



PINNACLE PLAN MEASURES SEMI-ANNUAL SUMMARY REPORT

February 19, 2021

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Executive Summary Regarding COVID-19

Child Welfare Services Director Deborah Shropshire

The COVID-19 pandemic continues to batter Oklahoma, and the current reporting period of July – December 2020 held intense challenges to children, youth, and families and those systems trying to serve them. Oklahoma Human Services (OKDHS) Child Welfare Services (CWS) stood strong in the face of growing numbers of COVID-19 illness and death. Several hundred Child Welfare (CW) staff were themselves quarantined or ill during this period and unfortunately four team members lost their lives to COVID-19. In addition, CW staff dealt with the complexity of education for their own children, as schools struggled with near weekly changes to in-person vs. virtual learning. The CWS team adapted to continuous changes to workflows and technology, building closures, and even a major weather event in October 2020 that crippled electricity, Wi-Fi, and transportation for up to two weeks for a large portion of the state. CWS was not alone in dealing with this adversity – every single child-serving system was heavily impacted including but not limited to schools, courts, therapists, hospitals, foster homes, and natural families. While the chaos is not unique to Oklahoma, it is important to consider the efforts of child welfare reform against the appropriate historical backdrop. During such a time, the fact that any progress at all can be made is quite remarkable.

Nevertheless, Oklahoma did, in fact, move forward. State leaders – Governor Stitt, legislators, agency directors, and others – worked together to provide supports to families facing economic hardship who might have otherwise been faced with the kind of desperate decisions that sometimes result in a threat to child safety. CWS was empowered by OKDHS Director Justin Brown and the OKDHS leadership team to leverage funding and creative solutions to stabilize providers, foster parents, and the CWS workforce. Measurable gains were noted in several areas, including first placement with kin, placement stability, and caseworker and supervisor workloads.

Several measures were negatively impacted, which is not surprising, but CWS fought back. Shelter use and length of stay for school-age children spiked in the summer and early fall with the uncertainty of a return to school, but declined in the last half of the period. A fresh commitment to eliminate shelter use for the youngest children resulted in no child-under eight years old in a shelter by the writing of this report. Foster home recruitment faced significant challenges, and while therapeutic home recruitment slowed to a crawl, the enhanced foster care program continues to grow and steadily mature. Traditional foster home recruitment by OKDHS and resource family partner agencies proceeded at near 80 percent of the goal for the reporting period, with some teams and agencies performing exceptionally well. Perhaps the greatest slowdown occurred in the timely achievement of permanency. This was a metric requiring greater analysis and attention even prior to the COVID-19 pandemic, and the impact of the pandemic has been incredibly challenging. While courts were not a cause of delay prior to the onset of the COVID-19 pandemic, the subsequent impact of necessary court closures and quarantines has resulted in a large number of hearing delays that continued throughout this reporting period. In addition, the provision of services for parents, children, and youth were intermittently disrupted or delayed due to quarantine, illness, technology challenges and efficacy, and a variety of other impacts. Moreover, families – natural and those stepping into adoption or guardianship – faced their own health, economic, and other barriers related to the pandemic that delayed progress. Despite this, CWS doubled down on the development of family engagement strategies aimed at improving reunification rates and permanency timeliness; implementation efforts began in this period; and continue to be deployed into the next. Deeper understanding of barriers to timely permanency has been and continues to gain momentum and better analysis and accountability efforts are well underway.

Robert Frost's famous poem describes a traveler who has a choice to make between two paths and chooses the one "that was grassy and wanted wear". For many of the Compromise and Settlement Agreement measures, Oklahoma's child welfare system has improved so greatly for so long that CWS staff and partners do not even remember what it was

like a decade ago. However, making improvement in a final few challenging practice areas during a global pandemic is unfamiliar territory – a path with no footprints to follow. Therefore, CWS and the many partners who stand shoulder to shoulder with us, will make our own way forward – because the children and families we serve deserve it.

Deborah Shropshire, MD
Director, Child Welfare Services
Oklahoma Human Services

OVERVIEW

Oklahoma Human Services (OKDHS) 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. [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 OKDHS 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 OKDHS 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

OKDHS 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, OKDHS believes it is important to clarify how the various metrics relate to the levers that OKDHS 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 that 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 relate 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 OKDHS' 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.

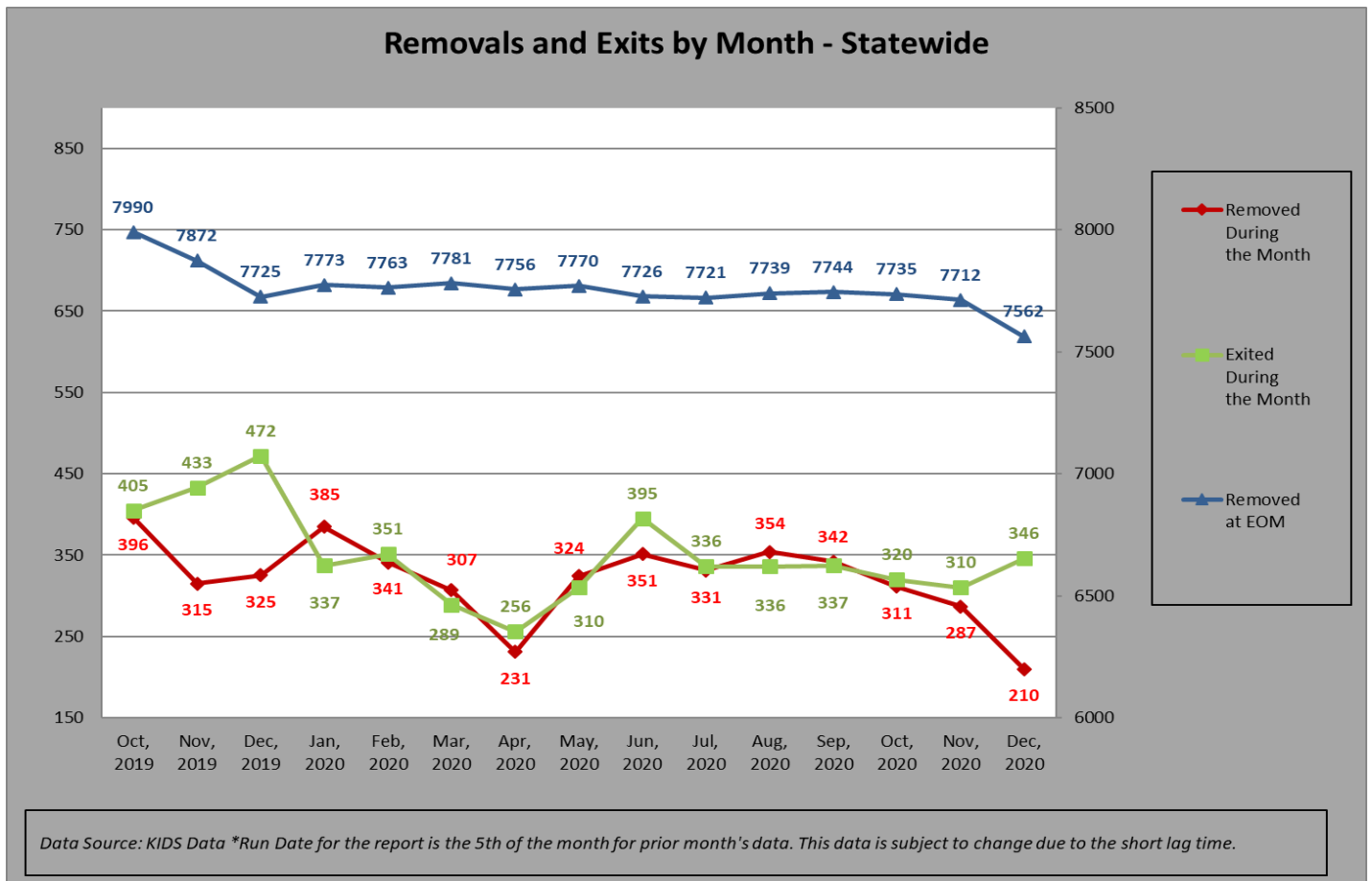
SECTION 2: Child outcomes. This section reports on metrics related to safety and permanency outcomes for children in care. These include indicators pertaining to **maltreatment in care, frequency of worker contacts, placement stability, shelter placement, and permanency.**

SECTION 3: Capacity indicators. This section reports on metrics designed to measure the capacity of OKDHS 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 Human Services (OKDHS) 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 December 2020, the number of children in care was 7,562, a 33.1 percent decrease since October 2014, which is a continued 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 October 2019 through December 2020. In federal fiscal year (FFY) 2020, the overall number of children exiting care outnumbered the number of children removed during the 12-month period.

