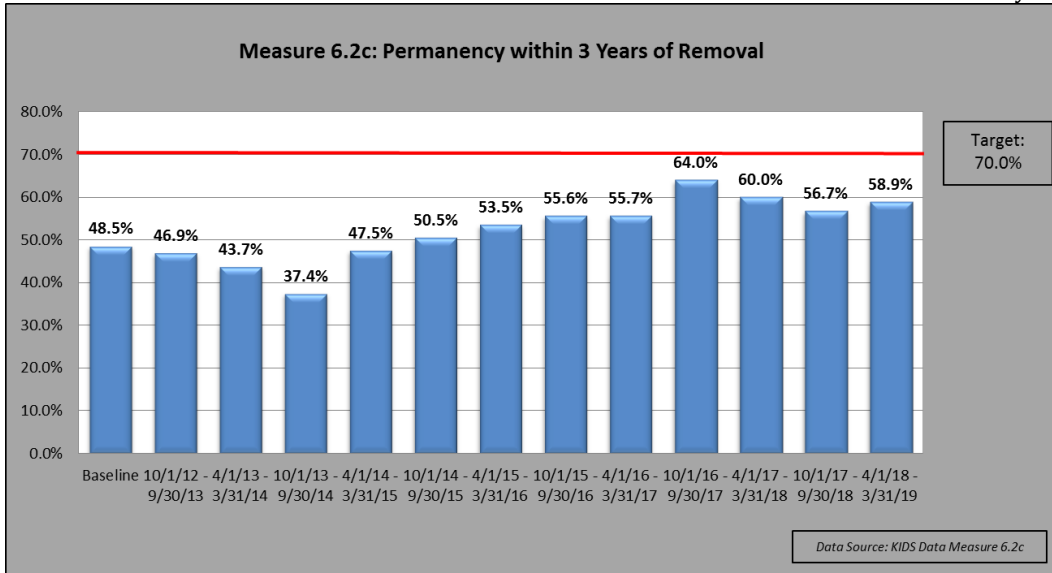
Denominator: All children who entered foster care from 10/1/2015 through 4/31/2016.

Numerator: The number of children, who entered foster care from 10/1/2015 through 4/31/2016, were removed at least 24 months, and exited to a permanent setting within 36 months of removal.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2009 – 9/30/2009			48.5%
10/1/2012 – 9/30/2013	All admissions from 4/1/2010 – 9/30/2010	350	746	46.9%
4/1/2013 – 3/31/2014	All admissions from 10/1/2010 – 3/31/2011	286	654	43.7%
10/1/2013 – 9/30/2014	All admissions from 4/1/2011 – 9/30/2011	346	924	37.4%
4/1/2014 – 3/31/2015	All admissions from 10/1/2011 – 3/31/2012	414	872	47.5%
10/1/2014 – 9/30/2015	All admissions from 4/1/2012 – 9/30/2012	552	1,094	50.5%
4/1/2015 – 3/31/2016	All admissions from 10/1/2012 – 3/31/2013	586	1,095	53.5%
10/1/2015 – 9/30/2016	All admissions from 4/1/2013 – 9/30/2013	653	1,174	55.6%
4/1/2016 – 3/31/2017	All admissions from 10/1/2013 – 3/31/2014	558	1,002	55.7%
10/1/2016 – 9/30/2017	All admissions from 4/1/2014 – 9/30/2014	633	989	64.0%
4/1/2017 – 3/31/2018	All admissions from 10/1/2014 – 3/31/2015	445	742	60.0%
10/1/2017 – 9/30/2018	All admissions from 4/1/2015 – 9/30/2015	443	781	56.7%
4/1/2018 – 3/31/2019	All admissions from 10/1/2015 – 3/31/2016	378	642	58.9%
Target				70.0%

Section 2, Table 6.2c-1



Section 2, Graph 6.2c-1

6.2d: Permanency Within 4 Years of Removal

Operational Question

Of all children who entered their 36th month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within 48 months of removal?

Data Source and Definitions

Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively. This data is pulled from the AFCARS files.

Description of Denominator and Numerator for this reporting period

Denominator: All children who entered foster care from 10/1/2014 through 3/31/2015.

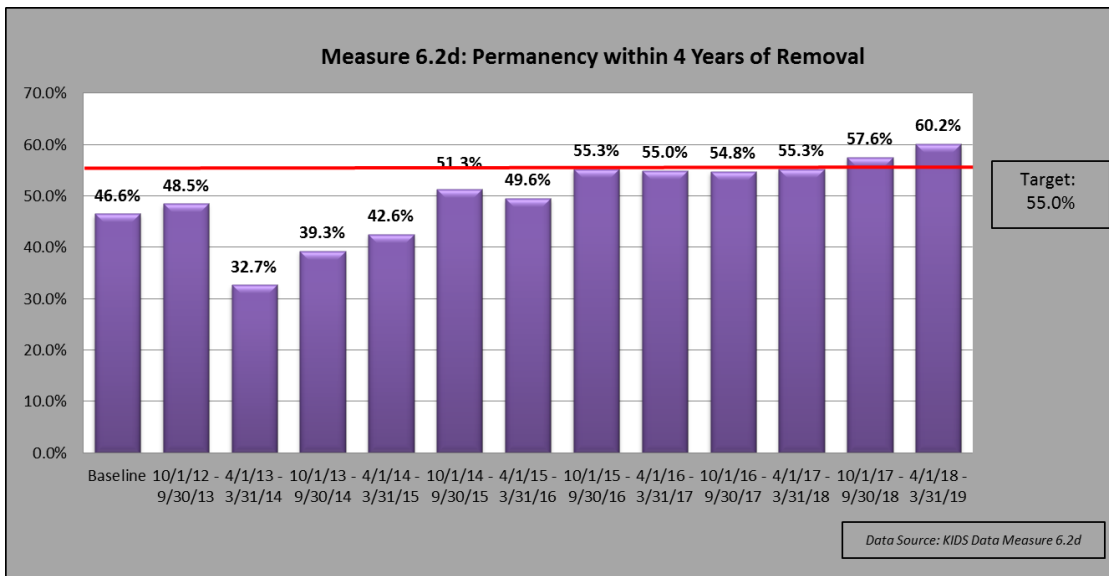
Numerator: The number of children, who entered foster care through 10/1/2014 through 3/31/2015, were removed at least 36 months, and exited to a permanent setting within 48 months of removal.

Trends

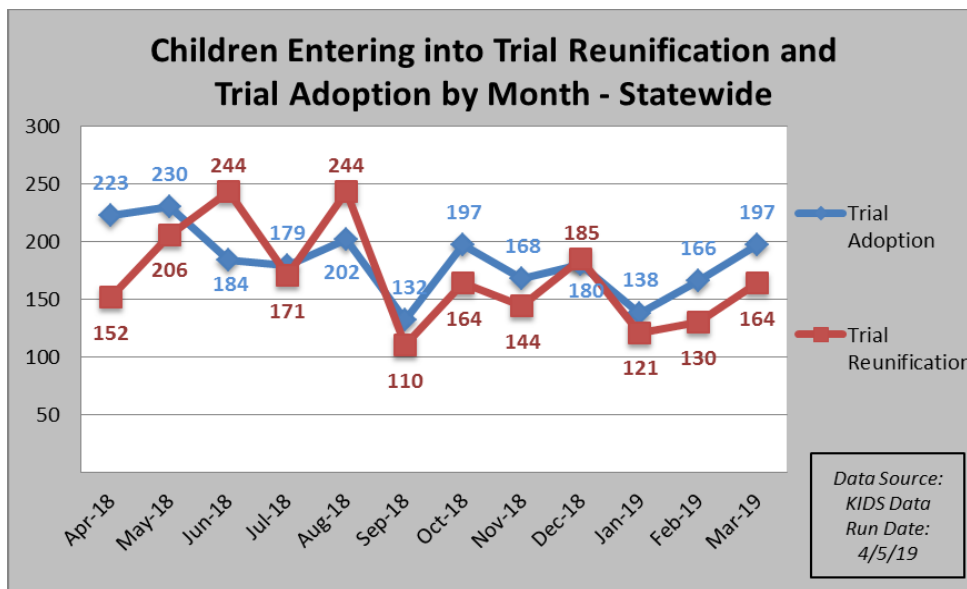
Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2008 – 9/30/2008			46.6%
10/1/2012 – 9/30/2013	All admissions from 4/1/2009 – 9/30/2009	128	264	48.5%
4/1/2013 – 3/31/2014	All admissions from 10/1/2009 – 3/31/2010	91	278	32.7%
10/1/2013 – 9/30/2014	All admissions from 4/1/2010 – 9/30/2010	141	359	39.3%
4/1/2014 – 3/31/2015	All admissions from 10/1/2010 – 3/31/2011	146	343	42.6%
10/1/2014 – 9/30/2015	All admissions from 4/1/2011 – 9/30/2011	285	556	51.3%
4/1/2015 – 3/31/2016	All admissions from 10/1/2011 – 3/31/2012	206	415	49.6%
10/1/2015 – 9/30/2016	All admissions from 4/1/2012 – 9/30/2012	278	503	55.3%

4/1/2016 – 3/31/2017	All admissions from 10/1/2012 – 3/31/2013	252	458	55.0%
10/1/2016 – 9/30/2017	All admissions from 4/1/2013 – 9/30/2013	264	482	54.8%
4/1/2017 – 3/31/2018	All admissions from 10/1/2013 – 3/31/2014	228	412	55.3%
10/1/2017 – 9/30/2018	All admissions from 4/1/2014 – 9/30/2014	190	330	57.6%
4/1/2018 – 3/31/2019	All admissions from 10/1/2014 – 3/31/2015	168	279	60.2%
Target				55.0%

Section 2, Table 6.2d-1



Section 2, Graph 6.2d-1



Section 2, Graph 6.2d-2

Section 2, Graph 6.2d-2 is an unduplicated count of children who entered Trial Adoption or Trial Reunification for each month during the last 12 months ending March 2019. This is not a summary count of all children placed in Trial

Adoption or Trial Reunification during the month. Although not a Pinnacle Plan measure, Child Welfare Services (CWS) tracks performance in these two areas, as it is reflective of real time progress on moving children to permanency.

Permanency Safety Consultations of Children in Care on 3/31/19 with Goal of Reunification	
Children in Care 90+ Days with Goal of Reunification	3,023
Children with Permanency Safety Consultation	2,882
% with Permanency Safety Consultation	95.3%
<i>Data Source: KIDS Data Y1104; Run Date: 4/1/19</i>	
<i>*Data only includes children that have been in care at least 90 days</i>	

Section 2, Table 6.2d-2

Permanency Safety Consultations (PSC) for Children with a Case Plan Goal of Return to Own Home October 2018 - March 2019				
Month of PSC	# of PSC	# of Children with PSC	PSC Recommendation Safe	PSC Recommendation Unsafe
Oct-18	399	708	150	558
Nov-18	459	793	174	619
Dec-18	400	708	165	543
Jan-19	426	772	195	577
Feb-19	422	765	194	571
Mar-19	449	798	180	618
Quarterly Total	2555	4544	1058	3486
<i>Data Source: Y1838- Permanency Safety Consultation; Run Date: 12/11/18; 1/31/19; 2/11/19; 3/11/19; 4/5/19</i>				
<i>*Children in Trial Reunification are excluded from the population.</i>				

Section 2, Table 6.2d-3

	Number of Family Team Meetings (FTM) Held	Unique Count of Children Included in FTM's	Total Children Served in Care	% of Children with FTM
4/1/18-3/31/19	6237	7227	13441	53.80%
<i>Data Source: KIDS Data- FTM Types Included, FTM FTM- Alt. Perm Plan, FTM- Concurrent Planning, FTM- ISP Development, FTM- Safety Planning, FTM- 6 Month, FTM- Reasonable Efforts NR Court Finding, FTM- Placement Stability, and FTM- Progress to Permanency.</i>				

Section 2, Table 6.2d-4

Commentary

During this review period, CWS improved in three of the four measures. Measure 6.2a increased by 1.9 percent and is the highest the measure has been since Pinnacle Plan reporting began. A total of 792 children, 37.6 percent, achieved permanency within the first 12 months in care. Performance Measure 6.2b decreased by 2.7 percent from the last reporting period. Even with the decline, the performance remains 7.7 percent above the baseline. Performance in Measure 6.2c increased by 2.2 percent and is 10.4 percent above the original baseline. Measure 6.2d increased by 2.6 percent, making this the highest percentage in a reporting period at 60.2 percent, which is above the target for the third consecutive reporting period.

Of the 4,530 children included in all of the 6.2 measures, 2,114 of the children achieved timely permanency. An additional 440 children achieved permanency after the timeliness target dates. A total of 101 children exited to non-permanent exits. This left 1,875 children remaining in care from the original population of 4,530 that had not achieved permanency as of 5/31/19. Of the 1,875 children, 157 children were placed in trial reunification and 153 children in trial adoption for a total of 310 children close to achieving permanency.

As of 3/31/19, 2,882 children had a Permanency Safety Consultation (PSC) completed out of 3,023 children who were eligible with the goal of reunification. Sixty-two children were excluded from the population that did not have a PSC as they are currently in trial reunification. For the next reporting period, of the 141 children without a PSC, 33 had a documented PSC in May 2019. During the review period of October 2018 to March 2019, a total of 2,555 PSCs were completed and those PSC's included 4,545 children. This only includes children with a case plan goal of return to own home.

Permanency Safety Consultations

PSCs continue to impact outcomes in measures 6.2 a, b, c, and d. A completed initial PSC is still required for children in out-of-home (OOH) care for 90-calendar days with a case plan goal of reunification. Ongoing PSCs are then completed every 90-calendar days for each child in OOH care until the child achieves permanency through reunification or the case plan goal changes. Specific target dates to complete a PSC continue to ensure that cases have regular ongoing safety discussions throughout the critical first 12 months of removal and thereafter to expedite safe, timely permanency.

Beginning in January 2019, the PSC Coordinator's role changed to support Oklahoma's Performance Improvement Plan (PIP). The PIP implementation plan consisted of transformation zones that outlined the sequence in which the regions would receive the Supervisory Framework trainings. Region 1 was the first region to receive the PIP roll out in January 2019. The Coordinator focused PSC site visits in Region 1 for January, February, and March. The primary focus of the site visits remained the same, which was to help guide group conversation, as needed, when discussing current safety threats, barriers to permanency, and exploring and identifying action steps for the specialist to complete in working toward a child's permanency. Following the PSCs, team debriefings continued to be conducted, which included the Coordinator providing feedback to the group on observable practice strengths, as well as practice areas needing improvement. The Coordinator continues to offer guidance regarding the continued effort of improving practice in the districts through the enhancement of the specialist's ability to articulate safety. A piece of the debriefing that was added to support the PIP addressed the Supervisory Framework with the district director and supervisory team. The PSC Coordinator created a guide in collaboration with the PIP Coordinator that helps direct the conversation surrounding PIP implementation. Information or feedback gathered from the discussion was then given to the PIP Coordinator. The PIP Coordinator utilizes the information to address any issues or questions raised in leadership settings brought forward in the debriefings, which in turn continues to further support PIP implementation. The Supervisory Framework feedback gathered from staff also assists the PIP Coordinator determine which discussion topics to address with the supervisory teams during the regional transfer of learning (TOL).

The PSC Fidelity Review tool remains a critical piece in the debriefings that follow the PSCs. The tool continues to assist the reviewer in ensuring the group is accurately and consistently following the PSC process in every district for optimum effectiveness. The review tool is used to guide the conversation when debriefing with the supervisory team and district director to highlight practice areas that are strengths, as well as practices to continue to assess and develop for improvement. A review is completed for each case and then logged by the reviewer completing the tool. This reporting period, planning continued for using a different system or method for tracking the Fidelity Reviews so that the information is more readily available to analyze practice areas that need more focus. The new tracking system, "Qualtrics" launched in May 2019. When the reviews are entered online by the reviewer, the reviews are accessible at any time and can be viewed by district leadership for a more in-depth feedback loop on the Qualtrics dashboard.

Quality Assurance (QA) played an important role in the expansion of reviewers, which in turn means more reviews to utilize for feedback. QA staff will continue to assist with reviews each month in addition to the PSC participants. The frequency of QA participation will vary by region. A call with all the identified reviewers in each region was held in November to discuss the review tool's effectiveness. The group also discussed practice trends observed in their regions and what feedback or guidance was given to the PSC group regarding the identified practice and improvement ideas. From the discussion, reviewers improve their knowledge on techniques for addressing practice with the PSC group. The Fidelity Review guidance is used to assist the reviewers in answering the tool's questions. From the November group

call, the guidance tool appears to still work in effectively ensuring fidelity to the PSC process; however, discussions about the tool's effectiveness and corresponding PSC guidance are ongoing to ensure PSC sustainability.

Additional support continues to be given to district directors through PSC reports. The PSC Coordinator pulls and filters this report on a monthly basis to identify which children are due for a PSC for the upcoming month, as well as which children are overdue for a PSC. This support assists in keeping all districts current on their required PSCs. The report also captures children found "safe" at their most recent PSC 90+ days ago and still not in trial reunification. QA staff now helps filter the report to their specific region and send to their regional leadership teams. A heightened awareness exists for the children who had safe recommendation 90-plus calendar days ago and are still not in trial reunification. District directors are asked to review these children to identify what barriers to permanency exist and what can be done to move forward. Most recently, the PSC Coordinator also began filtering the report to identify children who were removed and do not have an identified case plan goal. By doing so, districts are aware of children who might have an upcoming initial 90-calendar day PSC, but would otherwise be missed because a case plan goal is not entered. This additional filtered report assists in reducing the number of overdue PSCs. The PSC Coordinator, Permanency for Teens Coordinator, and regional permanency leads continue monthly phone calls and a quarterly face-to-face meeting to support each other, staff, and the work towards the best permanency practices. QA staff participate in the calls and attend the quarterly meetings to further support their involvement with all permanency efforts.

The PSCs continue to be included in the Permanency Planning (PP) Level 1 training for new child welfare (CW) specialists and the PSC Guidebook is now disseminated to those who attend this introductory level training. The PSC training was developed and added to the online Learning Management System in May 2019. The online training's overall goal is to give staff an overview of what a PSC is, when a PSC should be completed, and the importance of each participant's role. All PP staff are required to complete the online training to ensure consistency and fidelity to the PSC process.

Targeted Permanency Efforts

A meeting was held 10/1/18 with the permanency leads and PSC Coordinator to create "Enhanced Efforts Plans" for the targeted work that was implemented in the respective districts for each region:

- Region 1 – District 4B – Canadian County
- Region 2 – District 5 – Comanche County
- Region 3 – District 7, 55B and 55H – Oklahoma County
- Region 4 – District 19 – Atoka, Bryan, Coal County
- Region 5 – District 72G – Tulsa County

Family engagement was the practice trend identified as a main area for improvement since it directly impacts permanency timeliness for children in OOH care. The work in the districts focused on specialist/parent contact and parent/child visitation. Teams designated for each region initially met with permanency staff and district directors participating in this work. Each region developed individualized plans specific to their district's needs. While the plans vary depending on the region, all the plans are efforts for engaging in quality parent/specialist contacts and child/parent visitation. Training was conducted with all PP staff in the targeted districts on best practices for effective family engagement. Videos were shared surrounding the use of "buzzwords" and how that could impact family engagement. Ongoing support is offered to the regions through a review of quality specialist documentation with supervisors, participation in PSCs, and coaching/training, as needed. Collaboration between QA staff, regional staff, and the PSC Coordinator is ongoing to identify and address any practice areas to further support the Enhanced Efforts Plans. To align work done in multiple strategies, the permanency leads met with the Placement Stability leads in October 2018. The meeting's goal was to discuss how to capture the quality and intent of Initial Meetings (IMs) during the targeted districts reviews. The targeted district review tool was modified to include a section about quality IMs as placement stability efforts in Core Strategy Placement Stability Improvement positively impact timely permanency. With the heightened work for achieving permanency within twelve months, the quality of IMs is a critical piece for placement stability.