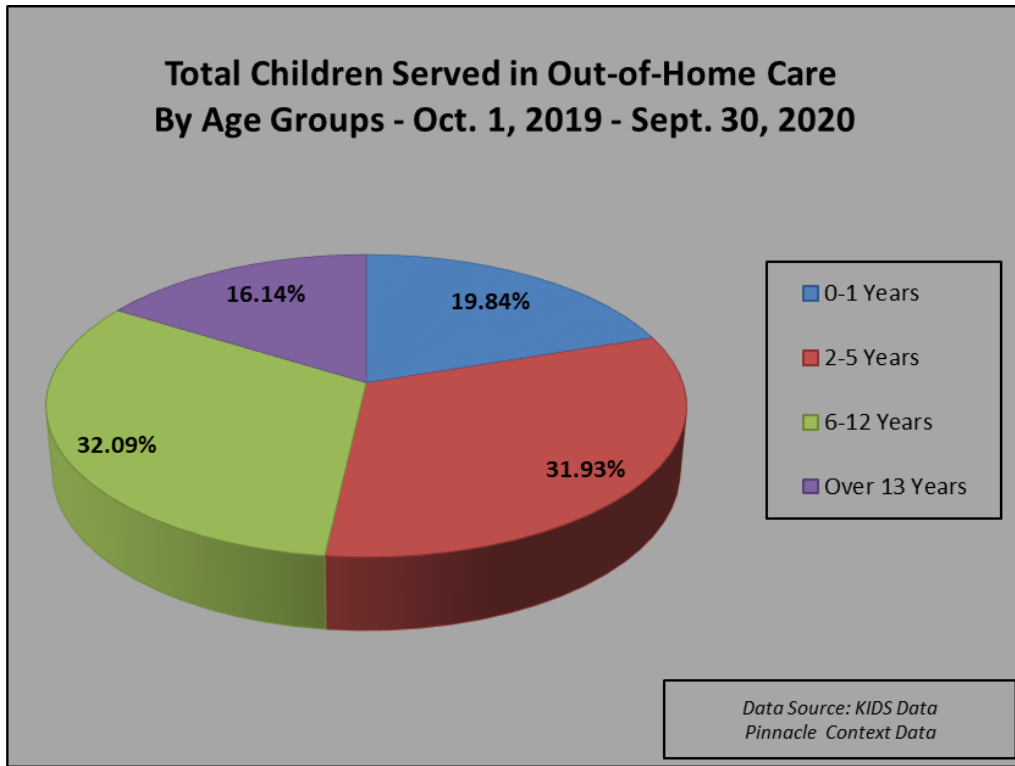


Section 1, Graph 1

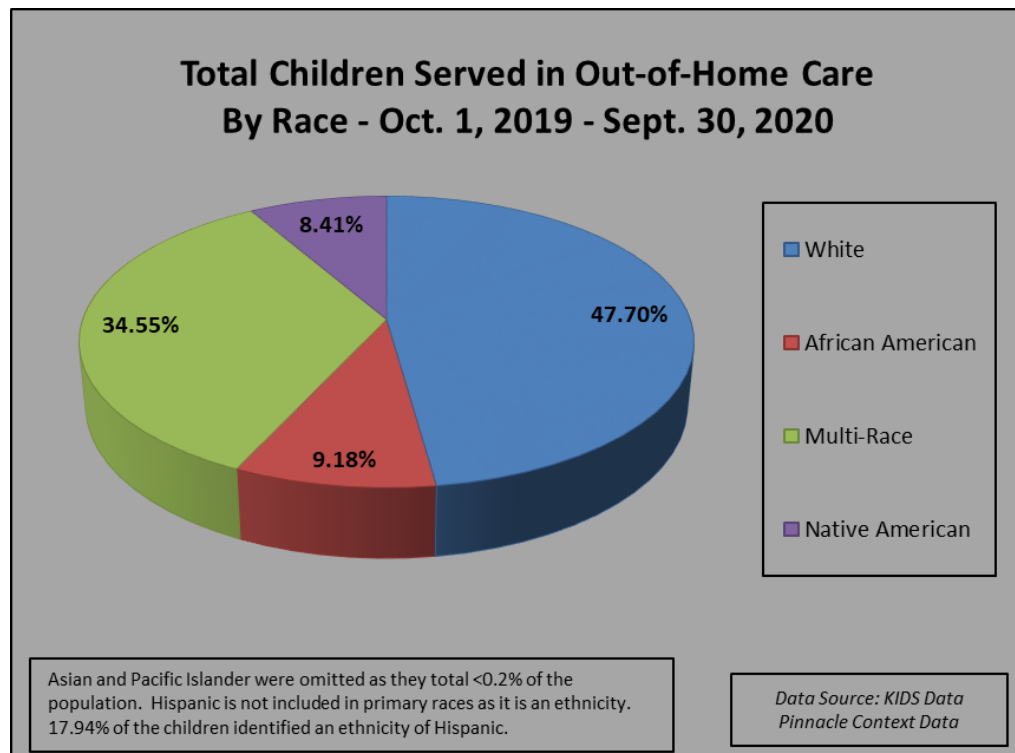
Demographic Information by Reporting Period

During the reporting period of October 1, 2019 through September 30, 2020, according to Adoption and Foster Care Analysis Reporting System (AFCARS), OKDHS served 12,268 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 11,998 excluding children in tribal custody.

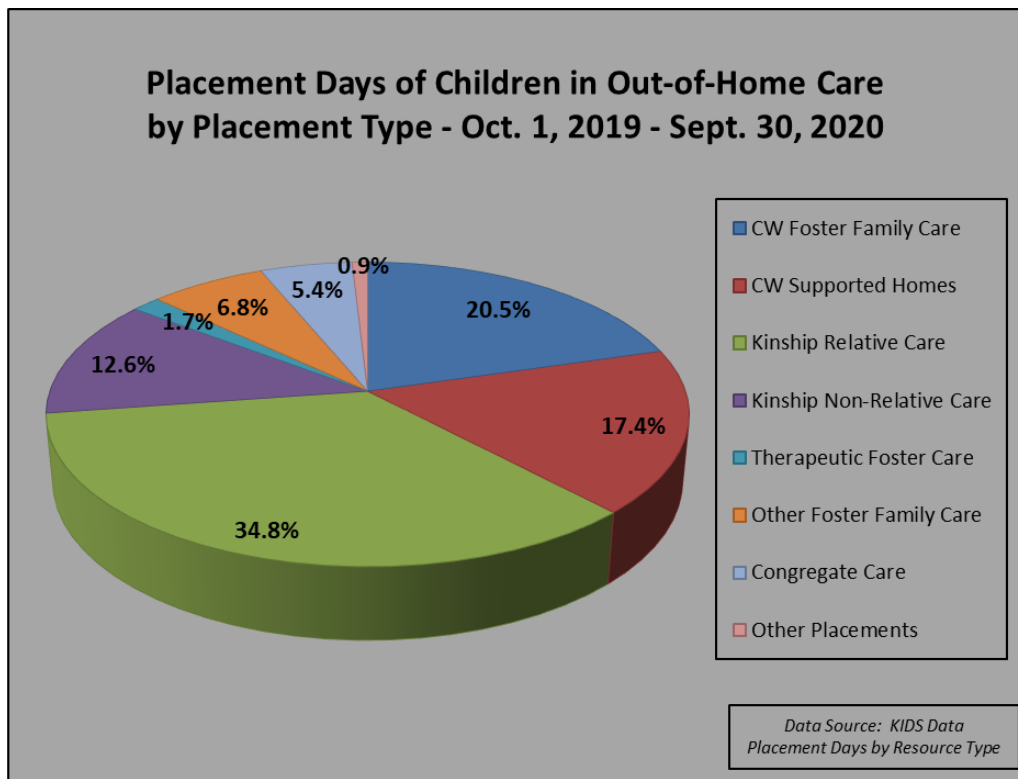
Section 1, Charts 1, 2, and 3 show the children's demographics by age, race, and placement type. For race, when a child claims more than one race, the child is counted in the Multi-Race category. Hispanic or Latino origin is no longer counted as a primary race.