Permanency Support Calls

In January 2018, permanency backlog calls were implemented and are ongoing to increase oversight of permanency cases for children in OOH care for 24+ months, with a case plan goal of reunification, and not in trial reunification. The primary responsibility for facilitating the calls remains with the PSC Coordinator; however, during this reporting period QA staff was designated to facilitate calls for all regions. Facilitation became a shared role between the regional QA staff and the PSC coordinator. Collaboration occurs monthly to determine who is able to facilitate the calls per region. A call's primary goal is identification of barriers that prevent the children from returning home and creating action steps with the specialist and supervisor to complete prior to the next month's call. The call is documented in the child's case and a summary of the conversation is logged on a spreadsheet and sent to district and regional directors for follow-up so that permanency practices and outcomes continue to improve. The spreadsheet also highlights the barriers in achieving permanency as well as other information related to timely permanency, such as concurrent case plans and date of last PSC. Common barriers to permanency identified during the calls are: the child has a higher level of needs that the parent cannot manage at this time; a biological parent was incarcerated or unable to locate for the majority of the case and is now engaged in services; or this is a subsequent removal and the case is progressing slowly due to the reoccurrence of abuse or neglect.

Family Meetings (FMs)

FMs continue as a strategy to impact permanency and safety for children through the life of a case. FMs are held for each family a minimum of once every six months. Additional meeting triggers include changes in family composition, changes in case plan goals, and reunification planning. The Family Continuum is a theory still in the initial stages of planning and development with the involvement of all agency levels that will expand to include stakeholders and partnerships. The overall goal is for all FMs to be conducted in a consistent manner in every region, such as the meeting's structure, participants, and intended purpose. During the current reporting period, 6,237 family meetings that included 7,227 children were conducted.

Supervisory Framework

The Supervisory Framework is an additional effort designed to increase the accessibility, practicality, and relevancy of daily supervision of specialists to ensure safety and enhance permanency and well-being outcomes for the children and families served. CWS collaborated with Capacity Building Center for States (CBCS) to develop and implement a statewide supervision framework. The Framework includes guidance and expectations for supervisors regarding intentional supervision.

Training curriculum and tools for the Supervisory Framework were developed March 2018 through July 2018. The Framework provides clear purpose, roles, and expectations of child welfare (CW) supervisors. The Framework's implementation includes a back-to-basics training on safety and permanency. The training is completed within four sessions including coaching, back-to-basics, safety-focused supervision, and Supervisory Framework. A CWS practice guidebook was developed and is utilized throughout the series trainings. The guidebook provides practice guides outlining guidance for completing quality safety assessments, quality monthly contacts, screen-out consultations, 10-day staffing, and other safety-related practice guides used by all CW programs. The guides are intended to support better engagement, assessment of needs and safety, and improved outcomes. Implementation of the Supervisory Framework occurs in transformation zones in three to six month increments.

Statewide rollout of the Supervision Framework began in August 2018. Below are the designated transformation zones with the anticipated training date of completion:

- Zone 1: Region 1 – Completed trainings November 2018
- Zone 2: Region 3 – Completed trainings April 2019
- Zone 3: Region 5 – Will complete trainings July 2019
- Zone 4: Region 2 – Will complete trainings November 2019
- Zone 5: Region 4 – Will complete trainings April 2020

Back-to-Basics training is also part of the Supervisory Framework series training and is required of all CW specialists in each CW program. This training is the first training received during the roll out of the Safety through Supervision series trainings and is mandatory for all levels of CW staff. The training outlines current safety-related practices to highlight the importance of quality safety assessments and collaboration among all CW programs involved with the family.

As part of the PIP, each transformation zone develops a Regional PIP Charter that outlines accountability to tracking supervision activities. Regions 1 and 5 currently have PIP Charters that their regional leadership utilizes for accountability and tracking. Region 3 is still in the development phase, but will have its Regional Charter completed by 7/31/19 outlining tracking and accountability. The plan for supervisor accountability is outlined in the Regional PIP Charters as determined by the Regional PIP Implementation team. Coaching and mentoring is available when needed. After training is completed, 90-calendar days of coaching and TOL activities are conducted to ensure training content and concepts are operationalized. The TOL sessions provide direct support to CW supervisors within the following areas: maltreatment in care (MIC), quality safety assessments, timely permanency, placement stability, Court Improvement Project (CIP), coaching, and the Supervisory Framework. Feedback on the supervision strategies is gathered during TOL and then used to make updates to the Framework before it is rolled out to additional transformation zones. As changes are made, transformation zones that previously completed training and TOL are notified and support is offered, as needed.

Guardianship Exits

Efforts outside of the supervisory strategies include development of a funded guardianship guide for use by judges, assistant district attorneys, and other judicial partners. Judicial partners in each region were trained on key principles related to achieving timely permanency and on expanding the use of guardianships as an exit type. The training detailed guardianship as a viable option for increasing timely permanency when a child is placed in a relative kinship home. These trainings were completed in September and October 2018, and held in Oklahoma City, Tulsa, Lawton, Enid, and McAlester. Additionally, within the back-to-basics training of the Supervisory Framework, staff are trained on efforts to increase the use of guardianship to achieve timely permanency. Within CWS, conversations with Adoptions are ongoing about using quad staffing to discuss guardianship as an option for children placed in kinship homes, but who are not legally-free. Guardianships are also discussed during routine PSCs as well as monthly Permanency Backlog calls that staff children in care for 24+ months with a case plan goal of return to own home and are not currently in trial reunification. The assigned Oklahoma Department of Human Services (DHS) guardianship liaison that is responsible for approvals pulls reports to identify a specific set of children that might be appropriate for staff to consider for guardianship as a permanency option, such as their age, length of time in OOH care and placement type, such as kinship.

Family Team, Resources, Evaluation, and Education (T.R.E.E.)

The Family T.R.E.E. Center formally launched in September 2016 and is still temporarily housed in a building donated by Chesapeake Energy while the former shelter building undergoes extensive renovations. Renovations are now expected to be complete in July 2019.

The Family T.R.E.E. remains comprised of the Family Resiliency Team, OU Fostering Hope Clinic, OU Child Study Center, on-site Quality Family Visitation services provided through NorthCare Community Home-Based Services (CHBS), onsite Clinical Visitation Coordinator, supports to foster parents, and additional services as needed. In November 2018, Parent Partners launched at the Family T.R.E.E. to connect biological parents, who are open to additional support, to a mentor who has previously successfully navigated the CW system.

From September 2016 to May 2019, a total of 160 cases met criteria for Family T.R.E.E. service eligibility. All of the eligible cases are randomly assigned to either a control group or an intervention group, with the intervention group being Family T.R.E.E. From February 1 through October 2018, the Family T.R.E.E. permanency teams were at caseload capacity; however, the Family T.R.E.E. resumed new case assignments on 11/1/18. As of June 2019, the Family T.R.E.E. Center is serving 25 families and 54 children, and of those, 15 children are currently in trial reunification.

Since receiving its first referral in September 2016, the Family T.R.E.E. has successfully supported permanency for 25 families out of 47. Of the 54 children who achieved permanency through the Family T.R.E.E.: 4 percent went to guardianship, 36 percent were adopted, and 60 percent were reunified with their biological families. Additionally, average time to case closure, including adoption and reunification, is 14.57 months with 14.9 months for reunification and 14.2 months adoption. Further outcome data will be available following full launch of the independent evaluation.

Court Improvement Project (CIP)

Child Protective Services (CPS) and PP program staff presented training during the 2018 Fall CIP workshops. The training focused on safety versus compliance, understanding the CW safety model, and expediting safe reunification and timely permanency. The dates of the training were 9/11/18, 9/20/18, 10/2/18, 10/10/18, and 10/30/18. CIP personnel in conjunction with judicial and CWS representatives from the chosen sites, presented a brief overview of the Joint Project and description of what they were seeing as a result of their efforts. During the Regional CIP Workshops all three Joint Project districts reported: increased parent engagement; increased engagement from judges at the bench, such as praising parents for the progress they are making and encouraging them to complete treatment plans; reduced time to appointment of attorneys for parents; reduced time to adjudication and disposition hearings; and increased numbers of combined adjudication/disposition hearings. On those same training dates, CPS program staff presented an additional training on drug-exposed infants and a Plan of Safe Care. Ongoing training occurs annually at the CIP State Conference. CWS is prepared to train on barriers to permanency and the judicial dashboards at the Annual CIP State Conference in October 2019.

Finalized data from the Joint Project will be analyzed and available in August 2019. CIP and CWS will work together to develop a training to report on the project's impact and provide the permanency and well-being outcomes at the Annual Judicial Conference in October 2019. When final data is available, outcomes will be provided to the CWS Executive Team, as well as the three Joint Project jurisdictions as follows:

- Small Jurisdiction – Adair County
- Medium Jurisdiction – Pottawatomie County
- Large Jurisdiction – Canadian County

Outcomes will be discussed by the Continuous Quality Improvement (CQI) Statewide Implementation team and a plan for ongoing implantation will be made. Although final data is not currently available, preliminary data shows permanency outcomes improvement in all three jurisdictions.

As detailed in the previous semi-annual report, CWS collaborated with Casey Family Programs and the CIP director to develop and implement a Jurist-In-Residence (JIR) program in Oklahoma in which a retiring Judge was selected to serve as the JIR. An agreement between Casey Family Programs and the Administrative Office of the Courts could not be reached. Without an agreement, the JIR program was cancelled.

In collaboration with the CIP and Casey Family Programs, a court expectation training is in development that outlines court engagement guidance, expectations and support for field managers, district directors, and supervisors to improve relationships and collaboration on improving outcomes, timely permanency/MIC/placement stability. A focus group was completed with specialists and leadership from all programs across the state to identify barriers to permanency and key practice components of specialists in court. The focus group of CW staff met on 3/11/19 and the collected information was summarized and provided to CIP during the 5/3/19 CIP meeting. Key practice components identified by the focus group consisted of etiquette in court; a format for consistent report writing and documentation; consistent expectations of communication with court partners to build relationship and trust; and roles/responsibilities of specialists, supervisors, and district directors when adverse rulings are made by the court. A CIP sub-group, composed of CW, attorneys, judges, and mental health partners, is currently working on developing guidance and expectations for district directors and supervisors to build relationships with local court jurisdictions. The guidance will also include responsibilities of the district director and supervisor when adverse rulings are made on cases that negatively impact outcomes. For example, consider when contrary to CWS recommendation, a judge suspends visitation due to positive

drug screens. The guidance is to outline clear expectations of the district director in communicating with the court system on negative effects of suspending visitation. It will also outline the specialist and supervisors responsibility to advocate for the family. The court expectation online training will be required for CW staff and available in November 2019.

Strategy Collaboration

In addition to the permanency efforts outlined above, discussions between leads assigned to permanency efforts or supporting roles such as Quality Assurance staff, will participate in a call on 8/8/19. The purpose of the call will be to review 6.2 data that has been pulled for the upcoming reporting periods. By looking ahead at the number of children that need to exit timely in their respective measures: a, b, c, and d, the Permanency leads can look at any crossover strategies that could be utilized as an additional support to further intensify permanency efforts.

6.3: Re-entry Within 12 Months of Exit

Operational Question

Of all children discharged from foster care in the 12-month period prior to the reporting period, what percentage re-entered care within 12 months of discharge?

Data Source and Definitions

Re-entry within 12 months measures all children discharged to permanency, not including adoption, from foster care in the 12-month period prior to the reporting period and the percentage of children who re-enter foster care during the 12 months following discharge. This is the same as the Federal Metric and this data is pulled from AFCARS data.

Description of Denominator and Numerator for this reporting period

Denominator: All children who exited foster care from 4/1/2017 through 3/31/2018

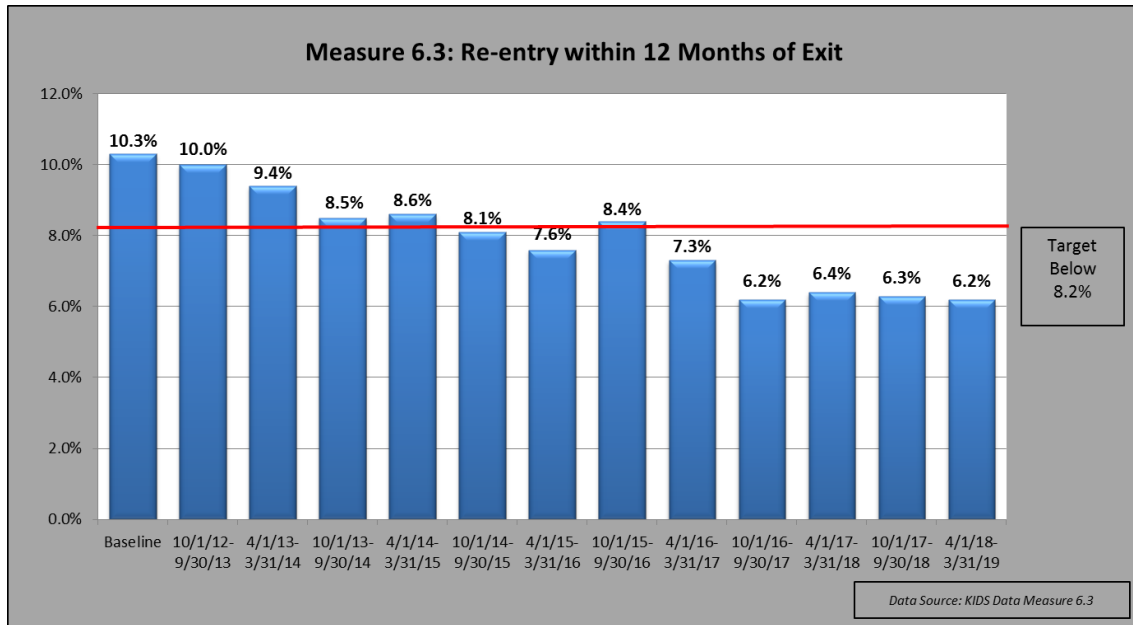
Numerator: All children who exited foster care from 4/1/2017 through 3/31/2018 and re-entered care within one year of exit.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All exits from 10/1/2010 - 9/30/2011			10.3%
10/1/2012 – 9/30/2013	All exits from 10/1/2011 - 9/30/2012	234	2,334	10.0%
4/1/2013 – 3/31/2014	All exits from 4/1/2012 - 3/31/2013	223	2,375	9.4%
10/1/2013 – 9/30/2014	All exits from 10/1/2012 - 9/30/2013	225	2,638	8.5%
4/1/2014 – 3/31/2015	All exits from 4/1/2013 - 3/31/2014	230	2,682	8.6%
10/1/2014 – 9/30/2015	All exits from 10/1/2013 - 9/30/2014	223	2,756	8.1%
4/1/2015 – 3/31/2016	All exits from 4/1/2014 - 3/31/2015	218	2,869	7.6%
10/1/2015 – 9/30/2016	All exits from 10/1/2014 - 9/30/2015	238	2,822	8.4%
4/1/2016 – 3/31/2017	All exits from 4/1/2015 - 3/31/2016	207	2,828	7.3%
10/1/2016 – 9/30/2017	All exits from 10/1/2015 - 9/30/2016	187	3,004	6.2%

4/1/2017 – 3/31/2018	All exits from 4/1/2016 - 3/31/2017	185	2,879	6.4%
10/1/2017 – 9/30/2018	All exits from 10/1/2016 - 9/30/2017	165	2622	6.3%
4/1/2018 – 3/31/2019	All exits from 4/1/2017 - 3/31/2018	155	2482	6.2%
Target				8.2%

Section 2, Table 6.3-1



Section 2, Graph 6.3-1

Commentary

The number of children re-entering out-of-home care within a 12-month period is now at 6.2 percent, which remains below the set target of 8.2 percent. During this reporting period, Child Welfare Services (CWS) experienced an improvement by 0.1 percent. The measure remains 4.1 percent lower than the original baseline and exceeds the target by 2 percent. This is the second consecutive reporting period of positive trending.

Permanency Safety Consultations (PSCs) continue to be the main strategy implemented to maintain reduced re-entry rates. PSCs with a safe recommendation still include the completion and documentation of an assessment of child safety prior to reunification as an action step. Additional follow-up activities are developed and identified with the district director and PSC team to support safe family reunification, as needed. Services such as Comprehensive Home-Based Services, Intercept, and Systems of Care continue to be utilized to support families during trial reunification. Permanency Backlog Calls also continue to serve as an effort to ensure appropriate services are referred to meet the family’s needs prior to reunification occurring. This is an additional coaching strategy that instills the importance of making sure child welfare staff appropriately and accurately assessed the family and are aware of what services need to be put in place for successful reunification and thereafter following case closure. Additionally, with Program Improvement Plan (PIP) implementation, the Safety through Supervision Framework is another supportive strategy identifying appropriate needs and services for families through intentional case staffings between the supervisor and specialist. CWS will continue to monitor this measure and engage in ongoing activities to ensure children remain safely in their homes post-reunification.

6.4: Permanency for Legally-Free Teens

Operational Question

Of all legally-free foster youth who turned age 16 in the period 24 to 36 months prior to the report date, what percent exited to permanency by age 18?

Data Source and Definitions

Among legally-free foster youth who turned 16 in the period 24 to 36 months prior to the report date, Measure 6.4 reports the percent that exited to permanency by age 18. An "Exit to Permanency" includes all youth with an exit reason of adoption, guardianship, custody to relative, or reunification. "Legally free" means a parental rights termination date is reported to AFCARS for both mother and father.

Description of Denominator and Numerator for this reporting period

Denominator: All children in care who turned 16 from 4/1/2016 through 3/31/2017 and were legally free at the time they turned 16.

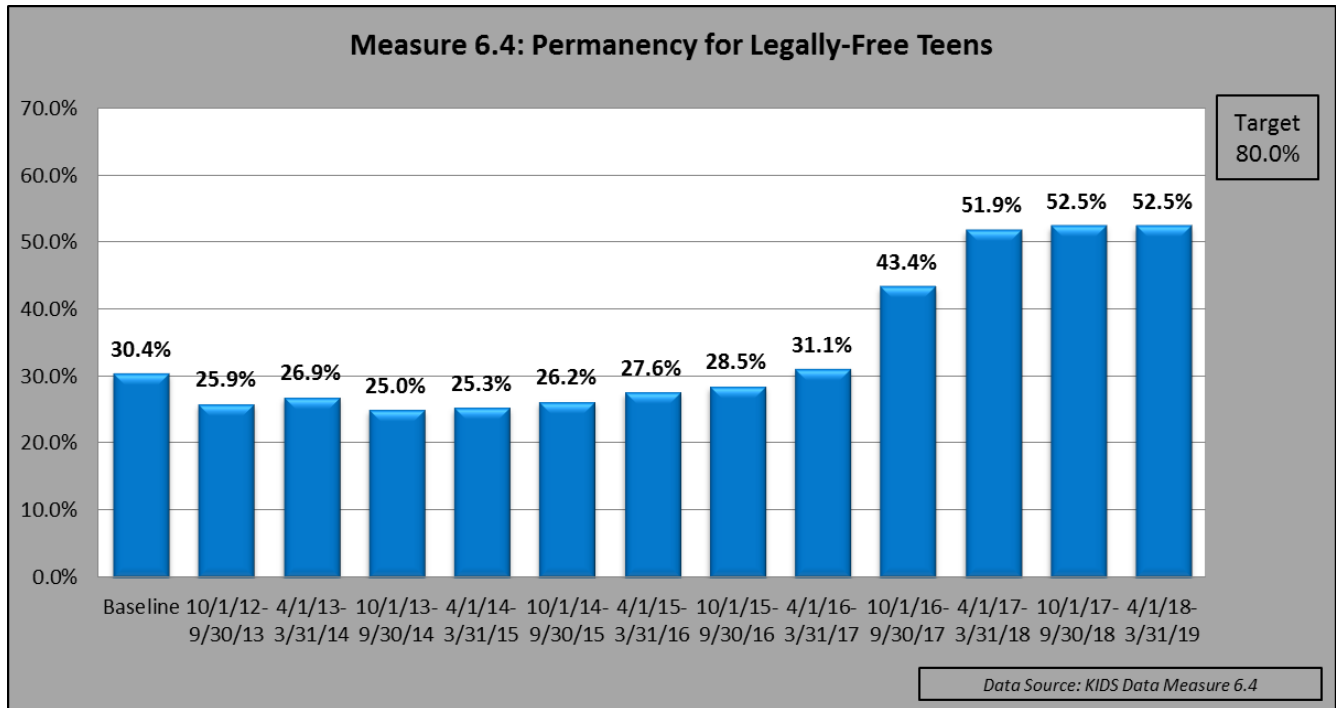
Numerator: The number of children, who turned 16 from 4/1/2016 through 3/31/2017, were legally free at the time they turned 16, and reached permanency prior to their 18th birthday.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children in care who turned 16 from 10/1/2009 - 9/30/2010 and were legally free at the time they turned 16.			30.4%
10/1/2012 – 9/30/2013	All children in care who turned 16 from 10/1/2010 - 9/30/2011 and were legally free at the time they turned 16.	44	170	25.9%
4/1/2013 – 3/31/2014	All children in care who turned 16 from 4/1/2011 - 3/31/2012 and were legally free at the time they turned 16.	36	134	26.9%
10/1/2013 – 9/30/2014	All children in care who turned 16 from 10/1/2011 - 9/30/2012 and were legally free at the time they turned 16.	37	148	25.0%
4/1/2014 – 3/31/2015	All children in care who turned 16 from 4/1/2012 - 3/31/2013 and were legally free at the time they turned 16.	37	146	25.3%
10/1/2014 – 9/30/2015	All children in care who turned 16 from 10/1/2012 - 9/30/2013 and were legally free at the time they turned 16.	33	126	26.2%
4/1/2015 – 3/31/2016	All children in care who turned 16 from 4/1/2013 - 3/31/2014 and were legally free at the time they turned 16.	29	105	27.6%
10/1/2015 – 9/30/2016	All children in care who turned 16 from 10/1/2013 - 9/30/2014 and were legally free at the time they turned 16.	35	123	28.5%
4/1/2016 – 3/31/2017	All children in care who turned 16 from 4/1/2014 - 3/31/2015 and were legally free at the time they turned 16.	41	132	31.1%
10/1/2016 – 9/30/2017	All children in care who turned 16 from 10/1/2014 - 9/30/2015 and were legally free at the time they turned 16.	59	136	43.4%

4/1/2017 – 3/31/2018	All children in care who turned 16 from 4/1/2015 - 3/31/2016 and were legally free at the time they turned 16.	84	162	51.9%
10/1/2017 – 9/30/2018	All children in care who turned 16 from 10/1/2015 - 9/30/2016 and were legally free at the time they turned 16.	73	139	52.5%
4/1/2018 – 3/31/2019	All children in care who turned 16 from 4/1/2016 - 3/31/2017 and were legally free at the time they turned 16.	64	122	52.5%
Target				80.0%

Section 2, Table 6.4-1



Section 2, Graph 6.4-1

Pinnacle Plan Measure 6.4 - Number and Percent of Children who Turned 16 while in Foster Care and Legally-Free												
Exit Reason	REGION 1		REGION 2		REGION 3		REGION 4		REGION 5		TOTAL	
ADOPTION	18	38.3%	32	45.1%	24	36.8%	17	44.0%	20	31.8%	111	38.7%
REUNIFICATION	0		1		1		1		1		4	
GUARDIANSHIP	5		4		7		4		7		27	
CHILD AGED OUT / OTHER	7	13.3%	7	11.0%	16	19.5%	3	10.0%	20	22.7%	53	16.1%
OTHER EXITS	1		2		1		2		0		6	
Still in Care	29	48.3%	36	43.9%	38	43.7%	23	46.0%	40	45.5%	166	45.2%
TOTAL	60		82		87		50		88		367	

Data Source: Totals include Measure 6.4 for reporting periods ending 3/31/19, 9/30/19, 3/31/20, 9/30/20, and 3/31/21. Run Date 4/5/19

Section 2, Table 6.4-2

Commentary

From 4/1/2016 through 3/31/2017, a total of 122 legally-free youth turned 16 years of age. Of these youth, 64 or 52.5 percent achieved permanency and 58 or 47.5 percent exited care prior to reaching permanency.

Achieved Permanency:

- 48 youth were adopted (39.3%);
- 14 youth were placed in guardianship or custody to relative (11.5%); and

- 2 youth exited to reunification (1.6%).

Exited Care Prior to Reaching Permanency:

- 53 youth exited care via emancipation/aging out (43.4%); and
- 5 youth exited for other reasons (4.1%).

Although the performance remained the same this period as the prior reporting period, it is an increase since the baseline period of 22.1 percent. The performance remains the same as the previous period which was the highest of all reporting periods at 52.5 percent. Efforts continue to support Core Strategy Permanency for Legally-Free Teens to increase the number of legally-free youth 16 through 17 years of age exiting care to permanency before their 18th birthday and to decrease the number of youth in this population that are in out-of-home care. Continued statewide implementation plan is guided by efforts that include multi-level heightened monitoring of legally-free youth starting at age 15, the work of the permanency expeditors (PEs) for youth with the case plan goal (CPG) of Planned Alternative Permanent Placement (PAPP), and the inclusion of supports and messaging regarding the importance of legal permanency for teens within the Oklahoma Successful Adulthood (OKSA) program.

As part of the statewide plan, each youth over the age of 13 is staffed by the district director before the young person officially comes into custody and has a multi-level staffing that includes the district director for legally-free teens starts at ages 15 and to continue at 15.5, 16, 16.5, 17, 17.3, 17.6, and 17.9 to ensure progress is made towards legal permanency. The Permanency for Teens Coordinator (PTC) now provides the district directors with the names of youth that are required to have a multi-level staffing each month. This practice began in June 2019 and will be submitted to the district director by the first of each month going forward. The PEs are assisting in the tracking and documentation of the multi-level staffings when their caseload permits. The 6.4 Tracking Tool continues to be used to document supportive efforts and activities occurring in each region. The PEs continue to use the PE Tracking Tool and PE Monthly Report to track the work completed on their caseload. They continue to hold monthly conference calls with primary workers and their supervisors for the youth they are assigned to work with. These conference calls continue to support the messaging to ensure staff are continually searches for permanency for teens in creative, effective, and supportive methods. When caseloads permit, the PEs are assigned to perform the same efforts with 16-17 year olds with the CPG of guardianship. The PE continues to visit every youth bi-monthly unless a youth is AWOL or missing from care and no contact or location information is known. The PEs are supervised by each regional permanency lead and receive support from the PTC. The PEs continue to participate in monthly face-to-face trainings with the PTC, as well as OKSA program-sponsored trainings and events. The PEs continue to participate in weekly support conference calls with the PTC that include a discussion of successes and barriers.

Another responsibility role of the PE is to assist primary child welfare (CW) specialists with adhering to policy when selecting the CPG of PAPP. PEs continue to staff potential PAPP cases with primary CW specialists to assist with the process and to provide guidance the primary CW specialist is considering this CPG. The PE provides the *Planned Alternative Permanent Placement Case Plan Goal Change Checklist* to assist with the goal changes. When the CPG change to PAPP is deemed appropriate and after meeting with the teen and the permanent connections to discuss what this change truly means, the PE also supports the youth's engagement in OKSA services. While the youth is in care, information related to the OKSA after care program, Yes I Can! is provided to set up communication between the young person and the Yes I Can! network to access benefits and resources after he or she leaves care. The PE also assists with referrals to Youth Village's transitional program LifeSet when the transitioning youth will reside in the agency's service area. PEs continue to participate in the less frequent case transfer calls with the CW specialist from the Adoption Transition Unit (ATU) when an ATU specialist was previously assigned to youth whose CPG was changed from adoption to PAPP. The PEs also participate in regional shelter staffings and family meetings (FM) when they occur.

To provide consistent information about legal permanency for teens in care, the PE and PTC began to implement the Permanency for Teens Professional Development Trainings (PDTs) in Regions 4 and 5 on 5/28/19, 5/30/19, and 5/31/19. The PDT scheduled for May 29th was cancelled due to the flooding in Region 4 and rescheduled for 8/14/19. Subsequent

trainings in Regions 1, 2, and 3 will occur in July on the 7/8/19, 7/10/19, 7/16/19, 7/18/19, 7/30/19, and 7/31/19. These trainings share information gained since the PEs began the enhanced efforts and include discussions on the importance of continually searching for permanency for teens, ways to achieve permanency from the start, how to engage teens in permanency conversations, and the misconceptions surrounding permanency for teens and benefits. The PDTs are open to primary CW specialists, supervisors, and district directors, along with foster parents, and tribal specialists. Additionally, the two-day OKSA level training was revised to include modules based on the PDTs. This ensures the Permanency for Teens information is embedded in the training that is mandatory for all CW specialists. The PEs, PTC, and OKSA program supervisor presented at each region's leadership meetings to discuss the PDTs as they roll out, provide an opportunity to obtain feedback from each region's leadership team, and review a PE's role. The dates included 2/22/19, 4/12/19, 4/26/19, 5/24/19, and 6/28/19.

The ongoing solicitation of input from alumni teens and teens assigned a PE created a feedback loop that guides future efforts. Feedback from alumni teens is collected shortly after the young person exited care and agreed to be contacted. Permission to solicit this information is obtained during the PE's last visit with the young person before exiting care. The PTC conducts a brief survey of 15-20 minutes by phone. Additionally, the PTC solicits feedback from youth assigned a PE while currently in care after the PE was assigned for a minimum of 90-calendar days. The qualitative information obtained from youth is used to continually guide and shape a PE's duties and the work conducted with the assigned youth. During this reporting period, the length of time the PE worked with a teen varied from three to nine months. The teens interviewed for this reporting period were placed in congregate care and foster homes, both kinship and traditional. The PE questions from the survey include:

- How did you feel when you were first assigned to work with a PE?
- Do you feel the PE you are currently working with has helped you move closer to permanency?
- Is there anything about being assigned a PE you do or do not like?
- Is there anything else a PE should do that would make your experience better?

While no youth was opposed to having a PE through their remaining time in care when this survey was initially conducted, consent has been difficult to get over March, April, and May from young people agreeing to be contacted after the age of 18. When permission was granted, the contact information was not reliable and was either unavailable or changed.

The OKSA program conducted a stakeholder meeting on 11/29/18 with judges, CW staff, foster parents, community partners, and tribal staff. The stakeholder meeting discussions encompassed the needs of teens related to the topics of permanency, housing, assessment and transition planning, employment, and cultural and personal identity. The information collected was included in the Child and Family Services Plan (CFSP) that outlines the OKSA program's five-year plan for working with teens in care. The responses and recommendations obtained were evaluated for commonalities and incorporated into the CFSP and will be taken into consideration when assessing policy changes. Additionally, OKSA continued to partner on Core Strategy Resource Home Recruitment – Foster Care to support the efforts currently under way to recruit and support current and potential foster and adoptive homes that would be affirming and accepting of a teen placement. OKSA program staff and Oklahoma Foster Youth Alumni (OKFYA) members participated in panels for Recruitment and Retention events, such as foster parent support groups, educational workshops, and recruitment events targeting foster and adoptive homes. Additionally, during the week of 6/17/19 through 6/21/19, Michael Sanders, contracted by the OKSA program, provided a weeklong event similar to the Permanency for Teens week that occurred in May 2018. Information on how to recruit for this population, as well as tools on how to retain affirming homes for teens in custody were covered and provided to the Recruitment and Retention Unit. By partnering with Recruitment and Retention, Michael Sanders and OKSA can offer concrete information surrounding the unique rewards and challenges that come with fostering and adopting teens. Acquiring more foster homes willing to accept teens into their home could secure relational permanency and improve the legal permanency rate for teens in care.

The OKSA-sponsored Teen Conference was held 6/5/19 through 6/7/19. The conference had opportunities for teens to make permanent connections, participate in a variety of workshops, and listen to motivational speakers. One workshop focused on "Myth Busting Permanency" and was led by the Region 1 PE and PTC, as well as another OKSA staff member. The workshop guided teens on how to make connections with others through common interests, conversation starters, and individual similarities. The workshop also focused on the myths about legal permanency and the benefits a teen may still access when they achieve legal permanency. A similar workshop will be held during the OKSA's JV Teen Conference targeting 14-year olds on 7/25/19.

Additionally, the OKSA permanency publication postcard ***Should I Say YES to Permanency*** was distributed during staff training, regional leadership meetings, and at family group conferences. OKSA contact information is on the postcard and is distributed to the county offices throughout the state. This postcard will join others provided by the OKSA program related to the 7 Key Elements that include health, housing, education, employment, essential documents, life skills, and permanent connections. In addition to the Permanency Postcard, another OKSA publication titled ***Don't Stop That Adoption*** was developed. This publication separates myths from facts on educational benefits available for adopted youth, as well as information on scholarships for youth who are adopted prior to meeting age criteria to receive some of the educational benefits.

In relation to the OKSA program's section in the five-year CFSP submitted in June 2019, Permanency for Older Youth is included as one of the focus areas in addition to Assessment and Transition Planning, Education, Housing, Employment, Cultural and Personal Identity Formation, and OKFYA. The primary permanency objective in the CFSP aligns with Core Strategy Permanency for Older Legally-Free Teens to increase the number (percentage) of youth who achieve legal permanency. Over the next five years, the OKSA program will explore increasing accessibility to pre- and post-adoption resources; support recruitment and retention to increase placement options affirming of teens and their needs; and support field staff through educational resources and trainings on the importance of legal permanency for teens. The secondary objective is to increase the number (percentage) of youth who achieve relational permanency. This will be done by the exploration of resources and opportunities to connect young people with community partners and organizations surrounding the interest and needs of the young person and to create opportunities for community engagement. Increasing opportunities for young people to support one another through peer-to-peer support groups or events will also be looked at over the next five years. Additionally, the PTC and PP program supervisor will discuss how to potentially include the PEs in Permanency Safety Consultations and backlog calls for teens in custody 24-months or longer. The intent is to focus on additional forms of legal permanency since reunification did not occur after 24-months or more of being in custody. More discussion is needed to determine the effectiveness and feasibility of these potential next steps, taking into consideration a PE's current duties and caseloads.

6.5: Rate of Adoption for Legally-Free Children

Operational Question

Of all children who became legally free for adoption in the 12-month period prior to the year of the reporting period, what percentage were discharged from foster care to a finalized adoption within 12 months of becoming legally free?

Data Source and Definitions

All children who became legally free for adoption in the 12-month period prior to the year of the reporting period with the percentage who were discharged from foster care to a finalized adoption in less than 12 months from the date of becoming legally free are reported in Measure 6.5. "Legally Free" means there is a parental rights termination date reported to AFCARS for both mother and father. This measure is federal metric C 2.5.

Description of Denominator and Numerator for this reporting period

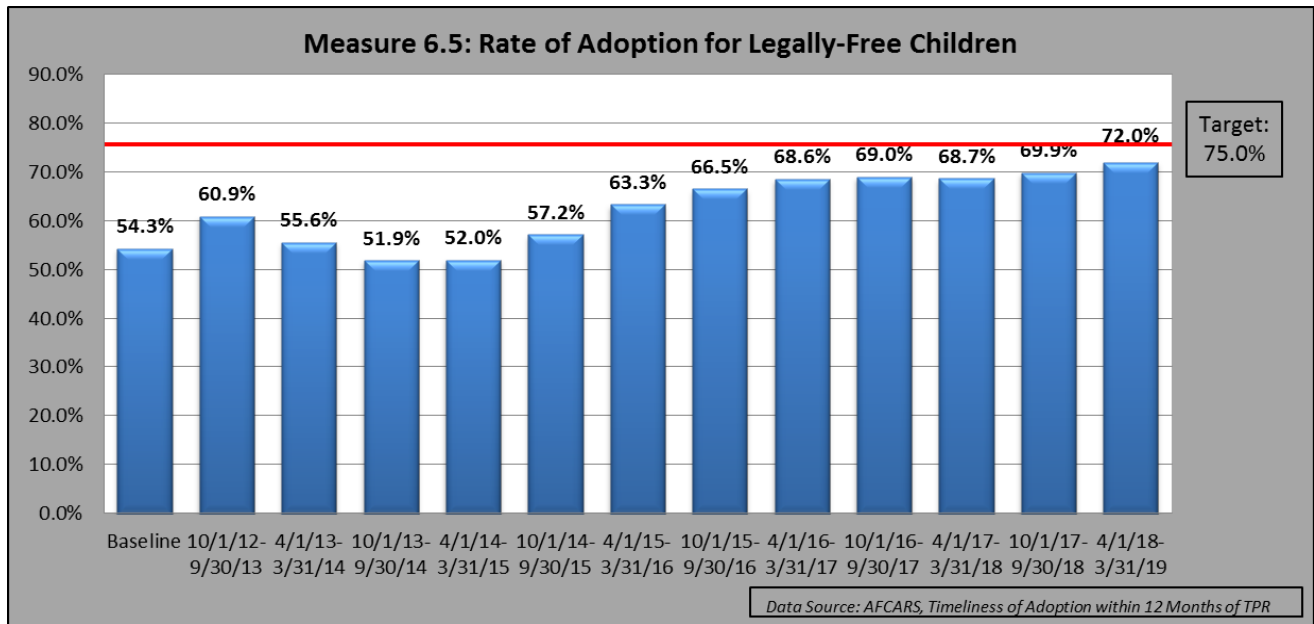
Denominator: All children who became legally free for adoption from 4/1/2017 through 3/31/2018.

Numerator: The number of children who became legally free for adoption from 4/1/2017 through 3/31/2018 **and** were discharged from care to a finalized adoption in less than 12 months from the date they became legally free.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children who became legally free from 10/1/10 - 9/30/2011			54.3%
10/1/2012 – 9/30/2013	All children who became legally free from 10/1/11 - 9/30/2012	898	1,474	60.9%
4/1/2013 – 3/31/2014	All children who became legally free from 4/1/12 - 3/31/2013	857	1,540	55.6%
10/1/2013 – 9/30/2014	All children who became legally free from 10/1/12 - 9/30/2013	839	1,618	51.9%
4/1/2014 – 3/31/2015	All children who became legally free from 4/1/13 - 3/31/2014	935	1,797	52.0%
10/1/2014 – 9/30/2015	All children who became legally free from 10/1/13 - 9/30/2014	1,200	2,099	57.2%
4/1/2015 – 3/31/2016	All children who became legally free from 4/1/14 - 3/31/2015	1,459	2,304	63.3%
10/1/2015 – 9/30/2016	All children who became legally free from 10/1/14 - 9/30/2015	1,567	2,355	66.5%
4/1/2016 – 3/31/2017	All children who became legally free from 4/1/15 - 3/31/2016	1,754	2,558	68.6%
10/1/2016 – 9/30/2017	All children who became legally free from 10/1/15 - 9/30/2016	1,886	2,734	69.0%
4/1/2017 – 3/31/2018	All children who became legally free from 4/1/16 - 3/31/2017	1,770	2,577	68.7%
10/1/2017 – 9/30/2018	All children who became legally free from 10/1/16 - 9/30/2017	1,674	2,395	69.9%
4/1/2018 – 3/31/2019	All children who became legally free from 4/1/17 - 3/31/2018	1,669	2,319	72.0%
Target				75.0%

Section 2, Table 6.5-1



Section 2, Graph 6.5-1

Commentary

During this review period, Child Welfare Services (CWS) showed an increase of 2.1 percent, which brings the total to 72.0 percent. This is the highest of all reporting periods for this measure. Though slightly below the target, this is an overall improvement of 17.7 percent since setting the baseline.

Specialized Adoption supervisory units were established in 2017 as part of a special project to focus on adoption finalizations in Regions 4 and 5; those specialized adoption units remain in place. Tulsa County has a new Chief Judge and the Foster Care and Adoptions (FC&A) field deputy director, Region 5 deputy director, and the Oklahoma Department of Human Services (DHS) attorney met with the Tulsa County District Court Juvenile Division in March 2019. During the meeting, the parties discussed the juvenile court process related to reaching timely permanency for all custody children. The partnership between FC&A and the Tulsa County district attorney's (DA's) office continues its efforts to improve in the timeliness of termination of parental rights, when needed. The Tulsa County DA's office is still in the process of completing a uniform termination order to eliminate the need for any additional follow-up orders by the DA's office. When the order is completed and reviewed, it will be available for all Oklahoma juvenile courts to utilize. The regional Adoption Timeliness Accountability Team (ATAT) leads and the FC&A field managers met in March 2019 to discuss the status of ATAT, along with potential ways to improve the process.