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) 20A & 20B files combined with a non-submitted annual National Child Abuse and Neglect Data System (NCANDS) file, covering AFCARS 20A & 20B 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 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

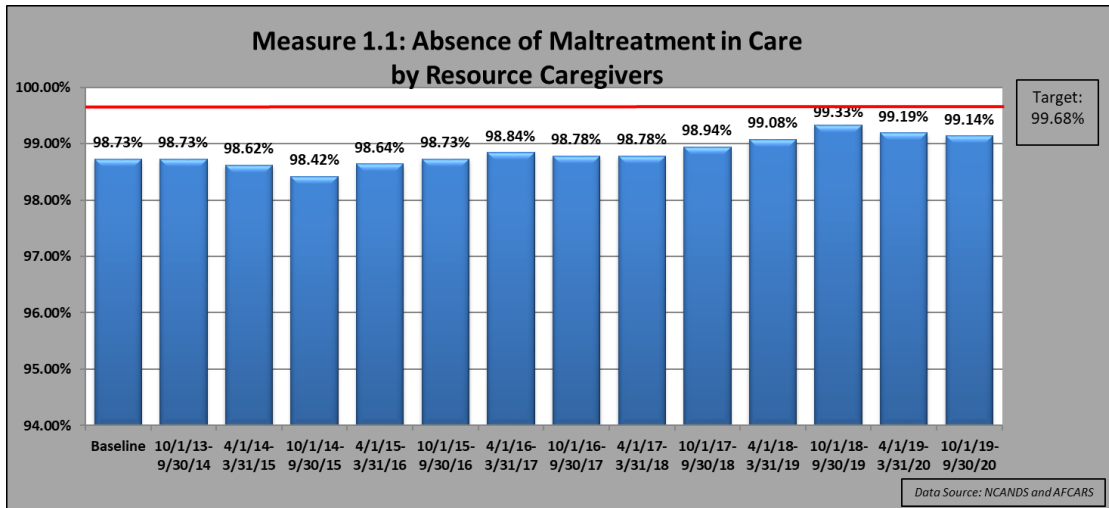
Denominator: All children served in foster care from 10/1/2019 through 9/30/2020.

Numerator: The number of children served in foster care from 10/1/2019 through 9/30/2020 who did not have any substantiated or indicated allegations of maltreatment by a foster parent or facility staff member during that period.

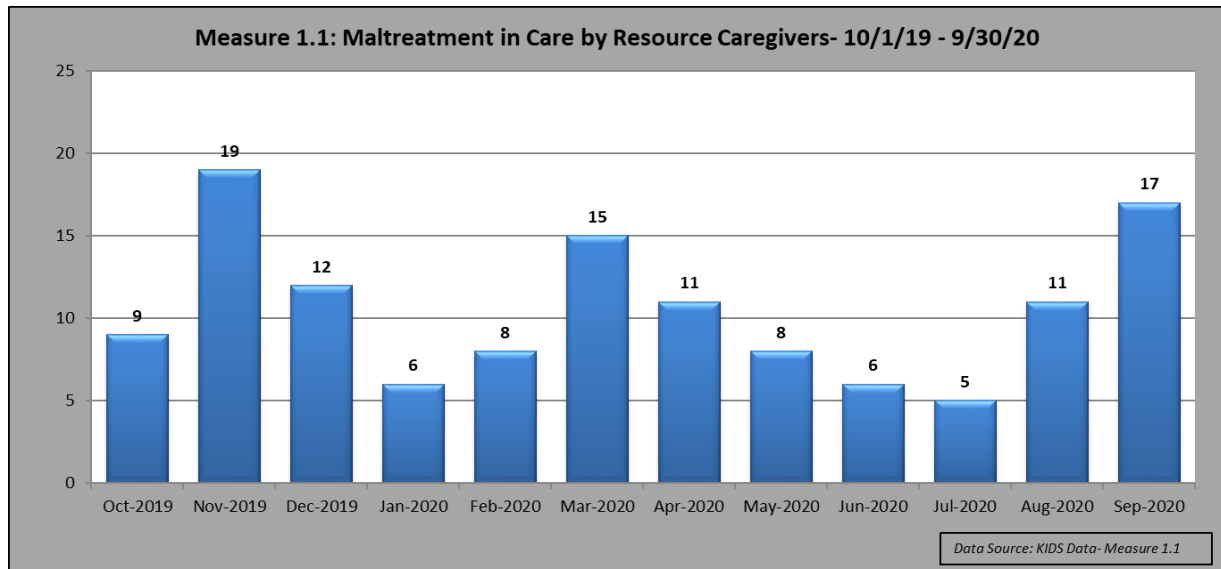
Trends

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%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019	12,995	13,082	99.33%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020	12,556	12,659	99.19%
10/1/2019-9/30/2020	All children served from 10/1/2019 - 9/30/2020	12,162	12,268	99.14%
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 October 1, 2019 - September 30, 2020						Ending 9/30/20 MIC Rate per 100,000 days
Placement Type	Placement Days	Percent	Placement Type	MIC	Percent	
CW Foster Family Homes	556,246	20.5%	CW Foster Family Homes	29	22.8%	5.2
CW Foster - Supported Homes	473,749	17.4%	CW Foster - Supported Homes	10	7.9%	2.1
Kinship Foster Care - Relative	944,391	34.8%	Kinship Foster Care - Relative	38	29.9%	4.0
Kinship Foster Care Non-Relative	341,944	12.6%	Kinship Foster Care Non-Relative	17	13.4%	5.0
Therapeutic Foster Care Homes	45,336	1.7%	Therapeutic Foster Care Homes	9	7.1%	19.9
Congregate Care	184,424	6.8%	Congregate Care	24	18.9%	13.0
Other Foster Family Care	145,386	5.4%	Other Foster Family Care	0	0.0%	0.0
Other Placements	24,542	0.9%	Other Placements	0	0.0%	0.0
Total	2,716,018	100.0%	Total	127	100.0%	4.7

Data Source: Pinnacle MIC Data for 12 months ending 9/30/20; Run Date: 12/1/20; Data Source: Placement Days by Resource Type; Run Date: 10/5/20

Section 2, Table 1.1-2

Data 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, 106 victims were reported.

For the reporting period October 1, 2019 through September 30, 2020, 127 substantiations of maltreatment while in out-of-home care were reported in the monthly MIC Pinnacle Plan Measure. These 127 victims were included in 83 separate referrals: 63 referrals for children in foster care and 20 referrals to OCA. Of the 127 victims, 103 were placed in foster care settings and 24 were placed in congregate care settings:

Of the 103 Victims in Foster Family Care:

- 38 children were in a Kinship Foster Care – Relative Home (36.9%);
- 29 children were in a child welfare (CW) Foster Family Home (28.2%);
- 17 children were in a Kinship Foster Care Non-Relative Home (16.5%);
- 10 children were in a CW Foster – Supported Home (9.7%); and
- 9 children were in a Therapeutic Foster Care (TFC) Home (8.7%).

Of the 24 Victims in Congregate Care Placement:

- 15 children were in a Level Resource Facility (B, D, D+, or E) (62.5%);
- 5 children were in a Psychiatric Residential Treatment Center (20.8%);
- 2 children were in a Detention Center (8.3%);
- 1 child was in a Non-Oklahoma Human Services (OKDHS) Operated facility (4.2%); and
- 1 child was in a Youth Services Shelter (4.2%).

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

Reporting Period Progress

FOSTER CARE

Statewide Automated Child Welfare Information System (SACWIS)/KIDS

In October 2020, KIDS implemented the release of tracking resource exception requests and policy violations in KIDS. KIDS staff, along with a Foster Care and Adoptions (FC&A) program field representative (PFR), held six virtual training sessions for staff in November and December 2020. The trainings showcased the new features and how to input the information into KIDS accurately. KIDS continues to work on reports related to these new enhancements that can be used by FC&A field, management, and program staff. An additional KIDS enhancement, set for release in October 2020 that provides details on the reason for initiating a written plan of compliance (WPC), was moved to August 2021 due to required AFCARS updates in the KIDS system.

In December 2020, programs staff also began highlighting referrals that were screened-out as a policy violation to ensure the proper protocol was followed as outlined in Child Welfare Services (CWS) Numbered Memo 20-05. FC&A programs staff worked with KIDS to develop a report that specifically tracks screened-out referrals as a policy violation to ensure contact with the child is completed timely. As of the last week of January 2021, report YI790C is available on the WebFOCUS dashboard.

Screen-Out Consultations

Screen-out consultations consistently maintained a completion rate of 100 percent for this reporting period. From April to September 2020, all 301 required screen-out consultations were completed as shown in Section 2, Table 1.1-3. Since FC&A program staff began sending the YI790B bi-weekly early in 2020, staff improved completion rates of timely screen-out consultations and documentation.

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%
Apr-20	41	41	100.0%
May-20	43	43	100.0%
Jun-20	61	61	100.0%
Jul-20	54	54	100.0%
Aug-20	45	45	100.0%
Sep-20	57	57	100.0%
TOTAL	301	301	100.0%

Data Source: Y1790B - Out-of-Home Screen-Out Detail; Run Date: 10/21/20

Section 2, Table 1.1-3

Child Protective Services (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. KIDS also continues to capture the review process when CPS programs staff document if their office concurs with the screened-out disposition. 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.

When a concern regarding an RFP or TFC resource is noted through a screen-out consultation, a 10-day staffing, or any other process or staffing, CW staff in the RFP unit or TFC programs continues to provide the agency with a deadline for addressing the concern with the family and the outcome reported back to CWS. The deadline provided to the agencies is within 10-calendar days of notification of the concern. The agency's follow-up on noted concerns is tracked by both RFP and TFC programs staff and documented in the KIDS Resource. This process increased timely follow-up on concerns and continues to work smoothly.

Monthly safety calls continue as an embedded process for supported agencies. These calls occur if a foster home receives a screen-out or investigated referral and also if action steps or follow-up is identified during a screen-out consultation or 10-day staffing. Additionally, safety calls are conducted when there is an active resource alert, a policy violation, an active WPC, or any other ongoing concerns as identified by the agency or RFP unit. Individual calls are held with each agency that have resources with one of the reasons that mandate participation in a safety call. The agency reports on their progress towards resolving safety issues and collaborates with the RFP unit to address any barriers identified.

Placement Process Enhancements

CWS is committed to improving the placement process to ensure a child or youth goes to a resource home that can best meet his or her needs. FC&A initiated a placement workgroup to review current placement processes utilized in each region. The workgroup's goal is to improve placement efficiency and identify areas for consistency statewide. A Continuum of Care (COC) workgroup focused on child or youth screening and placement in all levels of care is currently working to develop a uniform placement request. This placement request will include an interview with the child or youth's CW specialist to gather the child's strengths and needs. Inclusion of an interview portion in the request incorporates human interaction into an administrative process that results in a more accurate, historical picture of the child or youth's behaviors and needs.

The COC Placement Document and Screening workgroup continued to work on finalizing communication for the field about the placement process roll out. Currently, the database allows demographic information to populate from KIDS into the placement request itself, allowing the process to be streamlined. The Child Placement Interview (CPI) is embedded within the database; therefore, staff will enter in a narrative capturing information on the child or youth's education, behavior/mental health information, sexual health and/or behavior, medical/dental/vision needs,

developmental needs, daycare and a family time narrative. The database will then allow the request to be converted to a PDF format so the child or youth's placement request can be uploaded to KIDS for archiving and then inserted into an email to the RPT, CW specialist, and CW supervisor. The database was completed in late November, which allowed time for testing. Testing has gone well with only minor needed adjustments. Now that the database is in place, the roll out for the Regional Placement Teams (RPTs) statewide will begin 2/1/2021. The RPTs are part of the FC&A program. Regions 2, 3, and 4 each have a RPT team comprised of staff within the same supervisory unit. Regions 1 and 5 each have a RPT team comprised of staff from different supervisory units within the region. These teams are to report to field managers within the designated region. As the RPTs roll out on 2/1/2021, live interviews will also begin on the same day in Region 3. After the process is in place in Region 3, the live interview process will start in the other four regions in the subsequent two months. Information gathered within the placement request is documented in the CPI, and then stored in the child or youth's KK case File Cabinet for archiving. The CPI is provided to the appropriate RPT, CW specialist, and CW supervisor by email. This process allows the child or youth's CW specialist to know the request is complete and that the RPT is searching for potential placements. If the child or youth requires a different level of care, then the designated program's email is added on the original email notification so the child or youth's information is reviewed for approval or denial for enhanced foster care (EFC), TFC, and intensive treatment family care (ITFC). The CPI is shared by the RPTs with a foster parent when considering a placement and upon accepting placement. Sharing the CPI will hopefully address some of the concerns seen in foster parent exit surveys regarding not having enough information at the time of placement.

Foster Home Assessments

During this reporting period, FC&A enhanced several forms related to the initial and ongoing resource approval process. Development of new forms and ongoing revision of current forms assists with continual improvement of the resource approval process.

- The *Resource Family Assessment Review Tool* and *Resource Home Addendum* were both made into official forms. The *Resource Family Assessment Review Tool* allows CW staff and supervisors to complete a high-level review of the information gathered during the entire assessment process and note any concerns or areas that need follow-up prior to final approval as a resource home. The *Resource Home Addendum* is used to capture any additional information not identified during the Resource Family Assessment process or any significant changes that have occurred within the family while open as a resource home.
- Both the *Child's Behavioral Health Reference Letter* and *Adult Behavioral Health Reference Letter* questions were revised to make them more applicable for responses from behavioral health professionals.
- The *Adoption Addendum* underwent minor changes that included adding a review of any resource alerts on the home.

In previous reporting periods, overdue annual updates and reassessments were determined to be a barrier to reaching permanency goals, assessing child safety timely, and identifying needs for families. As a result, FC&A leadership developed a backlog plan to address this issue. This review process began in January 2019 with 273 overdue annual updates or reassessments. As of December 2020, the backlog was reduced to 110 overdue annual updates or reassessments. This process continues to decrease the number of overdue annual updates/reassessments each month, while ensuring that staff timely assesses child safety, addressing any needs for the child and family, and providing exceptional customer service to resource families. These activities are to increase placement stability, improve permanency for children, and decrease MIC.

FC&A is working with the National Resource Center for Youth Services (NRCYS) to develop an additional element of pre-service training focused on child problematic sexual behavior (PSB). In addition, FC&A programs and NRCYS identified various in-service trainings regarding PSB and are currently working on a plan to make the training available to all existing foster families. Educating existing and new resource parents about PSB will equip them with necessary tools and information to respond appropriately and ensure the safety of all children in the home. Information regarding PSB was already added into the in-person training for resource parents and NRCYS is working to get it added into online training. NRCYS also contracted with a nationally known PSB expert to record a webinar in October 2020; however, issues occurred

during recording so the webinar is scheduled to be re-recorded in February 2021. Once completed, the webinar will be available for viewing by resource parents. FC&A programs continues to explore PSB training options for CW staff, including through collaboration with the University of Oklahoma.

Resource Alerts

As detailed in previous reporting periods, 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. The resource alert increases communication between programs when concerns arise in a resource home 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.

Resources with a resource alert contact are compiled in the WebFOCUS YI042 Resource Homes with an Open Resource Alert Issue report for monitoring by Resource staff and CW staff with children placed in the home. The report is emailed monthly with the expectation that field managers, supervisors, and RFP agency staff use the report as a management tool to track open and resolved resource alerts.

As part of the ongoing evaluation of new processes and practice implementation, the following KIDS enhancements are in progress or completed.

- In August 2020, KIDS released an update that allows staff to select a second contact purpose type in addition to ongoing monitoring for resource alerts. Allowing only one picklist type affected ongoing monitoring documentation.
- In November 2020, resource alerts were added to the screen-out consultation staffing guide and also as a recommendation option regarding screened-out referrals.
- The inability to close a resource with an unresolved alert is problematic and needs to be corrected. Due to the COVID-19 pandemic and telework-related needs, this change is pending with an anticipated release date for February 2021. Presently, FC&A programs staff monitor the YI042 report for closed resources with an open alert and follow up with assigned staff to ensure the resource alert is resolved.
- Another needed enhancement is generation of an automated alert to newly assigned staff upon case transfer or placing a new child in the resource home. This enhancement was pending, but KIDS staff discovered in March 2020 that a new alert cannot be automatically generated. KIDS has continued to search for an alternative and believe a solution was found that is tentatively scheduled for the May 2021 release. The YI042 report has a Placements tab that outlines the child's assigned CW specialist and supervisor. This report can be viewed on a regular basis by CW staff to identify children on his or her caseload that are placed in a resource home with an open resource alert. FC&A programs staff began providing the YI042 report monthly to district directors in June 2020 with a request to review and provide to staff with children placed in the home. Additionally, the Resource Information Sheet populates when a child is placed in a resource home in KIDS and includes open or resolved resource alert information.
- Reviewing resource alerts will be added to the OOH investigation staffing guide, as well as having resource alert as an option for the OOH investigation 10-day staffing recommendations. This enhancement is scheduled for May 2021.
- Another enhancement, which is scheduled for release in August 2021, will allow for the use of resource alerts in congregate care settings.

FC&A programs developed a new tool to share information with staff called News to Use. This tool provides CW staff with new information as it becomes available on process or protocol updates. *News to Use - Resource Alerts* outlines other ways that resource alerts could be used, such as with children's behaviors or needs, health of a resource parent, or

identifying support for children with PSB. The document was sent to OKDHS staff on 9/25/2020 and RFP and TFC staff on 10/6/2020.