Based on feedback from ATAT's, region-to-region requests were a common barrier to achieving more timely adoption finalizations. As a result of this feedback, one of the changes made in February 2019 was the Resource File Request for Adoption (RFRA). Rather than a child's county of jurisdiction Adoption specialist sending a generic request from one county to another to send copies of needed information from a resource file, the Adoption specialist will now research the resource file cabinet and print all of the needed documents for authorization and request the adoption addendum from the Resource specialist who has 15 days to complete the addendum. When the request for the addendum is not received within the designated timeframe, the FC&A deputy director becomes involved to resolve the issue. In addition, the ATAT's determined that CWS should be more proactive in ATAT staffing. Beginning in April, all regions statewide, minus Region 3 who staffs all Quad 1 children, started staffing the following:

- children who are Quad 1 for over 60-calendar days;
- children authorized over 14 days and not in trial adoption; and
- children in trial adoption over 30-calendar days without finalizing.

The ATAT leads and field managers continue to analyze and collect data on common issues creating barriers for timely permanency for legally-free children in their identified placements. During each region's ATAT calls, measurable action steps and deadlines are created by the stakeholders to resolve the barrier to permanency for these children, and regional leads follow up by email after the call to determine if the action steps were completed, as well as if further action is needed. In August 2019, KIDS enhancements should be released that will allow staff to better understand the delays with Quad 1 children as a listing of each child's different circumstances will be required. KIDS also added the number of months each child was removed to the ongoing Quad 1 report, so ATAT's can more easily identify different cohorts of children to determine if enhanced efforts are needed.

Previously, overdue annual updates/reassessments were determined to be a barrier to reaching permanency goals. As a result, FC&A Leadership developed a backlog plan to address this issue. Each regional field manager develops their own plan to resolve the backlog issue and reports their plan the first Monday of each month to the FC&A field deputy director. The goal of this process is to resolve the backlog and increase staff expectations and accountability. This review process began in January 2019 and showed positive trending improvements across the state. This model decreased the number of overdue annual updates/reassessments each month, and also ensured that staff assess child safety more timely, address any needs for the child and family, and provide exceptional customer service to resource families. CWS believes that each of these strategies will increase placement stability and in turn improve adoption timeliness to permanency for children.

6.1: Rate of Permanency for Legally-Free Children with No Adoptive Placement

Operational Question

Of children who were legally free but not living in an adoptive placement as of January 10, 2014, what number of children exited care to a permanent placement?

Data Source and Definitions

All children who were legally free for adoption as of 1/10/2014 and did not have an identified adoptive family with the percentage who have since achieved permanency, either through adoption, guardianship, or reunification are reported in Measure 6.1. The target for this measure is that 90.0 percent of the children age 0-12 years, and 80.0 percent of the children age 13+ years will achieve permanency. "Legally free" means there is a parental rights termination date reported to AFCARS for both mother and father or for one parent when the child was previously adopted by a single parent. In the KIDS system, these children are classified as "Quad 2" children, indicating that these children are legally free and have no identified adoptive placement.

Description of Denominator and Numerator for this reporting period

Denominator: All Quad 2 children with a case plan goal of adoption as of 1/10/2014.

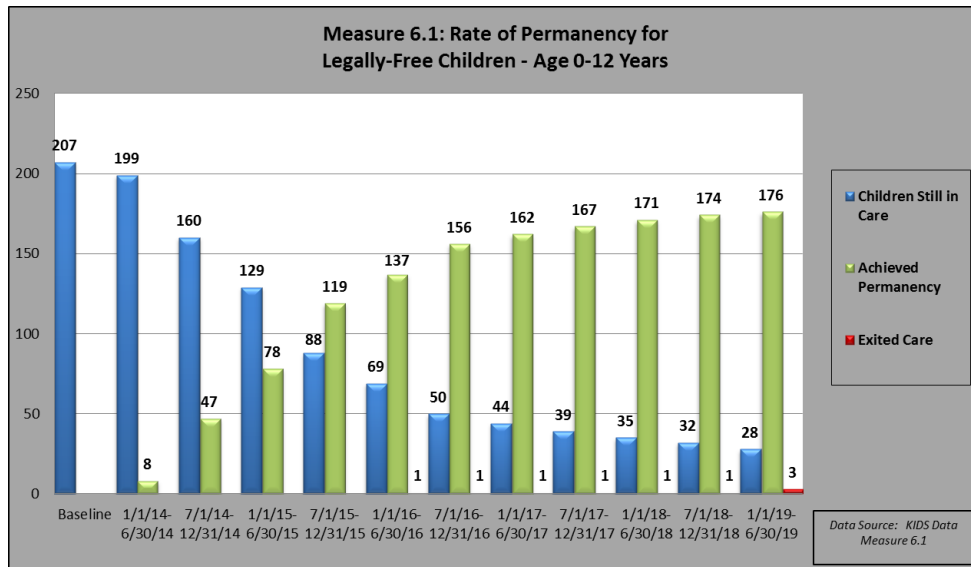
Numerator: The number of Quad 2 children with a case plan goal of adoption who achieved permanency.

Trends

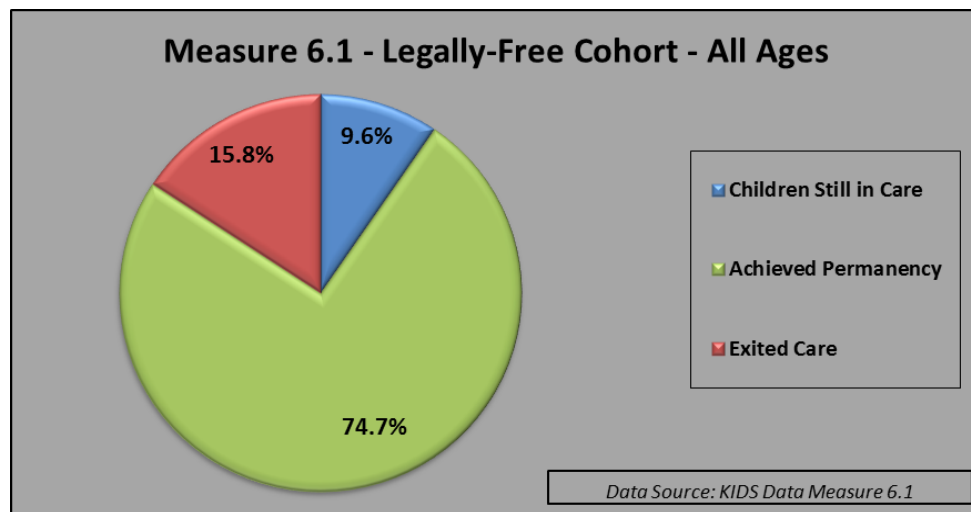
Reporting Period	Population	Numerator	Denominator	Result
Cohort Baseline 1/10/14				292 Children
1/10/2014 – 6/30/2014	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	8	207	3.9%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	1	85	1.2%
7/01/2014 – 12/31/2014	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	47	207	22.7%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	8	85	9.4%
1/01/2015 – 6/30/2015	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	78	207	37.7%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	17	85	20.0%
7/01/2015 – 12/31/2015	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	119	207	57.5%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	23	85	27.1%
1/01/2016 – 6/30/2016	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	137	207	66.2%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	32	85	37.6%
7/01/2016 – 12/31/2016	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	156	207	75.4%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	34	85	40.0%
1/01/2017 – 6/30/2017	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	162	207	78.3%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	37	85	43.5%

7/01/2017 – 12/31/2017	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	167	207	80.7%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	39	85	45.9%
1/01/2018 – 6/30/2018	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	171	207	82.6%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	39	85	45.9%
7/01/2018 – 12/31/2018	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	174	207	84.1%
	All Quad 2 children age 13 or older as of 1/10/14 with a case plan goal of adoption	42	85	49.4%
1/01/2018 – 6/30/2019	All Quad 2 children age 0-12 as of 1/10/14 with a case plan goal of adoption	176	207	85.0%
Target		90.0% (Age 0-12)	80.0% (Age 13+)	

Section 2, Table 6.1-1



Section 2, Graph 6.1-1



Section 2, Chart 6.1-1

Commentary

Of the 292 children in the original cohort from 1/10/2014, a total of 218 children or 74.7 percent achieved permanency, 46 children or 15.8 percent left care to non-permanent exits, and 28 children or 9.6 percent remain in care.

As of 6/30/19, for the cohort of 207 children, age 0-12 who were legally free without an identified placement, 176 or 85.0 percent reached permanency. Of the remaining 28 children age 0-12 in care, they have the following case plan goals: 27 children have a case plan goal of adoption and 1 child has a case plan goal of guardianship. One of the remaining 28 children is currently placed in trial adoption. Of the 67 children that were six years old or under as of 1/10/14, 61 children achieved permanency as of 6/30/19, 91.0 percent, which exceeds the overall target of 90.0 percent for those children six years and under. Of the 140 children age 7-12, a total of 115 children or 82.1 percent have achieved permanency.

The Adoption Transition Unit (ATU) and KIDS management collaborated to develop a dashboard featuring key information in an at-a-glance format pulled directly from the YI823/Ongoing Quad 2 report, which launched during this reporting period. Additionally, KIDS will be enhancing the adoption efforts screen to more accurately reflect current efforts and improved technology, which is tentatively scheduled for release in November 2019.

During this reporting period, adoption events were held in March and May, and included the participation of potential adoptive families and waiting children. These events followed the traditional plan and setup. In March, Region 3 hosted an event in Oklahoma City, in which 46 families made inquiry on 58 children. In May, Region 1 hosted an event in Stillwater, in which 45 families made inquiry on 43 children. As always, families are able to inquire about children even if the children are unable to attend the event.

The predominant placement type for children and youth attending events during this reporting period was a higher level of care than traditional foster care, and specifically, Level E. Because of this, ATU is working with the Foster Care and Adoptions (FC&A) leadership team. Currently, three statewide adoption events are held each year that are designed for any waiting child, and one event per year that is focused on teens. Feedback from families indicate the size of the events make it difficult to find and spend time with the children they are interested in. A pilot event specifically for youth placed in higher levels of care from only one region is planned for December 2019.

To enhance children and youth's understanding of the family finding process and where the Heart Gallery (HG) fits, ATU continues to incorporate Permanent Connections Meetings for 12-17 year olds. During these, ATU staff and youth discuss permanency, families, adoption, and the video process for the Heart Gallery production day.

During this reporting period, ATU transitioned from Efforts Staffings to Quad 2 Adoption Timeliness and Accountability Team (Q2 ATAT) to review Quad 2 cases. A review of the process revealed, although effective in bringing parties to the table to discuss barriers or obstacles to permanency, early momentum was not sustained and Efforts Staffings did not achieve the desired outcome of illuminating areas of need regarding permanency efforts customized for each youth. Parallel to this revelation were ongoing conversations about amplifying permanency efforts specific to youth and children in higher levels of care. Thus, ATU developed an enhanced staffing practice by modifying the existing ATAT process.

Six Q2 ATAT meetings were held in May and June 2019, with some follow-up meetings for the same children. Completion of the Q2 ATAT meetings with the initial pilot cohort of 11 children from Region 4 occurred mid-July, and follow-up will continue as appropriate to assure permanency is achieved. After the initial pilot cohort is completed, ATU will evaluate the process and any need for changes moving forward. A programs field representative (PFR) from FC&A Programs is also engaged to assist with evaluative efforts, as well as potentially facilitate this process moving forward. Future expansion statewide is possible if this process is determined to be productive and effective in identifying and overcoming barriers to youth permanency. ATU anticipates this process will continue to increase communication among

internal and external stakeholders, strengthen partnerships across programs, and result in increased levels of engagement with staff leading to improved permanency outcomes for youth in care.

Specialized Media Recruitment

- Oklahoma Heart Gallery activity: Three photo and video production events were held during this reporting period on 3/22/19, 4/19/19, and 6/27/19 photographing and videoing 82 children and youth.
- Oklahoma Heart Gallery/online presence: As of 6/30/19, 251 children total were on the website. Of those children, 75 are available, 119 are unavailable for various reasons, and 57 are listed as family found. AdoptUSKids.org: 50 additional children were registered during this reporting period.
- AdoptEx.org: 37 additional children were registered during this reporting period, with 34 updates.
- Media features: Three news stations featured waiting children.
 1. KFOR, an Oklahoma City station, featured A Place to Call Home. During this reporting period, 25 videos were completed featuring 31 children.
 2. KTUL, a Tulsa station, featured Waiting Child. During this reporting period, four children were filmed and featured.
 3. KSWO, a Lawton station, featured A Child Who Hopes. During this reporting period, six children and youth were filmed and featured.

From January through June 2019, Foster Care and Adoption Support Center received 4,345 inquiries. The numbers for Inquiry Channel, Specified Interest, and Referral Source are represented in Section 2, Table 6.1-2. During this time, Referral Source was specified on 2,979 inquiries, 68.56 percent.

Inquiry Channel			Referral Source		
Internet	2778	63.94%	Internet	803	26.96%
Direct Phone	835	19.22%	Facebook	703	23.60%
Hotline	574	13.21%	Adoptive Parent	318	10.67%
AdoptUSKids	122	2.81%	Foster Parent	221	7.42%
Email	21	0.48%	Friend	215	7.22%
Recruitment Event	12	0.28%	TV	156	5.24%
Other	3	0.07%	AdoptUSKids	155	5.20%
			Relative	112	3.76%
			DHS Employee/Website	82	2.75%
			Faith Based	64	2.15%
Specified Interest			Other	53	1.78%
Adoption	2547	58.62%	Life Church	28	0.94%
Fostering	886	20.39%	Private Recruiter	17	0.57%
Resource Parent	857	19.72%	Informational Meeting	16	0.54%
Kinship	23	0.53%	Radio	12	0.40%
DDS	12	0.28%	Newspaper	8	0.27%
Other	10	0.23%	DHS Recruiter	7	0.23%
Respite	7	0.16%	OK Fosters Website	4	0.13%
OK Fosters	2	0.05%	One Church	4	0.13%
Kinship Adoption	1	0.02%	ICPC	1	0.03%
			Total	2979	100.00%

Section 2, Table 6.1-2

Data Source: Foster Care and Adoption Support Center
 *Totals may not add up exactly due to rounding.

Ongoing Permanency Efforts

ATU engages in a variety of permanency efforts individualized for each youth. Permanency efforts undertaken include ongoing preparation of the youth, helping youth understand the importance of permanency, the long-term impact permanency will have on their life, and how to live within a family unit. Ongoing preparation is providing youth with

information on all permanency efforts so they understand what each effort entails. This preparation also consists of gaining consent for adoption-specific activities from the child/youth 12 years of age and older. This consent determines the efforts Child Welfare Services (CWS) can take to help the child/youth achieve permanency. These efforts can include photographing and videoing the child/youth and attending adoption events. ATU staff works with the youth on an individual basis going through the pathway to permanency books and also through permanent connections group meetings.

For children who are therapeutically unprepared for the emotional process of adoption, ATU staff participates on treatment teams at acute and residential facilities, where they join the planning and preparatory work with group home or facility staff, therapists, and the Specialized Placements and Partnerships Unit (SPPU).

During this reporting period, 108 of 179 children authorized for adoptive placement had a statewide staffing (SWS) as a referral source. The monthly SWS presentation allows ATU staff to share information about the child/youth with adoption and resource specialists. Monthly SWS for those youth who continue with a goal of adoption is an ongoing effort. For this reporting period, 732 non-unique children and youth were presented.

- January 2019 – 119
- February 2019 – 131
- March 2019 – 115
- April 2019 – 116
- May 2019 – 134
- June 2019 – 117

The SWS format underwent change for a variety of reasons. Once a quarter, ATU staff present children in specialized populations, such as tribal children, children needing specialized families, siblings, and 17.5 year olds, at an in-person staffing attended by resource and ATU specialists. Recruitment specialists may also attend. During a live presentation, ATU staff is encouraged to be creative, share videos, and provide handouts to attending resource specialists. During this reporting period, in-person SWS were held in October 2018, January 2019, and April 2019. While these changes were intended to enhance the matching process and result in more placements with fewer declines, and the new approach was well received, further modifications were enacted in July 2019 with the inaugural Statewide Family Staffing (SFS).

SFS follows the traditional SWS format; however, prospective adoptive families are presented to ATU staff, who then sign up their children. This idea came from the implementation of both the Resource Family Model and Wendy's Wonderful Kids (WWK), as a way to broaden the family possibilities for waiting children, as well as broaden the number of children who can be considered for families at one time.

ATU continues its partnerships with the Oklahoma Successful Adulthood (OKSA) program and Permanency Planning (PP) to increase the likelihood of permanency for children and youth in care. Enhanced partnerships between ATU, FC&A, Recruitment staff, and PP at all levels, as well as with community partnerships, resulted in a significant number of inquiries on youth publically featured on partner sites. Additionally, ATU will continue to partner with Resource staff on discussions with both kinship and other resource parents of Quad 2 children and youth about barriers to providing permanency. These intentional and customized team conversations with relatives and kinship families are to barrier bust hesitancies exhibited by families, as well as explore other family who may provide legal permanency. Continuing efforts by ATU and other partners to further identify people important in the youth's life will be incorporated into new programmatic processes currently in development to increase permanency possibilities for children and youth within the Quad 2 cohort.

The ATU child welfare (CW) specialist III/lead specialists are in the final production stages of a tool to better reach and engage with older youth in care. Initiated through a collaborative practicum project in the summer of 2018, ATU leads assembled information gleaned from two focus groups with older youth on care, and are

working with the Oklahoma Department of Human Services (DHS) Communications in creation of the final product.

Personnel

At the time of the FC&A integration on 10/3/16, ATU field staff consisted of seven supervisors and 28 full-time staff. As of 06/30/19, ATU has eight supervisors, CW specialist IV; six lead ATU specialists, CW specialist III; with 39 full-time staff, CW specialists I and II; two full-time vacancies for CW specialist I or II and CW specialist III positions; with one administrative assistant; one part-time staff serving as statewide internet liaison; and one part-time staff in the role of SWS Coordinator.

Seven ATU supervisors have six full-time employee positions, and one supervisor with four positions also does programmatic work, such as reports and training. Due to the lack of individual CW specialist III full-time employees allocated to each team, ATU utilizes the shared lead worker technique, so all supervisory teams have access to a lead specialist for support. ATU currently has two staff on graduated caseloads. At the end of this reporting period, the majority of ATU staff, 95 percent, are within workload standards with the remaining 5 percent (two specialists), designated as close at workloads from 104.55-106.25 percent. ATU hired five new specialists and two specialists resigned from ATU during this reporting period.

ATU staff participated in two full-day quarterly staff development meetings. Topics for the March 2019 meeting included building more effective partnerships to enhance the permanency of children, focusing on improving advocacy for children through improved practices. The June 2019 meeting included a presentation and training by AdoptUSKids staff. FC&A and in particular, ATU, has long been involved with AdoptUSKids (AUSK) as not only an effective photolisting site, but for technical assistance. As part of a technical assistance and capacity-building plan, ATU leadership has been in discussion with AUSK to increase ATU staff's ability to use the AUSK site effectively, and write clear, strength-based profiles for Quad 2 children. The June site visit on various website usage topics, and discussions about child profile writing and continuum of disclosure was part of the ongoing work plan developed between AUSK and DHS.

As part of the onboarding process and to aid with retention, all new ATU staff, if new to the agency or not, are required to complete National Training Institute's Adoption Competency and Mental Health training through the Center of Adoption Services and Education.

Support

Behavioral health consultants (BHCs) are involved with all disclosures on Quad 2 children and youth to assist with the development of the transition plan and the adoption post-placement service plan for a family, as well as provide ongoing support, consultation, and referral for services for the child/youth or family. The BHCs assisted with 56 Quad 2 adoption disclosures from January to June 2019.

During this reporting period, ATU entered into preliminary discussions with WWK and The Dave Thomas Foundation for Adoption about bringing the evidence-based WWK model to Oklahoma. This child preparation and engagement model reports to be 1.7 times more effective in achieving adoptions than otherwise-served children, and focuses on adoption for older youth, children in sibling groups, and children with mental health diagnoses. In May, ATU and FC&A/DHS leadership met in person with WWK to plan further collaboration, and in June, DHS and WWK entered into contract negotiations. In July and August, ATU staff will begin completing online training. In late August, WWK staff will come to Oklahoma for two days of training for ATU staff, as well as a partial day executive overview for permanency and FC&A leadership. After the trainings in August, ATU staff will begin working with their children under the WWK model.