During this reporting period, FC&A programs developed a refresher training, ***Resource Alerts – Everything You Need to Know***, for supervisors and field managers regarding resource alert oversight and management to decrease risk to the child. The interactive, two-hour training was provided virtually to the five regions and was comprised of all FC&A field managers and supervisors, including supervisors and field administrators over Recruitment and the Adoption Transition Unit (ATU). The training was also provided to both RFP and TFC supervisors and directors. Following course completion, each supervisor was responsible for training their supervisory unit and completing a transfer of learning (TOL) activity with the unit. This new format for training was intended to not only provide accountability for supervisors, but also empower them to teach their staff new information and brainstorm with them how to better utilize resource alerts. Feedback from supervisors on the format was positive and many reported that they enjoyed the training as well as the opportunity to train their staff. The TOL information that supervisors completed with their staff was provided to FC&A program staff to review and identify any needs, ideas, or concerns that came up during the TOL. Overwhelmingly, the TOL indicated that staff are considering a multitude of ways to utilize resource alerts, especially changing the perspective from a resource alert being only a negative thing and to viewing it positively as a way to support the family and child in placement. It was particularly encouraging to see Recruitment and ATU staff identify ways in which they can utilize resource alerts since prior to training most reported they did not use alerts often. The TOL also required supervisors and their units make commitments to using resource alerts. Those responses largely included increased monthly communication with Permanency Planning (PP) staff, conducting joint visits with PP quarterly, and increasing the quality of transfer meetings specifically between Resource specialists, ATU, and on-call Recruitment staff.

During this reporting period, 106 alerts were opened. Of those, 44 were resolved and 62 remain open. An additional 60 alerts were closed that were open prior to July 2020 for a total of 104 alerts resolved during this reporting period. The usage of alerts represents improved, proactive, practice in addressing potential safety concerns and/or risk factors identified in a resource home. Common anecdotal risk factors requiring ongoing monitoring might include, but are not limited to, a history of substance abuse, increased family stress, individuals identified as unsafe with potential access to the child in OKDHS custody, 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 specialist, resource alerts also improve support for resource families. Increased communication and addressing the needs of a resource family provide a positive customer service experience and furthers efforts to retain resource families.

Training

To assist staff in evaluating and remediating concerns in a resource home, *Assessing Concerns in Resource Homes* training is a required for all new Resource and RFP staff and is available to any staff that requests the training or needs a refresher. 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 preparing and monitoring a WPC. The training has been cancelled since March 2020 due to the COVID-19 pandemic. FC&A program staff intends to transition the training to a virtual format during the second quarter of 2021. Although the training was not available, FC&A program staff provided consultation when requested on the levels of intervention when there are concerns in resource homes and ensured staff know they are available for assistance.

Records Check Training is a training developed in early 2020 for new and/or current CW specialists to assist in developing skills related to searching and documenting records in a quality manner. This training will eventually be a required Level 1 training for all Resource staff. Due to the COVID-19 pandemic, training was cancelled from March through August 2020. Between September 2020 and November 2020, six in-person trainings were safely held for OKDHS staff in a computer lab and three trainings were held virtually for RFP and TFC staff. FC&A program staff are in the process of scheduling more sessions of *Records Check Training* during February and March 2021.

A training developed in the previous reporting period, *Records Check Review and Approval Training*, is required for all lead specialists, supervisors, and field managers. This training, offered to Resource staff, RFP contractors, and TFC contractors, assists with crafting skills related to reviewing and coaching staff for quality records checks, and approval at the appropriate level. Eleven trainings were completed during the first half of 2020 and the next scheduled training will be in the first quarter of 2021. FC&A programs staff will provide this training on a bi-annual basis or as a need is identified.

FC&A Quality Assurance (QA)

As previously reported, effective April 2020, QA responsibilities for FC&A were transitioned to the Continuous Quality Improvement (CQI) Contract Performance Review (CPR) team. The CQI program is overseen by the CWS Programs deputy director and specifically the CQI program administrator. The CPR team consists of one supervisor and five PFRs, all with more than 15 years of CW experience. The majority of the CPR team has been part of the CQI program and conducting reviews in excess of 10 years. As part of the CQI program, they conducted TFC and supported home (RFP) reviews, which included not only ensuring adherence to the contract requirements, but also reviewing the quality of assessments. In addition, each team member has previous CW supervisory experience in the field and developed strong relationships with external partners to the extent that they are a trusted source of information for resource providers.

Throughout April, May, and June 2020, the CPR team worked closely with the FC&A program team to revise the QA review tool, develop a process for reviews, and create a dashboard in Qualtrics to capture data. The CPR team's overall approach to transitioning the QA process highlighted:

- streamlining the overall process and establishing a fixed number of resources to be reviewed on a quarterly basis;
- focusing the review on safety and quality of the assessment, with less focus on compliance;
- creating a tool for ease of use and the ability to enter the scored information into a Qualtrics survey to provide data; and
- establishing a feedback loop and process for field or RFP agency leadership to ensure all needed follow-up occurs.

The CPR team conducts reviews for newly approved traditional and kinship resources from each region on a quarterly basis, which allows frequent feedback. This process was streamlined to a single review type that provides a look at current, overall FC&A field practices for newly approved traditional and kinship resource homes. This QA review process is expected to be a transparent partnering between programs and the field that enriches CW Resource staff growth and development across the state and furthers continuous quality improvement efforts.

Each of the five PFRs of the CPR team is assigned to a CWS region within the state and is responsible for completing the quarterly review of the region's cases. The sample of resource reviews is comprised of nine cases per region for a total of 45 statewide reviews each quarter. Initially, the decision was made to review four traditional resources and five kinship resources for the first sample. However, after further discussion, the process was revised to review three traditional resources and six kinship resources in all subsequent samples to more accurately represent the number of monthly approvals and the current foster home population. The CPR team made this change in the last quarter's reviews that began 10/1/2020. The CPR team also conducts quarterly reviews of newly approved supported resources. Currently, there are 15 RFP agencies and the sample will be comprised of 20 resource homes newly certified in the prior quarter. These reviews will include all agencies.

Following completion of the quarterly reviews, the CPR programs supervisor and team conduct an internal review debriefing. The team debriefing helps to ensure consistency and collaborative development of the statewide report on all findings at the end of each review cycle. Quarterly, statewide QA review results will be used for comparison to inform the MIC Dashboard YI832 data as to current practice trends in foster care resource home assessments. This analysis will provide rich, impactful information for sharing as part of the feedback loop in discussions with FC&A programs and regional FC&A field managers. This information can also be utilized as a basis for coaching sessions between field managers, Resource supervisors, and field staff to improve overall practice and promote a greater understanding of how assessment informs the critical thinking process and enhances the ability to keep children safe in out-of-home care.

Case specific findings can also be provided by the assigned CPR team member to the regional FC&A field manager and RFP supervisors, liaisons, and agency directors to ensure awareness of all known strengths and deficiencies within the individual resource files selected for the quarterly review. The review of the first samples assigned to the CPR team began on 8/1/2020 and were completed by 9/30/2020. This sample included resources approved in the months of April, May, and June 2020.

In September 2020, the CPR QA team was invited by the FC&A field deputy director to attend the FC&A field leadership meeting. The meeting's purpose was to introduce the full team to the CW field managers. The meeting also included further discussion on the feedback loop, follow-up, and mechanics of the quarterly reviews. CPR QA review leaders reached out to their respective CW field managers and held individual meetings via Microsoft Teams to further discuss the flow of information. Follow-up on cases requiring additional or missing information will provide the CW field managers the opportunity for additional training and to instill critical thinking with their staff.

Upon completion of a regional debriefing, the reviewer was charged with making any known corrections to the tool and then sending it as an email attachment to the corresponding field manager. The attachment is then converted into a PDF document by the reviewer and uploaded in the Resource KIDS File Cabinet. A spreadsheet is completed indicating if a resource requires a follow-up and the 30-calendar day due date, then the spreadsheet is submitted to the deputy director.

During the final two weeks of September 2020, it was determined that the Qualtrics tool needed some minor revisions. The April, May, and June 2020 review quarter was captured in a systemic document until the dashboard is fully functional. The first round of QA reviews identified the largest systemic issues as staff not searching all known names when completing the Records Check Documentation Form, missing references, and timeliness of resolving resource exceptions. To address these issues, FC&A program staff will continue to offer the Records Check Training for staff, develop a tool that outlines information for quality references, as well as reference requirements per policy, and resource exceptions are now tracked in KIDS as of the November 2020 update, which should aid in timely resolution. FC&A program staff will evaluate these areas in the upcoming months to see if there is improvement or if further staff guidance and/or training may be needed.

In October 2020, the CPR team began the second round of QA reviews for FFY 2021, Quarter 1 that encompassed reviewing resource homes newly certified between 7/1/2020 and 9/30/2020. Forty-five homes were selected across all five regions from the FC&A resource homes with six kinship resources and three traditional resources per region. Twenty resource homes were selected from the supported home agencies. All but two debriefings were held with the respective region or agency by 12/31/2020. The final two debriefings were held during the first week of January 2021. All 65 resource tools were entered in Qualtrics and information from the survey and corresponding dashboard will be gathered in January 2021.

MIC Expanded Strategies

For the fourth reporting period, there was an absence of MIC for more than 99 percent of children served. The rate of absence of MIC improved from 98.73 percent at baseline to 99.14 percent. A slight increase of 0.05 percent in the MIC rate occurred when compared to the previous reporting period. Undoubtedly, the COVID-19 pandemic's impact and restrictions to in-person visits are reflected in this reporting period's data. Additionally, foster parents experienced an increased amount of stress that may have affected the MIC rates due to children and youth being at home during the day instead of at school, potential job loss, and the possible lack of additional support from family support systems due to social distancing. In response, CWS continued frequent contact with families, discussed schooling plans, provided additional funding for a second time in December 2020 and encouraged families to utilize Kith Care as a way to provide some relief. Efforts to prevent and reduce MIC incidents for children and youth placed in foster homes continue to be vigilant for all CWS program areas. Although the COVID-19 pandemic continues to impact families, the MIC team is hopeful that with a return to in-person visits by staff and the identification of additional resources to support families, the impact on MIC rates will lessen.

Activities identified in the MIC expanded strategies are returning to regular participation, as regional staff identified and implemented methods for virtual case analysis and TOL. The MIC leadership team continues bi-monthly meetings focused on measures to address the known top contributing factors to MIC. Collaboration among programs remains a strength, with both PP programs and FC&A programs staff taking an active role in the MIC expanded strategies. An additional MIC programs staff member was added in November 2020 resulting in two PFR's now dedicated to MIC in foster care settings. This position will support completion of MIC reviews, TOL engagement, availability to conduct regular and ongoing data analysis, and implementation of MIC expanded strategies.

MIC Case Review Updates

MIC program staff continue to review all substantiated MIC incidents in a family-like setting, as well as eight randomly selected unsubstantiated MIC cases assigned by the Co-Neutrals. These reviews are sent to the district directors and field manager for review and TOL with staff. MIC program staff identify TOL opportunities in the review's practice notes for the district director/field manager to utilize when reviewing with staff. With the addition of another MIC PFR position, significant progress was made to bring backlogged reviews current. All substantiated reviews for the reporting period were completed, and unsubstantiated reviews are nearing completion. Analysis will be conducted and a report completed by the end of February. Revisions were made to the PFR MIC review tool in September 2020. The updated tool, **MIC Review Tool**, captures information related to resource alerts. The added resource alert section tracks if the home under review had any alerts opened, staff was aware of the alert, and the alert was being monitored.

The district director and field manager reviews continued but were changed from two substantiated reviews to one substantiated review per month. In the event of no substantiated MIC cases to review in the district, the district director and field manager are to complete one unsubstantiated case review. The number of reviews completed by district directors should be more than the number of substantiated referrals each quarter. This change was made so that district directors can gather information from their districts about not only MIC risk, but also when confirmed MIC occurs. Momentum for the district director and field manager reviews declined towards the end of the reporting period. However, the number of district director reviews began to increase in the last quarter of the calendar year. The number of completed reviews per calendar year quarter are as follows:

- Quarter 1: January – March, 45 district director reviews completed
- Quarter 2: April – June, 51 district director reviews completed
- Quarter 3: July – September, 11 district director reviews completed
- Quarter 4: October – December, 23 district director reviews completed

MIC Case Analysis Updates

Due to the COVID-19 pandemic in March 2020, the MIC case analysis activities were paused to give staff time to adjust to remote work and develop a plan for transitioning the case analysis process to a virtual format. In June 2020, discussions were held with the regional MIC leads about resuming the case analysis process and how to move it to a virtual platform. Case analysis' primary goal is for each region to identify an MIC case from their region, conduct a group analysis, and select at least three TOL opportunities related to MIC prevention to share with staff. Case analysis is part of the regional plans. Each region was asked to develop their own protocol for conducting the analysis and disseminating the TOL in a manner that works best for them, given the variety of metro or rural settings across the regions, and differently structured staff meetings. Regional MIC leads report it has been difficult to maintain routine case analysis during the COVID-19 pandemic. Shifting to a home-based work routine, adjusting to new software and laptops, and managing connection and virtual private network (VPN) issues created setbacks in routinely conducting the case analysis process in some regions.

At the time of this report, each region was able to conduct a case analysis prior to the end of the year with the exception of Region 2. Region 2 prepared the case analysis, and has a plan in place for the group analysis to occur in a virtual setting at the county level, with TOL to occur at face-to-face unit meetings. The time frame for completion is by the end of February 2021. The region established a leadership team comprised of district directors, field managers, and the field analyst that assumes direct responsibility for developing the case analysis, disseminating it to each county, and ensuring

TOL completion for each unit. The team meets regularly via Microsoft Teams to carry out these activities. Those regions that conducted case analysis via a virtual format reported the process went well. Regional leads were encouraged to request verification from district directors when TOL was completed to ensure staff are receiving the information. Further discussion and follow-up regarding these activities will occur at the next MIC leadership meeting in February 2021.

RFP agencies made the transition to conducting virtual case analysis as well. The deadline to complete case analysis for RFP agencies was October. Some agencies experienced delays due to COVID-19 issues within the agency, but all were able to be completed. The next case analysis for RFP agencies is due in March 2021.

MIC Action Plans

Data from MIC program reviews and district director reviews was consistent across reporting periods in identifying quality worker visits as the number one contributing factor to MIC. During this period, the struggles in this area were likely compounded by the COVID-19 pandemic. While a more exact understanding of COVID-19's impact on this area will become more apparent through the data analysis set to occur in February 2021, completed reviews during the period indicate the virtual visit format resulted in staff challenges of ensuring children were seen privately, observing interactions between children and their caregivers, and completing unannounced visits. Completion of unannounced visits were impacted further by unexpected changes to resource parent schedules in the areas of child care, school, and family time occurring throughout the pandemic. Despite the struggles, expanded strategies were developed to further understand trends and implement TOL opportunities around the safety assessment during specialist visits. PP and MIC programs are collaborating to provide targeted TOL to districts within each region regarding MIC and quality worker visits. Initial districts were selected and an agenda for TOL was developed. MIC TOL takes place in conjunction with the permanency safety consultation (PSC) process, as the PSC process is an opportunity to engage all supervisors in the district about quality specialist contacts.

To further enhance the quality of specialist contacts, an expanded strategy was added to engage supervisors in participating in hands-on reviews of specialist visits. A statewide tool, titled the *Quality Specialist Visit Review*, was developed and approved for supervisors to conduct reviews of specialist visits. A guide is in development to provide supervisors parameters for answering the questions. The tool with guidance will be set up in Qualtrics so that supervisors, district director, and MIC staff have access to real time data on the quality of visits. The review is expected to be implemented by the end of the next reporting period. Information gathered during the Quality Specialist Visit Reviews will be discussed with the staff member during intentional case staffings, and data collected via the Qualtrics platform can be utilized to identify trends, areas of practice strength, and opportunities to improve safety assessment.

Conclusion

MIC rates have held steady at greater than 99 percent over the last four reporting periods, which indicates a stable baseline with the efforts that are currently in place. With data gathered from the various MIC reviews remaining consistent, the MIC team is focusing on addressing the repeated top contributing factor to MIC to further reduce MIC incidences. Targeted efforts to engage staff at all levels in reviewing specialist visits and enhancing knowledge about the safety assessment process during specialist visits are being developed and implemented. With implementation of the supervisor's Quality Specialist Visit Review, further discussions about specialist visits and safety assessments will occur, and additional data regarding this top contributing factor will be gathered. Collaboration across programs has continued. The MIC team was able to collaborate with Resource programs regarding heightened monitoring of resource alerts within the MIC review, and share examples of when a resource alert should have been used for the Resource team to provide TOL to staff. Collaboration between MIC programs and PP programs also occurred to implement targeted TOL regarding MIC and quality specialist contacts. At the beginning of the new calendar year, the MIC team will be transferred to the CQI program, offering additional opportunity to enhance engagement of staff in TOL.

Furthermore, with the MIC team's inclusion in the CQI program, planning began on establishing a feedback loop to regional field staff of combined findings and data from the Child and Family Services Review (CFSR) case reviews and other regularly occurring program reviews, including MIC, PSCs, and FC&A reviews, to positively impact overall practice improvement and

influence future training and policy. Presentation of the initial combined data set to regional CQI teams as part of the feedback loop process should occur in May 2021.