6.6: Trial Adoption Disruptions

Operational Question

Of all children who entered trial adoptive placements during the previous 12-month period, what percent of adoptions did not disrupt over a 12-month period?

Data Source and Definitions

A trial adoption (TA) placement is defined as the time between when a child is placed into an adoptive placement until the adoption is legally finalized. A trial adoption disruption is defined as the interruption of an adoption after the child's placement and before the adoption finalization.

Description of Denominator and Numerator for this reporting period

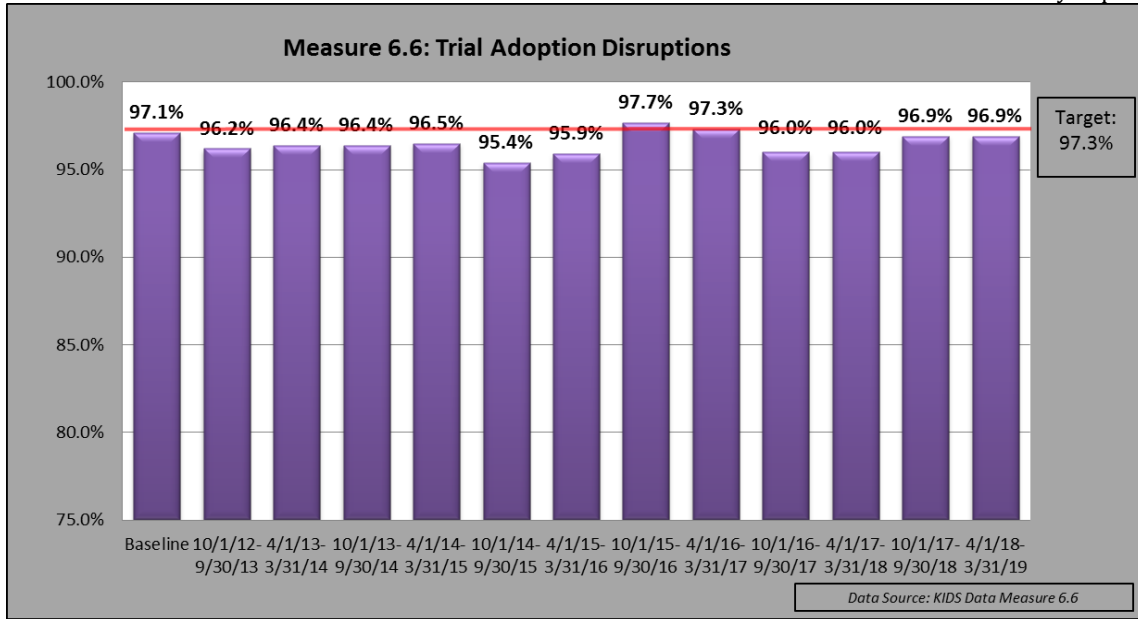
Denominator: Number of children that entered trial adoption from 4/1/2017 through 3/31/2018.

Numerator: Number of children that entered trial adoption from 4/1/2017 through 3/31/2018 and the trial adoption did not disrupt within 12 months.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children who entered TA from 10/1/2010 – 9/30/2011			97.1%
10/1/2012 – 9/30/2013	All children who entered TA from 10/1/2011 – 9/30/2012	1,433	1,489	96.2%
4/1/2013 – 3/31/2014	All children who entered TA from 4/1/2012 – 3/31/2013	1,366	1,417	96.4%
10/1/2013 – 9/30/2014	All children who entered TA from 10/1/2012 – 9/30/2013	1,195	1,239	96.4%
4/1/2014 – 3/31/2015	All children who entered TA from 4/1/2013 – 3/31/2014	1,252	1,297	96.5%
10/1/2014 – 9/30/2015	All children who entered TA from 10/1/2013 – 9/30/2014	1,477	1,549	95.4%
4/1/2015 – 3/31/2016	All children who entered TA from 4/1/2014 – 3/31/2015	1,938	2,020	95.9%
10/1/2015 – 9/30/2016	All children who entered TA from 10/1/2014 – 9/30/2015	2,138	2,189	97.7%
4/1/2016 – 3/31/2017	All children who entered TA from 4/1/2015 – 3/31/2016	2,337	2,403	97.3%
10/1/2016 – 9/30/2017	All children who entered TA from 10/1/2015 – 9/30/2016	2,413	2,513	96.0%
4/1/2017 – 3/31/2018	All children who entered TA from 4/1/2016 – 3/31/2017	2,511	2,615	96.0%
10/1/2017 – 9/30/2018	All children who entered TA from 10/1/2016 – 9/30/2017	2,437	2,516	96.9%
4/1/2018 – 3/31/2019	All children who entered TA from 4/1/2017 – 3/31/2018	2,206	2,276	96.9%
Target				97.3%

Section 2, Table 6.6-1



Section 2, Graph 6.6-1

Commentary

Child Welfare Services (CWS) remained consistent at 96.9 percent for this reporting period. For the current reporting period, 2,276 children entered into TA, with 2,206 or 96.9 percent not disrupting while in TA placement.

The following table shows the breakdown of Quad 1 and Quad 2 children with a disruption during this reporting period.

Trial Adoption Disruptions						
	# of Disrupted Cases	Total Cases	% Disrupted	# of Kids Disrupted	Total Kids	% Disrupted
Quad 1	18	1362	1.3%	21	2134	1.0%
Quad 2	40	105	38.1%	49	142	34.5%
Total	58	1467	4.0%	70	2276	3.1%

Data Source: Measure 6.6; Run Date: 6/10/19

Section 2, Table 6.6-2

In Quad 1 status, 21 of the 2,134 children experienced a TA disruption and 49 of the 142 children in Quad 2 status experienced a disruption. Although CWS expects the disruption rate to be much higher for Quad 2 children as many of these children are older with increased special needs, and placed with families where there was no previous relationship, CWS continues to look for ways to better support these placements.

The joint referral form for the behavioral health consultant (BHC) and the Post-Adoptions field service worker (FSW) is working well as it omits the requirement for multiple forms. Both the BHC and FSW continue to participate in disclosures and crisis intervention calls, as requested. If there is a need for participation in other situations, the BHC and/or FSW attend family team meetings and safety consultations. On Quad 2 disclosures, the BHC evaluates the child’s special needs and past trauma, as well as the household dynamics of the prospective adoptive family to support the newly established family. The BHCs assist the family to have a greater understanding of the child’s diagnosis and possible triggers related to past trauma. The FSW reviews the case and identifies concerns and questions that center on pre- and post-finalization needs for the prospective family. The FSW is able to answer questions the family may have in regard to adoption subsidy versus Social Security and other services that will be available to the family after finalization.

Post-Adoption Services created a log in mid-June to begin tracking any referral received and meeting attended. The BHC program manager logs all of the meetings attended by a BHC. Since all of the data is currently collected on the BHC referrals, the plan is to track what each consultant does and the approximate time each request takes. Through the tracking over the next few months, CWS will be able to determine if the BHCs are able to meet the demand of all requests. The program manager reported that since the contract was in place, the BHCs have met all requests.

The Post-Adoption survey response continues to have limited participation following its incorporation into the Annual Review with only 133 responses since 1/1/19. Post-Adoption Services continues to communicate the survey's value and where to access its Post-Adoption Services Newsletter, direct communications with adoptive families, and sharing with Adoption/Foster Care liaisons. The Annual Review will transition into an electronic format by SFY fourth quarter, which guides adoptive families to participate in the confidential survey. Post-Adoption Services forecasts participation rates to increase at that time.

CWS continues to partner with a University of Oklahoma School of Social Work employee who is also a graduate research student with assistance from a retired CWS employee with experience to analyze adoption disruptions. The original research was anecdotal for the fiscal year 2018, so the study is continuing for a two-year period in new research on causes for disruptions.

CWS expanded their contract with AdoptUSKids (AUSK) to further assist children and families. AUSK helps CWS identify the appropriate placement and needed supports for youth in foster care, as well as analyze and strengthen communications with non-identified families about youth who need either a foster or adoptive placement. At the request of CWS, AUSK created a webinar called "Supporting Families Transitioning to Adoption." This training was requested due to the high number of kinship and foster families who adopt through fostering. All Foster Care and Adoptions (FC&A) staff must complete this webinar by the end of July 2019. AUSK came to Oklahoma in June 2019 to train Adoption Transition Unit (ATU) staff on using the AUSK website, listing children, and creating better public and private child narratives. The resource family partners (RFP) placement team joined ATU for the child narrative training to enhance their knowledge for placement purposes and placement stability.

Oklahoma is partnering with Wendy's Wonderful KIDS (WWK) to incorporate evidence-based adoption recruitment program into current ATU practice. The WWK program aligns closely with what ATU is currently doing; however, their program will enhance CWS efforts with an evidence-based model to follow. The Dave Thomas Foundation for Adoption indicated CWS is at least one year ahead of the seven other states they have worked with because CWS already has the ATU positions dedicated to legally-free/non-identified children, and ATU staff have workloads aligned with the WWK model. The model is focused on child-specific recruitment through eight components. The model is focused on case mining, relationship building with the child and the child's important people, the child's professional team members, actively seeking connections, and a permanency option through intentional interviews. ATU will input monthly data on its efforts for ready access in a report format. Proceeding with the WWK evidence-based model is well-timed as its child-focused recruitment program compliments the CWS Resource Family Model in recruiting needed families for children in care. The WWK program adds more structure to the current ATU curriculum. Web-based training for all ATU staff begins in July 2019 followed by two-days of in-person training in August. In August, a half-day of training will be conducted for district directors, permanency planning staff, and FC&A Program staff.

A conference call is held during pre-placement visits to ensure resources are in place and the best person takes the lead on Quad 2 trial adoption placements. Call participants include: the assigned ATU specialist and supervisor, the assigned Permanency Planning specialist and supervisor, and the assigned resource specialist and supervisor. This practice began in November 2018 and has worked well. Calls generally last 30 minutes to an hour, and the parties discuss the needs of the child and family, what supports are needed and when they will be in place, and who's the best person to be the lead on the case based on location and connections between the workers, child, and family. Despite whoever takes the lead on the case, all call participants are involved through calls/emails to staff to ensure proper supports are in place for the child and family. FC&A staff discussed the need for updated training for adoptive families after taking placement of a

child for adoption. FC&A is currently reviewing two different webinar trainings to potentially put in place for families to complete around the 30-day mark of a trial adoptive placement. The webinars would count towards the families required annual in-service trainings.

Oklahoma will be participating in a National Training and Development Curriculum (NTDC) for foster and adoptive families with Spaulding, to develop and evaluate a state-of-the-art training program to prepare foster and adoptive parents to effectively parent children exposed to trauma and to provide these families with ongoing skill development needed to understand and promote healthy child development. NTDC will help develop "right-time" trainings for families in an effort to make training continuous from the beginning in the certification process and throughout the time a family is open to foster and/or adopt. "Right-time" trainings will vary as needed dependent upon placements and situations when the family needs additional training or supports. Oklahoma is in the early planning process but hopes to see a pilot group begin the training in March 2020 to compare to the guiding principles training that families currently complete. Oklahoma and NTDC hope to see positive trends in increased placement stability and decreased adoption disruptions.

6.7: Adoption Dissolutions

Operational Question

Of all children whose adoptions were finalized over a 24-month period, what percentage of those children did not experience dissolution within 24 months of finalization?

Data Source and Definitions

A finalized adoption is defined as the legal consummation of an adoption. Adoption dissolution is defined as the act of ending an adoption by a court order terminating the legal relationship between the child and the adoptive parent. This term applies only after finalization of the adoption.

Description of Denominator and Numerator for this reporting period

Denominator: All children who had a legalized adoption during the 24 months ending 3/31/2017.

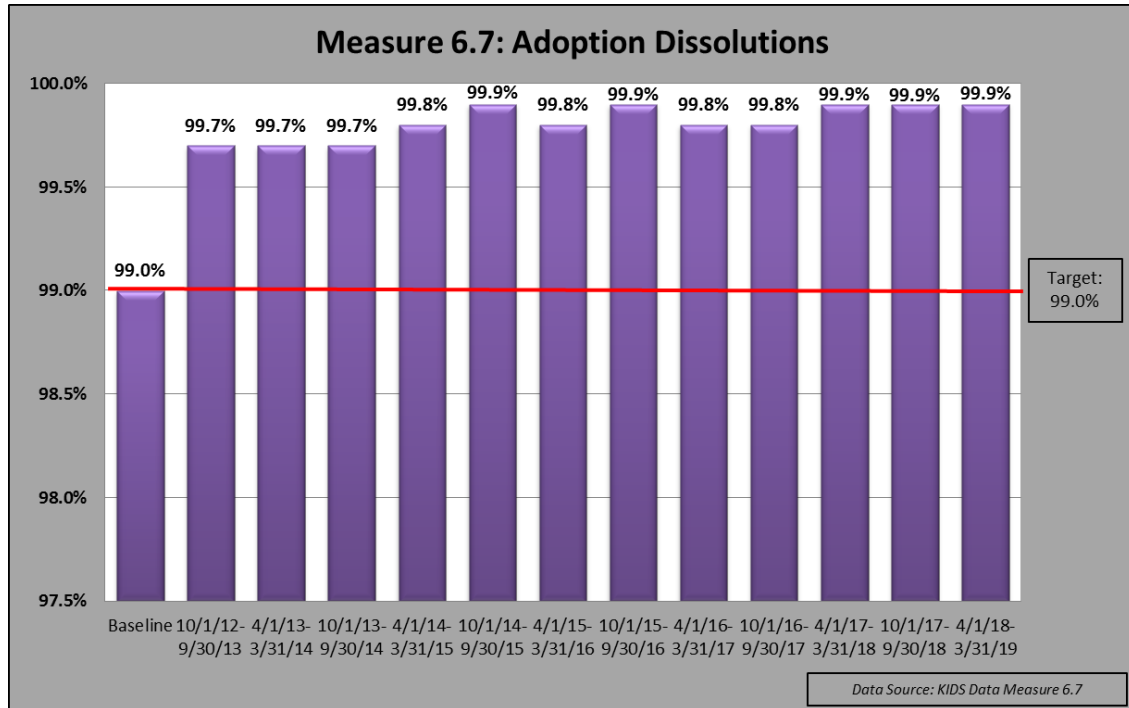
Numerator: All children who had a legalized adoption during the 24 months ending 3/31/2017 that did not dissolve in less than 24 months.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children with a legalized adoption from 10/1/2008 - 9/30/2010			99.0%
10/1/2012 – 9/30/2013	All children with a legalized adoption from 10/1/2009 - 9/30/2011	2,969	2,979	99.7%
4/1/2013 – 3/31/2014	All children with a legalized adoption from 4/1/2010 - 3/31/2012	3,055	3,063	99.7%
10/1/2013 – 9/30/2014	All children with a legalized adoption from 10/1/2010 - 9/30/2012	2,856	2,865	99.7%
4/1/2014 – 3/31/2015	All children with a legalized adoption from 4/1/2011 - 3/31/2013	2,945	2,950	99.8%
10/1/2014 – 9/30/2015	All children with a legalized adoption from 10/1/2011 - 9/30/2013	2,846	2,849	99.9%
4/1/2015 – 3/31/2016	All children with a legalized adoption from 4/1/2012 - 3/31/2014	2,697	2,702	99.8%
10/1/2015 – 9/30/2016	All children with a legalized adoption from 10/1/2012 - 9/30/2014	2,737	2,741	99.9%
4/1/2016 – 3/31/2017	All children with a legalized adoption from 4/1/2013 - 3/31/2015	3,086	3,093	99.8%

10/1/2016 – 9/30/2017	All children with a legalized adoption from 10/1/2013 - 9/30/2015	3,647	3,655	99.8%
4/1/2017 – 3/31/2018	All children with a legalized adoption from 4/1/2014 - 3/31/2016	4,312	4,317	99.9%
10/1/2017 – 9/30/2018	All children with a legalized adoption from 10/1/2014 - 9/30/2016	4,721	4,727	99.9%
4/1/2018 – 3/31/2019	All children with a legalized adoption from 4/1/2015 - 3/31/2017	5,035	5,041	99.9%
Target				99.0%

Section 2, Table 6.7-1



Section 2, Graph 6.7-1

Commentary

Child Welfare Services (CWS) continued to exceed the goal of a 99.0 percent success rate for adoption stability with less than 0.1 percent in dissolutions. There were 5,041 children with a legalized adoption during the 24 months ending 3/31/17 and 5,035 or 99.9 percent of those adoptions did not dissolve within 24 months. During this reporting period, an additional 314 children had finalized adoptions compared to last reporting period. Six children disrupted from six separate adoption finalization cases.

The resource specialist invites the Post-Adoption Services field service worker (FSW) to participate in disclosures on families adopting Quad 2 children or any identified high-risk Quad 1 children. The FSW reviews the case and staffs with the requesting specialist to identify concerns and questions that center on pre- and post-finalization needs for the prospective family. Post-Adoption Services evaluates options to further support high-risk adoptions by developing a system to initiate follow-up communication with new families. A new survey is in development to collect information to determine possible post-placement training. Post-Adoption Services prepared and sent the first issue of the *Post-Adoptions Newsletter* on 2/22/19 to all adoptive families with an e-mail address on file. The idea for a newsletter is based on feedback regarding improving communication between adoptive families and Post-Adoption Services.

SECTION 3. Capacity Indicators

2.1: New Family Foster Care Homes

Operational Question

How many new foster homes, including Foster Family Homes and Supported Foster Homes were opened during State Fiscal Year (SFY) 19?

Data Source and Definitions

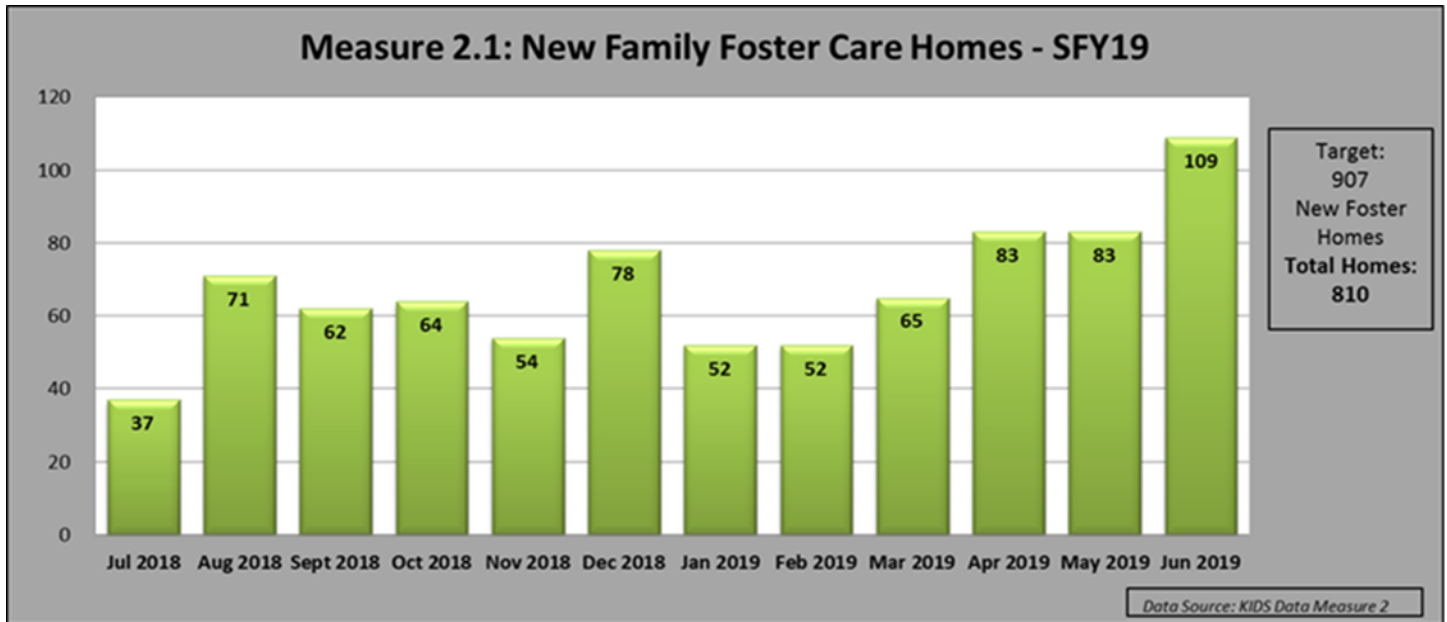
Total count of new foster homes includes all Foster Family Homes and Supported Foster Homes by the month that the family assessment was approved using the agreed upon criteria. As of 7/1/2014, this measure does not include Kinship, Contracted Foster Care (CFC) Homes, Emergency Foster Care (EFC), Shelter Host Homes (SHH), Adoptive, or Tribal Foster Homes.

Trends

Reporting Period	Population	Result	
SFY 19 Baseline		1,979 Foster Homes open as of 7/1/2018	
7/1/2013 – 12/31/2013	All CFC, Foster Family Homes, EFC, SHH, and Supported Foster Homes opened during the first half of SFY 14	346 Homes	763 Total Homes opened in SFY 14
1/1/2014 – 6/30/2014	All CFC, Foster Family Homes, EFC, SHH, and Supported Foster Homes opened during the second half of SFY 14	417 Homes	
7/1/2014 – 12/31/2014	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 15	409 Homes	780 Total Homes opened in SFY 15
1/1/2015 – 6/30/2015	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 15	371 Homes	
7/1/2015 – 12/31/2015	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 16	387 Homes	1,080 Total Homes opened in SFY 16
1/1/2016 – 6/30/2016	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 16	693 Homes	
7/1/2016 – 12/31/2016	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 17	431 Homes	884 Total Homes opened in SFY 17
1/1/2017 – 6/30/2017	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 17	453 Homes	
7/1/2017 – 12/31/2017	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 18	365 Homes	728 Total Homes opened in SFY 18
1/1/2018 – 6/30/2018	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 18	363 Homes	

7/1/2018 – 12/31/2018	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 19	366 Homes	810 Total Homes opened in SFY 19
1/1/2019 – 6/30/2019	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 19	444 Homes	
Target		907 New Foster Homes opened by 6/30/2019	

Section 3, Table 2.1-1



Section 3, Graph 2.1-1

Commentary

As of 6/30/19, Child Welfare Services (CWS) opened 810 CWS Foster Family Homes and Supported Foster Homes that were counted as new according to the Pinnacle Plan criteria. The target for new homes by the end of state fiscal year (SFY) 19 was 907 homes. CWS achieved 89.3 percent of the SFY 19 target for new homes. 1,979 homes were open as of 7/1/18. During SFY 19, 915 homes were opened and 868 homes were closed, leaving 2,026 homes open as of 6/30/19 for a net gain of 47 homes. Net gain only counts unique homes even though a resource family may provide more than one type of foster care. This measure also excludes any out-of-state foster homes or homes open to provide respite-only care. Homes that move out-of-state are included through the end of the current SFY, but will be excluded for the starting baseline for the next SFY. The starting baseline for SFY 20 will be 2,025 homes as one home moved out-of-state during SFY 19.

Recruitment and Retention

The organizational structure of recruitment remains the same with one Foster Care and Adoptions (FC&A) Recruitment field administrator providing leadership for all 10 Recruitment units throughout the state. An individual from the FC&A program staff is to be the point of contact among the program team for recruitment activities and support for the recruitment field staff. At the present time, the role is minimal but may potentially grow to also include analyzing recruitment activities for effectiveness and developing additional retention ideas for implementation. Historically, the FC&A Programs deputy director served in this role and FC&A leadership is still considering if the responsibility will stay with the position. Each Recruitment unit prepared a recruitment plan for the SFY. Those plans are updated quarterly and the last update occurred on 7/1/19. In the updates, Recruitment supervisors and staff provide information on each

completed activity and their outcomes. Each unit carries out both recruitment and retention activities in their respective regions. In June 2019, Recruitment staff across the state received training focusing on recruitment of families for teenagers, "The Art of Recruiting for Teens" by Michael Sanders, a national trainer and expert on youth issues.

As of 6/30/19, CWS Recruitment units opened 438 new foster homes, exceeding the goal of 410 homes set for the Oklahoma Department of Human Services (DHS) CWS Recruitment units. FC&A leadership continuously monitors the progress of opening new homes along with the recruitment and retention activities throughout the state. The overall CWS recruitment goal was separated into smaller, regional goals. Regions 2, 4, and 5 all exceeded their targets for new homes. Region 1 missed reaching their goal by five homes, gaining 94.7 percent of their new home target and Region 3, Oklahoma County, continually struggled to meet their target. Multiple factors contributed to this, with the main factor being staff turnover. Currently, the Region 3 Recruitment unit has a supervisor and five specialists, with one vacancy. FC&A leadership will continue to work closely with Oklahoma County to further regional recruitment efforts and progress.

As previously reported, in October 2016, the FC&A Programs went through an extensive restructuring process to move toward a Resource Family Model that would benefit both children and families working within the DHS system. The Resource Family Model focused on streamlining processes, such as assigning a single resource specialist to a family and using a single comprehensive family assessment to ensure families are ready to transition from fostering to adopting without duplicating efforts. CWS also began to evaluate the foster and adoptive homes that were recruited and if those families were willing to meet the needs of the children in DHS custody, specifically children legally free for adoption. Following data analysis, FC&A Leadership determined that 95 percent of children are adopted by their current foster parents, not by an adoption-only home. Analysis also showed that the majority of adoption-only homes were interested in adopting children under the age of six. Furthermore, the children available for adoption in Oklahoma are older, school-age children and teens.

Based on this information, a decision was made in 2017 to only accept applications for adoptive parents when they were willing to take a child over six years of age, sibling groups of three or more, or children with special needs. Any adoptive applicants looking to adopt a child under the age of six were referred to a private adoption agency that could more adequately meet the family's needs. This decision allowed CWS staff to focus on recruiting homes to meet the needs of children waiting for forever families.

In the fall of 2018, additional analysis indicated that over a two-year period, 500 adoption-only homes closed and 71 percent never took placement of a child. CWS realized this was not beneficial for the children in custody or the families waiting to adopt a child. Therefore, CWS implemented the next phase of the Resource Family Model because CWS seeks families who can meet the needs of children in care, not find children to complete families. Effective 5/1/19, CWS considers adoption-only applicants when they are willing to take a child 12 and older, siblings groups of three or more, children with special needs, or children who are publicly identified as available for adoption, such as on the Heart Gallery. This phase of the Resource Family Model is not creating a foster-to-adopt program, but it is being transparent with families about the need for foster parents. While the goal for children is most likely "return to their own home," and CWS wants families working to support that goal, fostering highly increases the opportunity for adoption. FC&A staff includes this information in the intentional conversations with current adoption-only families and asks them to consider foster care as an option available to serve children in custody.

FC&A provides all CWS staff with a Resource Family Model flier that outlines the process, as well as talking points for *CWS use only* guides communication. A DHS publication also explains the Resource Family Model to foster and adoptive applicants and existing adoption-only homes. CWS believes this next phase of the Resource Family Model is a natural step as CWS continues to seek out families who can meet the needs of children who need a home, whether temporary or permanent. On 5/1/19 Recruitment staff began using the Resource Family Model talking points when speaking with potential foster and adoptive families. In May 2019, Resource specialists assigned to current, open adoption-only homes

take these talking points to encourage the adoption-only families to foster at least one child. Resource specialists will utilize the same talking points during each quarterly face-to-face home visit with the adoption-only homes thereafter.

Information outlining the Resource Family Model was provided to staff prior to the 5/1/19 implementation. Recruitment staff then received additional training during an all staff meeting on 5/14/19. During this meeting, the Recruitment field administrator and field deputy director met with all CWS Recruitment specialists and supervisors and feedback was solicited. Overall, the feedback from the field was positive. Staff indicated they liked the talking points and this phase of the Resource Family Model. An example was provided of an applicant who initially called because she wanted to adopt a child younger than two years of age. After using the talking points, the applicant decided to foster. Since that time, several anecdotal reports of families initially wanting to only adopt, but making the decision to foster once recruiters talked with them about the Resource Family Model. There has not been a significant amount of time since implementing the Resource Family Model to gather specific data on the outcome of this model to determine if this impacted the number of new foster homes recruited. The Resource Family Model was implemented to provide further transparency with applicants about the needs for foster families and the reality of adopting a child through DHS while being a non-identified adoptive home.

Due to FC&A advancing the Resource Family Model implementation and the desire for children to have placement stability, beginning 7/1/19 FC&A made a practice change to no longer code traditional and supported foster homes as "available - respite-only" in KIDS. When a family is coded as respite-only, they are limited in placement opportunities as well as the opportunity to provide stability to children. Removing the label of "respite-only" encourages families and children in care to build a connection and form a lasting, stable placement. When a foster family would like to take a break from fostering, the home can be coded as unavailable until ready to take a placement. CWS understands that respite care is an important support for foster families and explained to staff that any open, available foster home can provide respite for children in care. Talking points were provided to staff as well to use with any homes on their caseload that were respite-only.

Statewide performance-based contracts for any agency interested in recruitment, approval, and support of foster families are still in place with 13 agencies. CWS chose not to renew its contract with one agency partner. Modifications to the resource family partner (RFP) contracts were discussed with all partners and their input was gathered. Contract renewals for SFY 20 were revised and are now completed. Modifications made are:

- Vendors will be required to use DHS forms.
- Sharing prior foster parents service records with RFP is changed to 15-calendar days.
- Annual Update policy information is updated.
- Placement stability information is updated to reflect Initial Meetings policy, which replaces the placement plan.
- Home closure information is updated to reflect homes vacant for 30-calendar days or more to be assessed for usage and retention.
- Adoption section updated to reflect that files are to be provided within 15 days of the request.

To assist with processing to meet recruitment goals, additional calls were set up with the RFPs for May and June 2019. These additional calls focused on working through barriers to allow families to move more easily through the approval process. At the end of June, data indicates that the private agencies have a total of 362 new homes. For SFY 19, four agencies surpassed their set goal by reaching 116.7 percent to 133.3 percent for the year. Six of the agency partners recruited from 60 percent to 96.2 percent of their yearly goal. The remaining four agencies recruited from 29.2 percent to 55.6 percent for the year. CWS conversations continued with agency partners regarding staff turnover effecting recruitment numbers. Most of the RFPs were able to fill staff vacancies with some agencies hiring additional staff, when needed. This was evident by slight increases in new home data for six of the RFPs within the last quarter of SFY 19. Discussions will continue with all agency partners in respect to the development of plans to address turnover rates. Recruitment plans for the new SFY 20 are being composed by agency partners and are expected to be finalized within 30-calendar days of the signed contract; however, CWS is still working to finalize the final recruitment goal. As a result,

RFPs will have an additional 30-calendar days to complete the plans and CWS expects the RFP recruitment plans to be finalized by 8/31/19.

CWS continues to follow-up with supported foster parent applicants in the approval process for over 90-calendar days. From January through June 2019, 69 families were surveyed and 45 families reported that moving slowly was their personal choice. Families shared reasons for moving slowly are due to family medical issues, family emergencies, animal/pet problems, work schedules, home remodels, holidays, and scheduling time to complete home studies. For the remaining 24 families, seven reported no barriers; five reported issues with their agency; two reported issues with references; one family is waiting on military checks; one family reports the home study is too long; five families are waiting on out-of-state checks; one family had finger print scan issues; one reported the holiday put them behind; and one family had questions about citizenship documentation. CWS is looking into the identified issues to determine how to resolve them, so families are not held up during the approval process. One area that CWS was previously looking into was restructuring the agreement with the Oklahoma Department of Public Safety (DPS) so that the RFP agencies could directly request a DPS check and receive the results. DPS did not grant approval; therefore, CWS will continue to run the request for DPS checks. This also precludes placing any additional costs on the RFP agencies.

CWS Recruitment units continue to partner with Oklahoma Fosters, as well as RFP agencies, therapeutic foster care (TFC) recruitment, and Developmental Disabilities Services (DDS) recruitment for events when possible. Region 4 Recruitment units piloted a collaboration effort with RFP agencies in that area, meeting to discuss recruitment ideas and partnering opportunities. The follow-up to the initial meeting was held 3/27/19, in which supervisors and specialists reported on their collaboration efforts. On 5/4/19, Region 4 held an informational day that included games and activities for children as well. During this event, the community was invited to learn more about the need for foster parents. Several RFP agencies, as well as tribal partners, were represented at this event.

Recruitment units across the state continue to engage in retention activities. Recruitment staff routinely participate in the Foster Care and Adoptions Support Group meetings. Tulsa County recruitment staff host a support group meeting specific to new foster parents approved within the last year. The group has steadily increased in numbers since it was revamped and began meeting in February 2019. In January 2019, Region 2 Recruitment staff hosted a Foster Care and Adoptions conference, to offer support, service and resource awareness, and training for foster parents with over 150 in attendance. Recruitment staff have also partnered with Oklahoma Baptist Homes for Children by attending the foster parent trainings hosted during Vacation Bible Schools across the state. Additional retention efforts included a pilot for Tulsa County recruitment staff to maintain traditional foster home resources for 60 to 90-calendar days past approval to have staffing continuity during the family's first placement. This pilot was intended to enhance communication and make the transition a good experience and hopefully retain newly approved foster homes. The pilot was ended, as it proved challenging for recruitment staff to maintain fully approved homes, while recruiting and on-boarding new homes. In addition, no significant retention outcomes were noted for this pilot. Recruiters across the state continue to follow-up with newly approved families 90-days post-approval to identify any potential problems or issues the family may have encountered and provide additional support.

Recruitment units will complete new recruitment plans for the upcoming SFY 20. In those upcoming recruitment plans, staff will work to partner with current foster parents for recruitment efforts as well, requesting current foster parents to participate and speak at events and other community engagements. FC&A recognizes that current foster parents are potentially excellent recruitment partners because they can speak from their own experience about fostering.

Community Recruitment Unit

Community Recruitment, formerly titled "Specialized Recruitment Unit" transferred under the Oklahoma Fosters umbrella in October 2018. Community Recruitment is dedicated to finding foster families for children in care with higher level of care needs and specifically recruiting for Specialized Foster Care (SFC). Overall efforts include: marketing and rebranding of specialized recruitment materials; town hall meetings; collaborative meetings; listening tours;

recruitment events; and presentations to educate potential foster families. Examples of these efforts initiated between January and June 2019 include recruitment at:

- iFly All Abilities Night;
- Autism Resource Fair;
- Behavioral Innovations Sensory Spring Fling;
- Special Olympics; and
- We Rock the Spectrum.

More information can be found in the ***Oklahoma Fosters Report***. This report provides additional details regarding work completed by Oklahoma Fosters.

Targeted Recruitment Unit

The Targeted Recruitment unit was dissolved and put under the Oklahoma Fosters Community Recruitment umbrella. Community Recruitment has initiatives aimed to recruit families for DDS SFC. When inquiries come into the Foster Care and Adoption Support Center (FCASC), staff ask certain questions and if the family appears to be interested in fostering children with special needs, the family is routed to DDS. DDS discusses their program with the potential family and determines if the family wants to move forward with DDS or pursue traditional foster care. When the family wishes to move forward with DDS foster care, DDS staff begin working with the family to start the approval process.

Oklahoma Fosters

Oklahoma Fosters continued to partner with businesses around the state to provide benefits exclusive to Oklahoma foster parents. The Foster Parent Exclusive Benefits Program allows business partners to offer services, discounts, or other benefits which can make it easier for families to provide food, fun, and educational activities for the children in their care. Currently, Oklahoma Fosters has partners in 20 counties across the state.

Oklahoma Fosters developed a foster parent welcome packet that is mailed to new traditional, kinship, therapeutic, and SFC homes as a source of additional supports, information, and discounts. This packet was developed through input from Oklahoma Fosters, RFP executive directors, and the Foster Care Association of Oklahoma board, and includes: a welcome letter, a foster parent exclusive benefit card, a YMCA benefit flier, Foster Care Supports Breakdown, Foster Parent's Bill of Rights, Foster Child's Bill of Rights, Frequently Asked Questions, Emergency Contact Guide, Life Book Movement, and a thank you card. In addition, seasonal information, such as fall festivals, upcoming conferences, Mathis Brothers discounts, as well as other helpful information and resources are added, when appropriate.

Communication and Supports

To ensure families have the support needed during a crisis, a number for the statewide mobile crisis stabilization was sent out to all CWS staff and resource families in October 2018. CWS learned the number of calls was tracked through the program at the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS). A meeting in February further explored what information can be collected from the calls, as well as gain an understanding of the outcomes related to use of the mobile crisis stabilization service. ODMHSAS took the lead in aggregating the available data, a process that is ongoing. Currently, FC&A is waiting on the analysis from ODMHSAS and ODMHSAS has not provided a timeline for when the information will be available.

Tulsa Advocates for the Protection of Children (TAPC), a community partner in Region 5, worked to secure funding to begin a mentoring program for foster parents. They were able to secure a \$10,000 grant from the Sarkey's Foundation and applied for two other grants from other local foundations. TAPC reported that one foundation declined to provide a grant at this time; however, the Schusterman Family Foundation requested that DHS and TAPC work more on the program, make some changes, and when DHS can make a commitment to the program's long-term sustainability, they would be willing to consider funding the program. The Schusterman Family Foundation provided suggestions and tweaks to the program for TAPC to consider and encouraged it to apply for the grant again in 2020. TAPC then returned

the initial \$10,000 grant to the Sarkey's Foundation, explained the reason for return, and Sarkey's agreed to provide grant money in the future once the mentoring program had additional funding and was ready to pilot in Region 5.

The Foster Parent Support Workgroup met at the beginning of June 2019. The group was set to reconvene to address support regarding grief and loss that foster parents experience, as well as identify any other potential support families may need as CWS implemented the next phase of the Resource Family Model. At the meeting, the University of Oklahoma National Resource Center for Youth Services (NRCYS) reported that a grief and loss training is already under development and will hopefully be available fall 2019. The group discussed the potential for informal foster parent mentors since the formal mentoring program is on hold at this time. The group also discussed development of a yearly survey made available to foster parents to get input on their support and training needs, while they are still in the process of fostering, rather than after deciding to close their home. This information was shared with the FCASC staff and will be looked into further. The Foster Parent Support Workgroup did not set another meeting at this time because a review is identifying other CWS areas or programs that may be working on some of the support ideas. When it's determined that the group can do further work, the group will resume meeting.

CWS' work is ongoing with the Office of Management and Enterprise Services (OMES) and Actovos to develop a tool to increase the speed and effectiveness of child placements in foster homes. The Actovos workgroup met during the first six months of 2019, and determined that Canadian County will be the pilot area for Actovos in September 2019. The workgroup has experts in DHS placement procedures, RFP contracts, the supervisor for the pilot region, a project manager, and a developer. If all goes well with the pilot, Actovos will roll out to all of Region 1 in the fall of 2019.

CWS continues to work with the OKBenefits team to build a portal for individuals/families interested in applying to become a foster or adoptive family. While work for the portal is still ongoing, OKBenefits hopes to have the portal available in 2019. OKBenefits updated the Child Passport to provide a more user-friendly experience for foster families who currently have children placed in their home. Foster parents will have access to medical information, educational information, family/kin relationships, specialist and supervisor phone numbers, and child demographics to name a few. OKBenefits is also adding the ability for foster parents to view child care for the children placed in their homes.

CWS continues its collaboration with the faith community through the CarePortal. From 1/1/19 to 6/30/19, 824 children benefited from requests that were met by churches. The estimated dollar value of these requests was \$76,756. Sequoyah and Pottawatomie Counties were added during this time period.