CONGREGATE CARE

Ongoing efforts are occurring in all core strategy activities to address MIC in higher levels of care. Current semi-annual data indicates a decrease of 11 MIC victims in congregate care when compared to data from the last report. This decrease indicates the efforts from OKDHS and providers to ensure safe congregate care setting for youth continues to be successful. Nine of the 24 MIC victims were in programs OKDHS does not hold the funding contract for, i.e. psychiatric hospitals, Office of Juvenile Affairs (OJA) placements, and shelter care. OKDHS continues to offer support to residential treatment care (RTC) providers as well as shelter providers when they are identified as a program that could benefit from heightened monitoring (HM) support. Support is also given outside of the HM process by implementing Facility Service Plans (FSPs) and Safety Plans, which are monitored by the Specialized Placements and Partnerships Unit (SPPU) liaisons. OKDHS does not provide HM or liaison support to OJA detention providers. All OJA congregate care providers, including shelters, are able to participate in the trainings offered by NRCYS to support trauma-informed care training opportunities across the state. SPPU continues to work with the OKDHS tribal liaison to ensure the NRCYS trainings are offered to tribal group care providers.

The three primary efforts designed to decrease MIC in congregate care settings are heightened monitoring of facilities with the highest number of MIC incidents; policy, practice and technical enhancements; and contract enhancements. These efforts will continue with ongoing commitment to seek the best ways to support safe care for youth determined to need a treatment placement above foster care.

Heightened Monitoring

The specific activities and detailed processes on the selection of facilities in need of HM were based on the 18th and 19th data sets that were summarized in previous semi-annual reports. This reporting period includes HM activities based on the 20th and 21st data sets. Of the two group homes identified in the 18th data set and the one group home identified in the 19th data set, one subsequent MIC incident took place during the 20th data set. SPPU continued to diligently work with this group home. The data collected at the time this report was written indicated no further MIC incidents occurred at this program in the next two data sets. This data indicates the HM support process was successful for this reporting period. The RTC provider identified in the previous data sets successfully completed the HM process as of this report.

Children with Substantiations of Abuse or Neglect while in Out-of-Home Care OCA Heightened Monitoring Facilities (HMF)									
Heightened 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	Group Home / Shelter 7	
18th Data Period	Oct-2019					1			1
	Nov-2019								0
	Dec-2019				1				1
19th Data Period	Jan-2020								0
	Feb-2020								0
	Mar-2020					1			1
20th Data Period	Apr-2020					1			1
	May-2020						1		1
	Jun-2020							1	1
21st Data Period	Jul-2020								0
	Aug-2020								0
	Sep-2020								0
TOTAL		0	0	0	1	3	1	1	6
<i>Data Source: KIDS Data Measure 1.1 MIC; Run Date: 12/1/20 -Numbers indicate children with substantiations while in DHS custody and placed at Facility. Substantiations for children in DHS custody only.</i>									
17th Period Data ID'd as HMF		18th Period Data ID'd as HMF			19th Period Data ID'd as HMF			20th 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	Acute/ RTC 1	Total
18th Data Period	Oct-2019		0
	Nov-2019		0
	Dec-2019		0
19th Data Period	Jan-2020	1	1
	Feb-2020		0
	Mar-2020		0
20th Data Period	Apr-2020		0
	May-2020		0
	Jun-2020		0
21st Data Period	Jul-2020		0
	Aug-2020		0
	Sep-2020		0
TOTAL		1	1
<i>Data Source: KIDS Data Measure 1.1 MIC; Run Date: 5/31/20 -Numbers indicate children with substantiations while in DHS custody and placed at Facility. Substantiations for children in DHS custody only.</i>			
17th Period Data ID'd as HMF	18th Period Data ID'd as HMF	19th Period Data ID'd as HMF	20th 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.

20th MIC Data Set: April through June 2020

A quarterly heightened monitoring team (HMT) meeting was held 7/13/2020 to identify facilities in need of enhanced HM support based on data from April through June 2020. Monthly HMT updates via phone calls occurred 8/5/2020, 9/2/2020, and 10/7/2020. During monthly calls, action/support plans were reviewed and updates were suggested based on information from on-site/virtual visits, monthly report data, OCA feedback, Licensing, and CPR feedback.

The 20th data set was received July 2020. This data review identified three resources in need of HM at the group home and shelter level of care. The first resource identified was participating in HM from two previous quarters and the efforts continued. As of this report, the HMT found substantial improvement in this resource. The resource continued ongoing work with Mr. Lloyd Bullard around building strong supervisors, as well as restraint reduction. Mr. Bullard has over 30 years of experience working in the human services field. He is considered a national expert in Restraint and Seclusion Reduction. Mr. Bullard previously worked for the Child Welfare League of America and is currently a consultant for the Building Bridges Initiative. The resource also experienced a complete change in leadership and staff, which had a significant impact on the improvements the HMT observed. Current data indicates this resource will not be identified as in need of HM support in the next two data sets. SPPU is pleased with the progress and results from this program to reduce MIC and as of this report; they have successfully completed the HM process.

The HMT met with the second identified resource in July 2020. The HMT continued to engage in virtual meetings with this resource to determine what support would be most beneficial. Due to the COVID-19 pandemic restrictions, a full program assessment was not completed for this program. The HMT completed policy and procedure reviews as well as training reviews. Staff and youth surveys were also completed. The HMT developed a support plan and continues to support the program. The HMT held a virtual meeting with the third identified provider in July 2020 and a program assessment was completed in August 2020. A support plan for this program was implemented. In August 2020 an additional program was placed on HM. This HM was not a result of MIC, but rather a request from leadership due to past referrals, age of youth in care, their length of stay, as well as the number of physical interventions for these young youth. The HMT completed a program assessment for this resource and they are working with Mr. Bullard. HMT observed improvement in this program. No RTC providers were identified as being in need of HM support during the 20th data set.

21st MIC Data Set: July through September 2020

A quarterly HMT meeting was held on 10/12/2020 to identify facilities in need of enhanced HM support based on data from July through September 2020. Monthly HMT conference calls were held 11/4/2020, 12/2/2020, and 1/6/2021. During monthly calls, action/support plans were reviewed and updates were suggested based on information from on-site/virtual visits, monthly report data, OCA feedback, Licensing, and CPR feedback.

The 21st data set was received October 2020. This data set identified two resources in need of HM support at the group home and shelter level of care. One of these resources previously participated in the HM process; thus, a full program assessment was not completed. The HMT completed staff and youth surveys with this program and is in the process of setting up a focus group for the program. The second identified program has never participated in HM support. Due to setbacks related to the COVID-19 pandemic, a full program assessment will not take place until January 2021; however, the HMT completed staff and youth surveys for this program. The HMT identified a focus of restraint reduction and collaborative culture as areas of focus for both programs. Both programs are also engaged with Mr. Bullard and have weekly sessions with him. Mr. Bullard will work alongside the HMT to reduce the risk of MIC at both programs.

The 21st data set identified one resource at the RTC level of care. SPPU reached out to this provider via email and telephone with no response from the provider. SPPU reached out to the Oklahoma Health Care Authority (OHCA) to discuss any concerns they may have for this provider and to advise them of the lack of response from the provider related to HM support.

HM Process Changes

During this reporting period, SPPU began to implement some of the process changes providers recommended in March 2020. SPPU developed new name ideas for the HM process and surveyed providers and SPPU staff on the name they felt would help provide a positive experience. The HM process will now be referred to as the Support and Development Team (SDT). The SDT began requesting feedback from providers on areas they feel are their program strengths as well as areas they feel need additional support. The SDT began the process of identifying key focus areas early in the support and development (SD) process. The SDT utilizes provider feedback, survey results, MIC information, and on-site observations to determine the early focus areas. This provides the SDT the opportunity to begin some initial work prior to completing the full program assessment. NRCYS removed the recommendations section from the final assessment sent to providers. NRCYS still sends the assessment's recommendations section to SPPU. This change allows providers opportunity to review the assessment and develop their own support steps. SPPU also shifted the focus during the SDT process to concentrate on what led to the MIC and supporting programs around this area. When other areas are identified which are not directly related to MIC, the SDT provides consultation and feedback to the provider and the provider's SPPU team; however, these areas do not become a focus of the SDT process. This will help providers move quickly through the SDT process and allow SPPU to focus on supporting more providers.

Mr. Bullard provided and continues to offer consultation to several providers participating in SDT. Consultation is around building strong supervisors, shifting the program culture to one of collaboration and reducing the use of restraint. SPPU and providers found his expertise in these areas impacted change in programs. However, each program's leadership and how they engage their staff and youth in putting these new skills into practice are a vital component of change. The consultation from Mr. Bullard came about as a result of program assessments or in-depth conversations with programs to identify the support most effective for their program. SPPU plans to continue to gather all information to determine the most effective support path and to utilize Mr. Bullard where support is needed.