NRCYS supports and coordinates 20 CWS Family Support Network Groups, serving 27 counties, in all five regions of the state. Network Support Groups are active and supporting resource families in the following counties: Sequoyah, Pottawatomie, Payne/Noble, Hughes/Seminole, Cherokee, Logan/Kingfisher, Johnston/Marshall, Carter/Love, Stephens/Jefferson, Comanche, Grady, Garvin/McLain, Lincoln, Murray, Adair, Pittsburgh, Oklahoma, and three in Tulsa County. Network Support Groups and the families attending benefit from a strong partnership between local CWS staff and assigned NRCYS staff. As indicated by the information above, Oklahoma County's Support Network Group became active in March 2019. Total attendance at all Network group meetings during the reporting period was 1,492 adults with an average monthly attendance of 248 adults. Additionally, at the end of each meeting foster, kinship, and adoptive parents are asked to complete a survey evaluating the meeting and providing input for future meetings. Surveys were completed by 310 kinship parents, 404 foster parents, and 101 adoptive parents completed. Activities, currently underway, will result in a total of 24 active Support Network Groups by 12/31/19. Additional support groups are present in local communities statewide and are often attended by FC&A staff to support the families.

Potential resource families continue to utilize online training to complete pre-service training requirements. From January through June 2019, 843 participants enrolled in online training, 608 individuals completed the training, 168 withdrew, and 145 individuals are still in the completion process. The number of completions, withdrawals, and pending completions exceeds the number of enrollees due to carryover from earlier reporting periods. Feedback continues to be positive and families report that the training is interactive and useful.

The National Adoption Competency Mental Health Training Initiative (NTI) statewide implementation team (SIT) met in person for the last time in November 2018. At the present time, CWS is incorporating portions of NTI into the CORE training, developing a level 2 training with NTI materials, and adding some NTI modules to the learning management system (LMS) online training system.

The *Support is Everyone's Game-Foster Family Recruitment & Retention Challenge* came to an end on 6/30/19. Overall, CWS feels the challenge improved customer service to foster families and potentially aided in foster home retention. Since January, 610 Most Valuable Worker nominations were received with 48 percent of the nominations coming in from foster parents. On 8/23/19, the celebration of *Support is Everyone's Game* is scheduled to occur at the Governor's Pavilion. CWS will celebrate, recap the results of the challenge, and the impact it had on workers and families.

Oklahoma continues to serve as a pilot site for the National Training and Development Curriculum (NTDC) for Foster and Adoptive Parents. The grant is currently in year two, which includes curriculum development with a plan to pilot the training in the spring of 2020. On 8/1/19, representatives from the University of Washington and Spaulding will meet with the infusion team in Oklahoma to discuss how they will guide the pilot throughout the state. On 8/2/19, all CWS leadership and stakeholders will meet together with the infusion team. At this meeting, the NTDC vision and information regarding the pilot roll out will be shared.

Closures

Exit interviews with foster families that requested home closure are conducted by the FCASC. Foster parents who choose to close their resource due to medical reasons or moving out of the state or country were not contacted. FCASC staff were able to complete interviews with 54 of the 104 foster parents whose homes closed between the months of December 2018 and March 2019.

Information Obtained from the Calls

- 85 percent decided to no longer foster based on a family decision that was independent from their experience with CWS.
- 85 percent stated they would consider fostering in the future.
- 83 percent would recommend fostering/adopting with CWS or a resource family partner (RFP).

Most Challenging Aspect of Being a Foster Parent

- 48 percent reported that family expectations were the most challenging aspect of being a foster parent. This includes attachment to the foster children, working with biological parents, adjusting to fostering, and placement preferences not being met.
- 24 percent indicated working with the system was the most challenging part of being a foster parent. This includes general system issues, working with caseworkers, lack of information at placement, and paperwork.
- 15 percent stated the custody child's needs were the most challenging part of being a foster parent.

Ways to Enhance their Experience as a Foster Parent

- 35 percent did not have any recommendations for CWS and/or RFP agencies to enhance the experience of foster parents.
- 32 percent stated improved communication would enhance their experience as a foster parent.
- 19 percent recommended system changes to enhance their experience as a foster parent. This included staff training, staff retention, revising requirements, and court process improvement.
- 15 percent stated more support would enhance their experience as a foster parent. This included access to resources, respite care, foster parent education, and CWS staff availability.

After the March 2019 report, the electronic survey pilot was initiated in May 2019. Surveys were emailed to applicable foster parents whose resource closed in April 2019 and a small amount of responses were received. In June 2019, communication to Resource specialists notified them of the shift to electronic surveys and requested verification of a

foster parent’s email address prior to closure. Resource specialists were also requested to notify foster parents of the possibility of receiving a survey through email. Revisions to the electronic survey process were made for FCASC staff to contact foster parents by phone to confirm their email address and inform them a survey was emailed to them. These efforts resulted in a higher amount of responses for foster parents whose resource closed in May 2019. Initially, the survey will only be completed electronically by foster parents; additional options for completion will be considered if the response rate does not increase.

Quarterly exit interview reports continue to be provided to CWS leadership to further discussions about improved practice and customer service to foster and adoptive families. The data was provided in February and June 2019. In June 2019, FC&A leadership posed a question to CWS leadership regarding how each individual team could improve communication with foster and adoptive families. Responses were received on efforts to improve transparency, intentionality, engagement, appreciation, and clarity when communicating with foster parents. The responses also included improving the quality of Initial Meetings, improving the Child’s Passport information accessible by families, explaining court processes in-depth, and examining the joint visits conducting by specialists in the resource home. These efforts demonstrate child welfare’s intentional practice to improve the experience of foster and adoptive families, including at the time of placement. As staff are having more placement assessment conversations prior to placement, staff are more informed and able to relay quality information about the child to the foster parents prior to placement.

As an additional effort to retain quality foster families, CWS continues to have a supervisor or field manager call any foster home in good standing who requested closure of their resource home. This call identifies if barriers to their continued foster care participation could be resolved and also thanks them for their service as foster parents. CWS continues to use both the YI023 – Open Resource report and the YI035 – Closed Resource report to track retention contacts. The YI023 identifies homes that had a retention call and then remained open while the YI035 identifies homes that had a retention call, but decided to move forward with closure. CWS previously reported that as of 2/1/19, per the YI023 – Open Resource report, 16 homes received retention contact and per the YI035 – Closed Resource report, 60 homes received a retention call. The difference between the two numbers depends upon when the call is made, as well as if the home decided to remain open. Eight of the 16 homes chose to remain open so that information is only available on the YI023 – Open Resource report. When a retention contact is documented while the resource is still open but the resource closes within 30-calendar days of the contact, the data pulls to the YI035 – Closed Resource report. No report exists that can pull both sets of data, so it is presented separately.

2.3: New Therapeutic Foster Care Homes

Operational Question

How many new Therapeutic Foster Care (TFC) homes were opened in State Fiscal Year (SFY 19)?

Data Source and Definitions

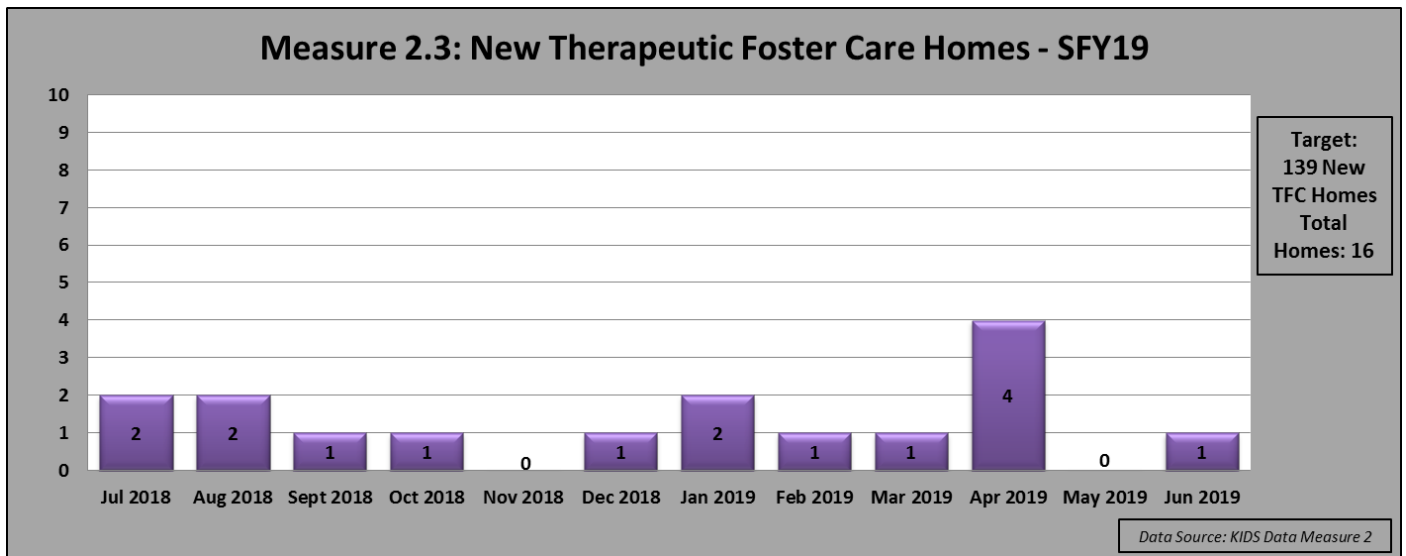
Total count of new TFC homes includes all new TFC homes by month that were opened using the agreed upon criteria.

Trends

Reporting Period	Population	Result	
SFY 19 Baseline		171 TFC homes open as of 7/1/2018	
7/1/2013 – 12/31/2013	All new TFC homes opened in the first half of SFY 14	55 TFC Homes	107 Total TFC Homes opened in SFY 14
1/1/2014 – 6/30/2014	All new TFC homes opened in the second half of SFY 14	52 TFC Homes	
7/1/2014 – 12/31/2014	All new TFC homes opened in the first half of SFY 15	66 TFC Homes	137 Total TFC Homes opened in SFY 15
1/1/2015 – 6/30/2015	All new TFC homes opened in the second half of SFY 15	71 TFC Homes	

7/1/2015 – 12/31/2015	All new TFC homes opened in the first half of SFY 16	43 TFC Homes	105 Total TFC Homes opened in SFY 16
1/1/2016 – 6/30/2016	All new TFC homes opened in the second half of SFY 16	62 TFC Homes	
7/1/2016 – 12/31/2016	All new TFC homes opened in the first half of SFY 17	36 TFC Homes	59 Total TFC Homes opened in SFY 17
1/1/2017 – 6/30/2017	All new TFC homes opened in the second half of SFY 17	23 TFC Homes	
7/1/2017 – 12/31/2017	All new TFC homes opened in the first half of SFY 18	17 TFC Homes	36 Total TFC Homes opened in SFY 18
1/1/2018 – 6/30/2018	All new TFC homes opened in the second half of SFY 18	19 TFC Homes	
7/1/2018 – 12/31/2018	All new TFC homes opened in the first half of SFY 19	7 TFC Homes	16 Total TFC Homes opened in SFY 19
1/1/2019 – 6/30/2019	All new TFC homes opened in the second half of SFY 19	9 TFC Homes	
Target		139 New TFC homes opened by 6/30/2019	

Section 3, Table 2.3-1



Section 3, Graph 2.3-1

Commentary

As of 6/30/19, 171 TFC homes were open statewide. During state fiscal year (SFY) 19, 27 TFC homes opened and 100 TFC homes closed, leaving 98 homes open as of 6/1/19, for a net loss of 73 homes. Of the 27 TFC homes that opened during SFY 19, 16 of these TFC homes met the criteria to be counted as new homes according to the Pinnacle Plan.

The TFC program continues to strive toward improvements in all areas. During this reporting period, significant focus was on the creation of the Intensive Treatment Family Care (ITFC) program. This includes a partnership with the Oklahoma Health Care Authority (OHCA) to create new policy as well as submission of the ITFC program to the Centers for Medicaid and Medicare Services (CMS). TFC programs also continued focusing on recruitment efforts and collaboration with the TFC providers. TFC programs, in partnership with the Office of Performance Outcomes and Accountability (OPOA), developed tools to conduct a survey about the Pressley Ridge Training model as well as an audit tool to review the treatment team meeting guides. In June, the ITFC program was implemented as a pilot program in an effort to capture children who were falling into the placement gap within the system. Five children were placed into

ITFC homes in June. Efforts to develop a screening tool and to monitor and modify the program through the pilot project are ongoing.

In an effort to better understand the needs around TFC, both from the available data and from feedback from the partner agencies, DHS leadership began having regular meetings with the agencies. Discussions have been focused on building capacity within the TFC and ITFC programs through better communication as to the needs of the children in care and the needs of the TFC agencies. Several strategies are being discussed, including sharing of recruitment resources, increasing the contract rate, offering TFC agencies an RFP contract and offering the RFP agencies a TFC contract when the agency is interested in expanding their placement array and are able to manage the expansion. These efforts are all part of a bigger initiative to assess the needs of children in care and to develop the needed continuum to better serve all children, whether in their own home or in out-of-home care.

Recruitment Efforts

Child Welfare Services (CWS) designated two staff as TFC recruiters who partnered with the five TFC providers and Oklahoma Fosters to explore and develop new recruitment opportunities. During this reporting period, over 25,000 TFC and/or ITFC flyers were mailed and handed out. These flyers were distributed in a variety of locations including schools, libraries, and child care facilities across the state. In February, the CWS TFC recruiters developed training on how to recruit homes for TFC that was presented to all TFC provider recruiters. New recruiting opportunities became available, such as CWS TFC recruiters were interviewed about TFC and ITFC programs on radio stations in various locations throughout the state. This seems to be an opportunity for ongoing participation by all recruitment staff. CWS is considering purchasing ongoing advertisement with a radio station that serves both the Tulsa and Oklahoma City metro areas. During this reporting period, TFC recruiters organized and/or participated in eight recruitment events across the state in partnership with various providers who also attended. TFC recruiters also educated the Oklahoma Department of Human Services (DHS)/University of Oklahoma (OU) resource center support line staff about TFC, ITFC, and specialized foster care (SFC) to improve the routing of interested TFC, ITFC, and SFC callers to the right program.

Quality Services within the TFC Program

Many new processes and/or changes were made to improve quality within the TFC program. Such changes include implementation of the evidence-informed training model, Pressley Ridge; creation and implementation of the treatment team meeting guides; addition of CWS recruitment staff to assist with improving capacity of the TFC and ITFC programs; and continued review of children on the TFC waiting list.

Lack of Consistency with the Treatment Team Meetings

TFC Programs previously discovered a lack of consistency in the way providers conducted treatment team meetings. Each provider had their own agenda, required participants, and notification protocols. There was no continuity regarding who attended these meetings, topics of discussion, where the meetings were held, or how workers or other parties were invited. In an effort to improve quality, consistency, and outcomes a treatment team meeting guide was created and implemented in fall 2018. It provided a streamlined approach for each provider to address the child and family's needs, as well as requiring all parties meet face-to-face in a confidential location for the treatment team meetings. Each provider was provided a template as an example to use when inviting parties to the meeting with a request that it be distributed at least two weeks in advance of the meeting. All participant signatures were to be obtained and information typed in a professional manner upon completion. All providers were asked to forward copies of the completed guides to TFC Programs so guides could be reviewed and documented in KIDS.

CWS does not track the due dates of these treatment team meetings. OHCA tracks when a child is due for a treatment team meeting based on his or her prior authorization status with OHCA. TFC programs, in conjunction with OPOA, developed an audit tool to review the provider's treatment team meeting guides and determine if this new tool was having the desired impact. TFC Programs staff conducted the audit and OPOA compiled the results into the **TFC Audit**.

A random sample was taken of children who, from OHCA records, were due for a treatment team review between 11/1/18 and 3/31/19. From the sample, a review of treatment team meetings indicated:

- 95 percent had completed the treatment guides; and
- 92 percent of the completed guides identified treatment modalities.

As part of the audit, 88 percent of the therapists were interviewed and:

- 72 percent felt using the treatment guide improved clinical outcomes for the child; and
- 77 percent stated the treatment team meetings increased their knowledge of the child welfare case plan goals.

A child's assigned permanency specialist was also interviewed during this audit and all but four of the sample's specialists participated in the interview. Of those staff:

- approximately 65 percent agreed that participation in the treatment meeting improved their ability to move toward discharge planning and achieving permanency;
- 18 percent disagreed; and
- 17 percent did not know.

Of those who disagreed, the most common explanation was communication was already strong or participation by the therapist and/or TFC provider was inadequate. Some specialists felt the two weeks written notice was not sufficient notification about the meetings.

TFC Waiting List

The waiting list is examined on a daily basis by TFC Programs staff. Daily communication occurs with TFC providers to search for TFC homes that match children on the waiting list. When children are approved for TFC by OHCA, TFC staff document the authorization in KIDS and the child is automatically added to the TFC waiting list. The certificate of need (CON) is valid for 45-calendar days. When TFC Programs staff has not located a TFC home for a child within 45-calendar days, the child's assigned child welfare (CW) specialist may update the child's application if TFC services are still necessary. Previously, these children were removed from the waiting list after 45-calendar days and the CW specialist reapplied. TFC Programs stopped removing those children from the waiting list after 45-calendar days several months ago where the child remains, unless the CW specialist determines that the child no longer needs TFC. The child's updated application is submitted to OHCA for review. When the application is approved by OHCA, the continued authorization is documented in KIDS and the child remains on the TFC waiting list.

The previously reported average of nine days on the wait list included all children. If the child's CW specialist determines that TFC is no longer necessary, the child is removed from the waiting list when the CON expires or an alternate placement is located. CWS continues to provide the names of children denied TFC to the behavioral health consultants (BHCs) who assist by staffing the child's case with the child's CW specialist, identifying service providers in that child's local community, and making referrals when necessary. CWS is working with the BHCs to develop a similar process for children currently on the TFC waiting list. This reporting period's approvals and denials for TFC applications are displayed in Section 3, Table 2.3-2.

TFC Applications	January 2019	February 2019	March 2019	April 2019	May 2019	June 2019
Approvals	29	29	30	26	14	29
Denials	28	39	26	35	28	16
Total	57	67	56	61	42	45

Section 3, Table 2.3-2

Pressley Ridge Pre-Service Training

In July 2018, the Pressley Ridge pre-service therapeutic foster parent training model was implemented. All TFC providers were required to identify staff to participate in Pressley Ridge's Training of the Trainer. The providers agreed

to have their current families trained in the new model by June 2019. Twelve modules are in the Pressley Ridge training model. However, a determination was made that a family could provide respite care after completion of Module 9. A family is a fully-approved TFC home provider when the home study and all 12 modules of training are completed. In partnership with OPOA, TFC programs created a survey for all TFC parents who completed the Pressley Ridge model. Families open in the month of June 2019 received notification by mail or email to go to the website link and participate in the survey. In total, 254 TFC parents completed the Pressley Ridge training and 168 had an email address on file. All 254 TFC foster parents were also mailed a form letter inviting one of the household parents to complete the survey. Unfortunately, the survey only had a 13 percent response rate from TFC parents. While the response was disappointing, OPOA reported it was in line with the participation rate of other DHS surveys they have conducted. Of the **TFC Survey** participants, 48 percent reported being a foster parent for 10 years or longer and 97 percent indicated they had already completed the Pressley Ridge training. Specific questions were asked related to the training and the various skills taught. Questions were asked about implementation of skills, such as supporting active listening, managing conflict, supervision, behaviors to facilitate attachment, and encouraging positive behaviors of the children in their homes. The majority of the respondents answered positively to all questions about the training's usefulness. Of the respondents, 100 percent reported continuing to use the knowledge and skills gained in the training; 93 percent felt more equipped to fulfill their responsibilities as a TFC parent. Overall, the responses were positive regarding the Pressley Ridge model, but reissuing the survey again at a later date to gain further insight would be prudent. A survey was not conducted with DHS staff, only provider feedback and a foster parent survey was completed. However, based on the feedback from both foster parents and TFC agencies, the training had the desired effect in preparing families for TFC.

Development of the Intensive Treatment Family Care (ITFC) Program

During this reporting period, TFC Programs engaged in an immense amount of work and collaboration with OHCA to discuss ITFC rates, program requirements, policy, and an ITFC implementation plan. In June 2019, DHS began a pilot of the ITFC program without OHCA reimbursement since DHS thought it was a necessary program for children who seemingly fell through placement gaps in the system. In order to implement the ITFC pilot, current TFC providers identified existing TFC families who were interested in the program. Six of these families completed supplemental applications and a face-to-face interview panel in April 2019. Of the six families, five families were approved for the ITFC program. Five children were identified and placed into these ITFC homes during June. Of the five, two children stepped down from a group home and the other three children had behavioral needs in addition to Intellectual Disability and Developmental Disability needs.

Again, DHS considers ITFC a pilot program and the new DHS and CWS leadership is consulting with current TFC providers as well as therapeutic experts in the field to determine the effectiveness of not only ITFC but TFC as well. DHS has also recently requested a TFC rate increase that is scheduled to begin in September 2019. DHS will continue to monitor both programs as well as await necessary programmatic and funding approvals.

7.1: Worker Caseloads

Operational Question

What percentage of all child welfare (CW) workers meet caseload standards, are close to meeting workload standards, or are over workload standards?

Data Source and Definitions

Utilizing the standards set forth in the Pinnacle Plan, each individual type of case is assigned a weight and then the weights are added up in order to determine a worker's caseload. The consolidated workload tracking process allows Oklahoma to factor in the worker's "Workload Capacity." The chart below represents the consolidated workload tracking process. A snapshot is taken every morning at 12:00 am of the workload of all CW workers. The entire workload of workers with a qualifying case assignment of Child Protective Services (CPS), Permanency Planning (PP), Family-Centered Services (FCS), Adoption, and Foster Care are calculated and compared against the caseload standards. The workload is classified as meeting standards if it is 100 percent at or below a caseload. When the workload is over

100 percent but less than 120 percent of a caseload, it is considered to be "over but close"; otherwise, the workload is considered to be over the standard. The measure tracks each worker each day to determine if they meet the standard, and this is called a "worker day." Work performed by CW specialists is broken into multiple categories. This measure looks specifically at all CW workers (total), PP, FCS, CPS, Adoption, Foster Care, and Comprehensive workers. As of 12/31/2016, the Oklahoma Department of Human Services (DHS) began using the Y1768C as the data source for the Workloads reporting measure, which is a point in time number of workers who are meeting workload standards on the last day of the reporting period. All previous reporting periods were updated to reflect this data.

Description of Denominator and Numerator for this reporting period

Denominator: The number of all CW workers in Adoptions, Foster Care, FCS, CPS, and PP that were caseload carrying eligible on the last day of the reporting period with at least one assignment on their workload.

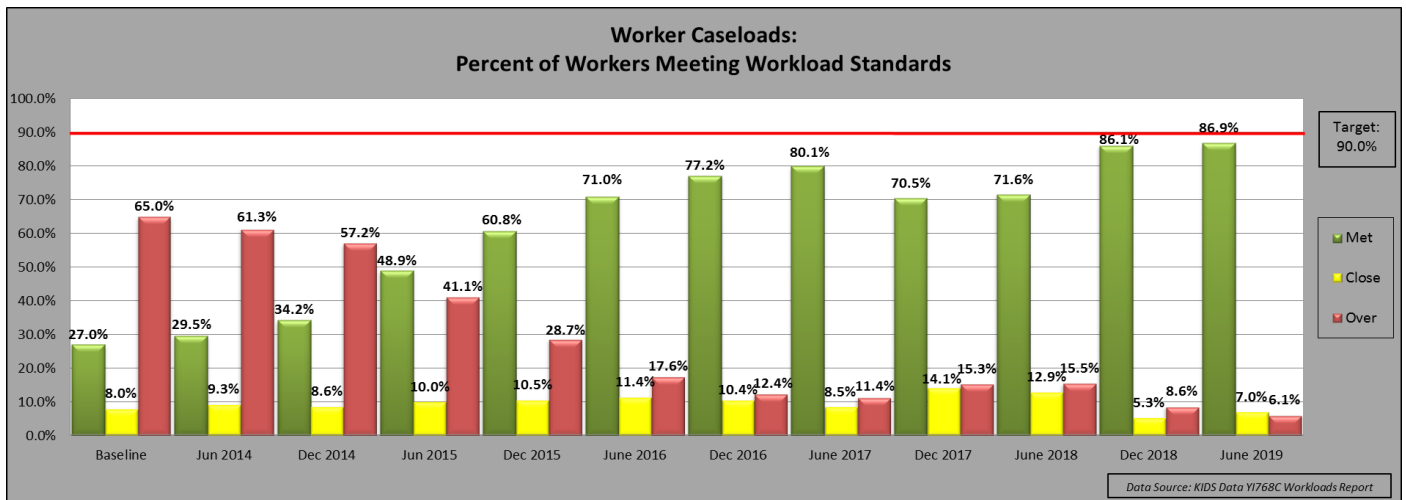
Numerator: Number of worker days where workers met the standard carrying a caseload of 100 percent or less of their calculated workload capacity.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 1/1/2013 – 6/30/2013	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP			27.0%
1/1/2014 – 6/30/2014	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	359 Workers	1219 Workers	29.5%
7/1/2014 – 12/31/2014	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	419 Workers	1227 Workers	34.2%
1/1/2015 – 6/30/2015	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	658 Workers	1345 Workers	48.9%
7/1/2015 – 12/31/2015	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	912 Workers	1501 Workers	60.8%
1/1/2016 – 6/30/2016	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1176 Workers	1656 Workers	71.0%
7/1/2016 – 12/31/2016	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1274 Workers	1651 Workers	77.2%
1/1/2017 – 3/31/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1212 Workers	1644 Workers	73.7%
4/1/2017 – 6/30/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1299 Workers	1621 Workers	80.1%
7/1/2017 – 9/30/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1037 Workers	1562 Workers	66.4%
10/1/2017 – 12/31/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1097 Workers	1555 Workers	70.5%

1/1/2018 – 3/31/2018	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1113 Workers	1546 Workers	72.0%
4/1/2018 – 6/30/2018	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1106 Workers	1545 Workers	71.6%
7/1/2018 – 9/30/2018	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	934 Workers	1490 Workers	62.7%
10/1/2018 – 12/31/2018	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1250 Workers	1451 Workers	86.1%
1/1/2019 – 3/31/2019	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1312 Workers	1487 Workers	88.2%
4/1/2019 – 6/30/2019	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1295 Workers	1490 Workers	86.9%
Target				90.0%

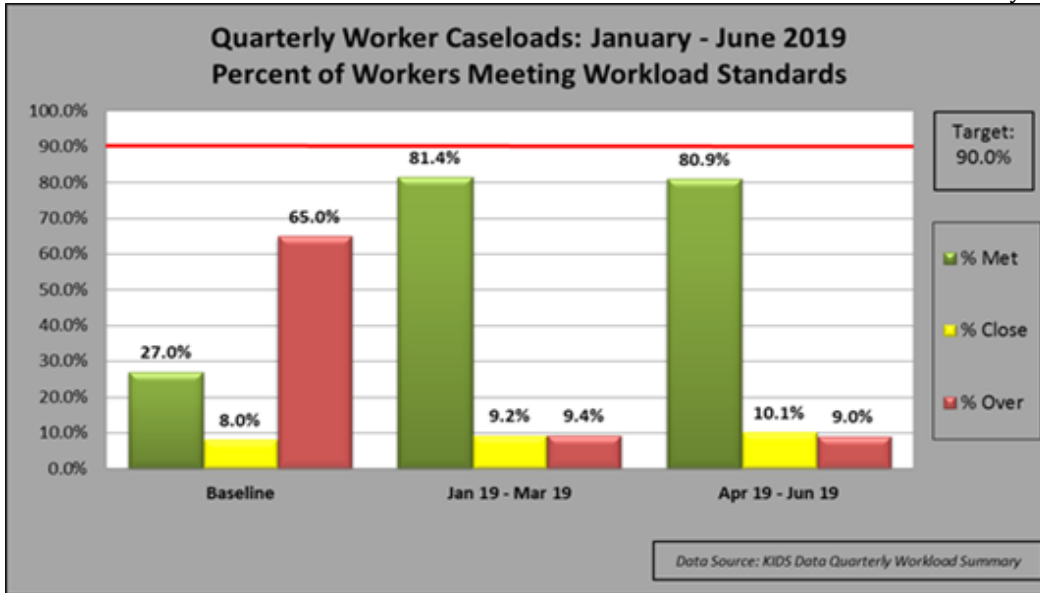
Section 3, Table 7.1-1



Section 3, Graph 7.1-1

Commentary

A one-day snapshot of the workload data is represented in Section 3, Graph 7.1-1. As of 6/30/19, using the point-in-time Y1768C Workload data report, the percentage of CW workers meeting the standard is 86.9 percent, with 7.0 percent close, and 6.1 percent over the standard. Of the 1,490 workers, 1,295 workers were meeting workload standards, 104 workers were close, and 91 workers were over the standard.



Section 3, Graph 7.1-2

Worker Type	Worker Days	% Met	% Close	% Over
ADOPTION SPECIALIST	4640	90.3%	6.1%	3.7%
RESOURCE FAMILY SPECIALIST	18413	84.6%	12.6%	2.9%
COMPREHENSIVE	6170	83.5%	15.0%	1.5%
PERMANENCY PLANNING	54239	82.9%	9.1%	8.0%
PREVENTIVE/VOLUNTARY	6696	88.5%	8.6%	3.0%
INVESTIGATION	37063	70.2%	11.6%	18.2%
RECRUITMENT	3350	100.0%	.0%	.0%
ADOPTION TRANSITION SPECIALIST (ATU)	3795	93.8%	5.5%	.8%
TOTAL	134366	80.9%	10.1%	9.0%

Data Source: KIDS Data Quarterly Workload Summary Ending 6/30/19

Section 3, Table 7.1-2

Commentary

In addition to the point-in-time reporting of workloads, a snapshot of each worker's workload is captured for every day during the quarter. The total days during the quarter that each worker is meeting, close, and over workload standards is then reported in the Quarterly Workload Standards Report. This number differs from the point-in-time report taken from the YI768C, as this quarterly report reflects all days during the quarter. This report counts the number of days workers were meeting, close, or over workload standards; whereas, the YI768C report is reporting on the number of workers. For the quarter of 4/1/19 through 6/30/19, there were a total of 134,366 worker days. Of those days, workers met workload standards 80.9 percent of the worker days, workers were close to workload standards 10.1 percent of the worker days, and workers were over workload standards 9.0 percent of the worker days.

Child Welfare Services (CWS) finished this period with the highest percent of staff meeting workload standards at 86.9 percent and no workers over 175 percent of a workload.

CWS performance during this period shows significant improvement for several areas. CWS was able to stabilize workload capacity after losing 88 workloads of capacity the previous six months. In calendar year 2018, CWS experienced significant turnover in caseload carrying positions, with a net loss of 87 level I and II workers. The first six

months of 2019 indicate a net gain of 48 caseload carrying positions. CWS also ended the reporting period with 1,250 caseloads, which is the lowest number of caseloads during any reporting period.

KIDS workload reports pulled 10/5/18 identified Canadian (District 4B), Grady, Stephens, and Jefferson (District 6A), and Rogers, Mayes, and Craig (District 12) as priority districts based on the percentages of workloads that were meeting, close and over the workload standard. The initial approach to realign workload assignments was intended to more effectively leverage existing capacity. The plan involved leadership monitoring these priority districts weekly for no more than three weeks to ensure that any unintended consequences are mitigated timely. To communicate and share the efforts made in each district and to further evaluate the impact made within the region, a decision was made to discontinue identifying priority districts and expand the number of districts during the calls based on available workload data. By November 2018, individual districts were identified in each region to participate in the workload compliance bi-weekly calls. Individual calls were scheduled with each region. Region 1 identified Beckham, Custer, Ellis, Roger Mills, Washita (District 2), Canadian, Blaine, Garfield, Grant (District 4) and Logan, Payne (District 9) as the included districts. Region 2 identified Greer, Harmon, Jackson, Tillman (District 3), Jefferson (District 6A) and Carter, Johnston, Love, Marshall, Murray (District 20). Region 3 identified the offices of 55A, 55B, 55D, 55F, 55H, and the Family T.R.E.E. (District 7). Region 4 identified Okmulgee and McIntosh (District 25), Adair, and Sequoyah (District 27A). Region 5 identified Craig, Mayes, Rogers (District 12), Delaware, Ottawa (District 13), Nowata, and Washington (District 11). Each of the calls with the included districts provided a data overview of the overall statewide percentages of workloads that were meeting, close and over the workload standard. In addition, the same data was included for all districts/offices involved in the call and an overview for the entire region.

The districts continued to utilize data to manage workload assignments and monitor graduated workloads to maximize capacity. The workload management calls continued to ensure caseloads were assigned in an efficient manner to maximize the number of staff meeting caseloads at the most local levels and at a higher level also looking at how to best distribute or utilize capacity either within the district or across districts lines. These strategies included utilizing workers across district lines, moving full-time employees from one district to another, redistributing cases, and using different worker types to fill in the gaps during temporary capacity shortages. Although this management method is new to the districts, these action steps established a management practice to sustain compliance efforts in each region and district.

CWS continues the weekly calls to address workload standard compliance and hiring/retention, which are the two main areas of focus to impact the number of staff meeting standards. The hiring and retention calls focused almost exclusively on what is referred to as the "Direct Hiring Process" that Human Resources Management (HRM) developed for CWS to help streamline the hiring process and in effect eliminate barriers created by the process itself. The process has proven to be beneficial and is well received by field staff. CWS continues to partner with HRM to hold hiring events, work with universities to recruit, and use social media and job websites to enhance the applicant pool.

CWS Practices that Impact Workload

- As in the Core Strategy Permanency - Adoption Timeliness Accountability Teams, the teams that are moving legally-free children available for adoption into permanency, create better outcomes for children, and also help close cases; therefore, reducing the number of cases that need to be assigned.
- Core Strategy Resource Home Recruitment - Foster Care's *Support is Everyone's Game* is another example of an effort to sustain placements in foster care by recognizing the great work done at the county office level to recruit and retain foster families, which creates more placement opportunities and should lessen the stress on workers who struggle to find placements or confront placement disruptions.

As CWS continues to improve the child welfare experience for children and families, caseloads and worker retention will also improve.

7.1: Supervisor Caseloads

Operational Question

What percentage of child welfare (CW) supervisors meet caseload standards, are close to meeting workload standards, or are over workload standards?

Data Source and Definitions

This measure looks at supervisor units in regards to the worker standard per unit. There are two parts to determine if a supervisor unit meets the standard. First, the measure looks at the number of CW workers each supervisor is currently supervising in his or her unit. The target is for each unit to have a ratio of five CW workers to one supervisor. When a unit has a ratio of 5:1 or less, they are considered to meet the standard. Units are "close" when they have a ratio of 6:1. All units with a ratio of 7:1 or over are considered "over." Each worker accounts for 0.2 percent of a supervisor's workload capacity. Secondly, the measure looks at any of those supervisors who are currently supervising caseload carrying workers and also have primary assignments on his or her own workload. Because these workload assignments deduct from a supervisor's capacity to supervise their workers, the additional caseload must be factored into the measurement. When a supervisor has less than two case assignments, the case assignments will not be calculated into the measurement. Any other assignments on a supervisor's caseload will be calculated at the same weight as a worker's caseload and then added to the supervisor capacity, which includes the number of workers supervised. With this combined calculation of the supervisor's workload capacity, it is then determined how many of these supervisor units are meeting the workload standard.

Description of Denominator and Numerator for this reporting period

Denominator: All current supervisor units currently supervising caseload carrying workers in Adoptions, Foster Care, Family-Centered Services, Child Protective Services, and Permanency Planning.

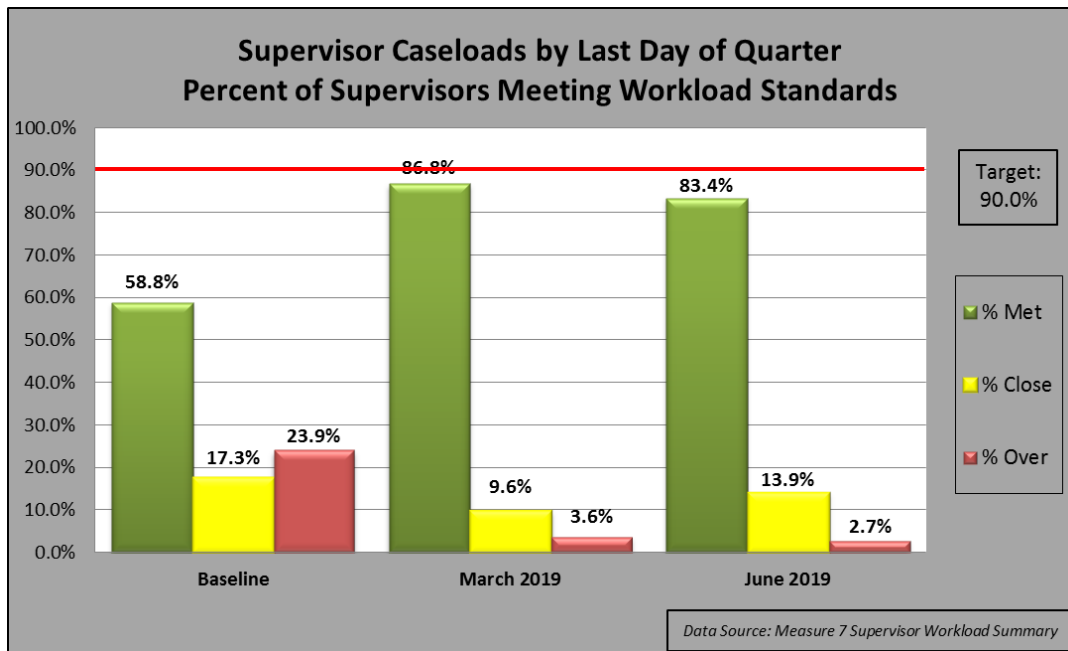
Numerator: All current supervisors with a combined workload of 100 percent or less.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 4/1/2014 – 6/30/2014	All supervisors with a unit currently supervising caseload carrying workers			58.8%
7/1/2014 – 12/31/2014	All supervisors with a unit currently supervising caseload carrying workers	217 – Met	306 Units	70.9%
1/1/2015 – 6/30/2015	All supervisors with a unit currently supervising caseload carrying workers	259 – Met	345 Units	75.1%
7/1/2015 – 12/31/2015	All supervisors with a unit currently supervising caseload carrying workers	297 – Met	372 Units	79.8%
1/1/2016 – 6/30/2016	All supervisors with a unit currently supervising caseload carrying workers	308 – Met	379 Units	81.3%
7/1/2016 – 12/31/2016	All supervisors with a unit currently supervising caseload carrying workers	330 – Met	387 Units	85.3%
1/1/2017 – 3/30/2017	All supervisors with a unit currently supervising caseload carrying workers	317 – Met	376 Units	84.3%

4/1/2017 – 6/30/2017	All supervisors with a unit currently supervising caseload carrying workers	313 – Met	375 Units	83.5%
7/1/2017 – 9/30/2017	All supervisors with a unit currently supervising caseload carrying workers	301 – Met	368 Units	81.8%
10/1/2017 – 12/31/2017	All supervisors with a unit currently supervising caseload carrying workers	319 – Met	377 Units	84.6%
1/1/2018 – 3/31/2018	All supervisors with a unit currently supervising caseload carrying workers	318 – Met	375 Units	84.8%
4/1/2018 – 6/30/2018	All supervisors with a unit currently supervising caseload carrying workers	312 – Met	373 Units	83.6%
7/1/2018 – 9/30/2018	All supervisors with a unit currently supervising caseload carrying workers	339 – Met	379 Units	89.4%
10/1/2018 – 12/31/2018	All supervisors with a unit currently supervising caseload carrying workers	334 – Met	377 Units	88.6%
1/1/2019 – 3/31/2019	All supervisors with a unit currently supervising caseload carrying workers	316 – Met	364 Units	86.8%
4/1/2019 – 6/30/2019	All supervisors with a unit currently supervising caseload carrying workers	307 – Met	368 Units	83.4%
Target				90.0%

Section 3, Table 7.1-3



Section 3, Graph 7.1-3

Commentary

For the current quarter, 368 supervisor units in total were counted, which is comprised of 1,645 CW specialists I, II, and III's. This calculates to a statewide worker to supervisor ratio of 4.47. As of 6/30/19, 307 supervisors met the workload standard, 51 supervisors were close to meeting the standard, and 10 supervisors were over the standard. As part of this measure, the work assigned to supervisor's workloads must also be calculated into the workload standard. 110 supervisors had at least one assignment on his or her caseload and 25 of those supervisors had more than two assignments.