Policy, Practice, and Technical Enhancements.

All activities to support utilization of the Assessing Safety in Residential Settings Contract Guide continue. The guide is provided to the youth's assigned CW specialist when a group home referral is made and is addressed in the MIC Modules 1 and 2 online trainings. SPPU continues its use of the FSP. All liaison roles were successfully shifted and the support and safety liaisons are in place performing their new roles. Support liaisons continue to be a big part of transition work at their assigned programs. The safety liaisons continued using Corrective Action Plans (CAPs) and Facility Action Step (FAS) when areas for concern are identified. The safety liaisons also complete the quarterly FSP with their assigned programs.

These new roles are offering more open communication between providers and SPPU. SPPU continues working with KIDS to add a resource alert to congregate care resources; however, many technical barriers may result in SPPU developing a different alert process.

SPPU assigned an SDT liaison to work under the new program supervisor in supporting SDT duties. This liaison is instrumental in collecting and reviewing data for trends in all programs participating in the SDT process.

Contract Enhancements

Supports Provided through NRCYS Contract

- Systematic Training to Assist in the Recovery from Trauma (START) Direct – six sessions – 7/14, 7/16, 7/21, 7/23, 7/28, and 7/30
- START Trainer Development – 8/5
- Managing Aggressive Behavior (MAB) Direct – two sessions – 8/19 and 8/20
- Group Home Administrators Meeting – 8/21
- MAB Direct – 8/31 and 9/1
- A Playground for All – 9/1
- MAB Direct – 9/5 and 9/6
- Suicide Awareness Prevention – four sessions – 9/9, 10/14, 11/11, 12/9
- Understanding the Crisis Wave – 9/9
- MAB Trainer Certification – 9/17-10/1
- Supporting Healthy Development – 9/15
- Creating Space for Change: A Motivational Interviewing Workshop – six sessions – 9/28, 9/30, 10/5, 10/7, 10/12, and 10/14
- START Direct – six sessions – 10/5, 10/7, 10/12, 10/14, 10/19 and 10/21
- Resources, Opportunities and Relationships: Supports for Youth Mental Health Needs – 10/8
- The Lens We Work Through: Identities, Barriers and Privilege – six sessions – 10/6, 10/8, 10/13, 10/15, 10/20, and 10/22
- Building Multicultural Spaces – four sessions - 10/12, 10/19, 10/26, and 11/2
- Don't Panic! They're Our Kids! Children with Problematic Sexual Behavior – 10/13
- The Adolescent Brain – two sessions – 10/27 and 10/29
- Group Home Administrator Meeting – 11/5
- Normalcy for Children and Youth in Foster Care – 11/12
- Teaching Calm Through Play – 11/20
- MAB Trainer Certification Course – 12/1-12/9
- START Training of Trainers (TOT) – 12/16-12/18

Conclusion

Efforts targeted at MIC reduction in congregate care settings began in August 2015 and encompassed significant changes in multiple work areas. Specific initiative activities included policy and protocol modifications, standardized tool development and implementation, KIDS technical enhancements, improved community partner collaboration, creation of an intensive intervention and remediation process for problematic providers, and contract modifications related to reduction of restraint, trauma-informed service provision, and overall provider accountability. The COVID-19 pandemic impacted some of these processes; however, current data indicates the adjustments made by SPPU and the providers allowed these efforts to continue positively impacting MIC reduction in congregate care. SPPU is committed to continuing this collaboration with providers and community supports to consistently reduce MIC in congregate care.

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 Human Services (OKDHS) 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 Adoption and Foster Care Analysis Reporting System (AFCARS) 20A & 20B files combined with a non-submitted annual National Child Abuse and Neglect Data System (NCANDS) file, covering AFCARS 20A & 20B 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. 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 10/1/2019 through 9/30/2020.

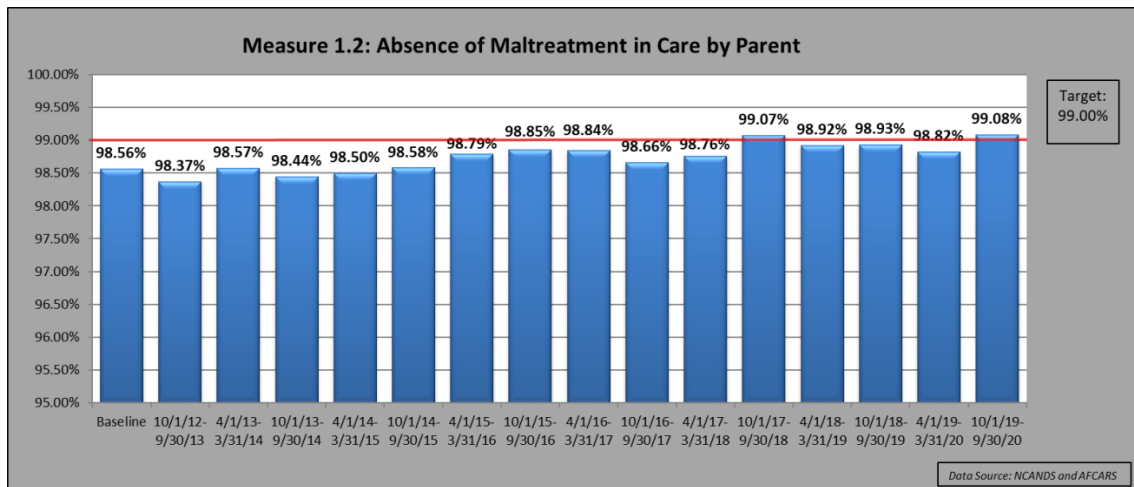
Numerator: The number of children served in foster care from 10/1/2019 through 9/30/2020 that did not have any substantiated or indicated allegations of maltreatment by a parent during that period.

Trends

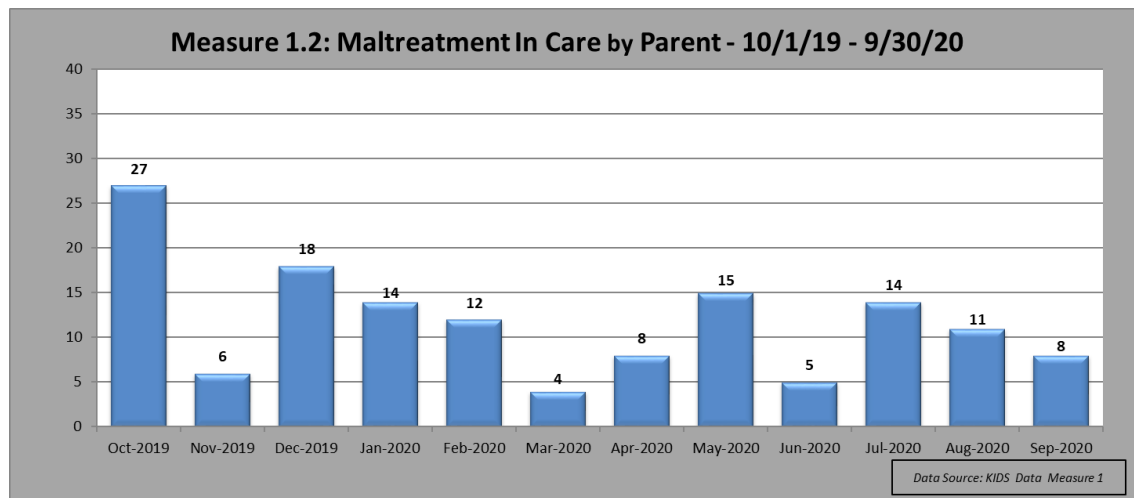
Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2010 – 9/30/2011	All children served from 10/1/2010 - 9/30/2011	12,352	12,533	98.56%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013	14,800	15,045	98.37%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 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%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019	12,942	13,082	98.93%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020	12,510	12,659	98.82%
10/2/2019 – 9/30/2020	All children served from 10/1/2019 - 9/30/2020	12,155	12,268	99.08%
Target				99.00%

Section 2, Table 1.2-1



Section 2, Graph 1.2-1



Section 2, Graph 1.2-2

Data 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. This reporting period had an increase by 0.26 percent making the overall outcome 99.08 percent. Child Welfare Services (CWS) exceeded the target by .08 percent. This is the highest overall performance in this measure since Pinnacle Plan reporting began.

In the most recent reporting period, 99.08 percent of children in out-of-home (OOH) care were not abused or neglected by a parent. Of the 12,268 served in care during the reporting period, 113 had a substantiation of abuse by a parent.

For the reporting period 10/1/2019 through 9/30/2020, a total of 142 MIC substantiations while in OOH care by a parent were reported in the monthly MIC Pinnacle Plan Measure. The 142 victims were included in 76 separate referrals. In the monthly reporting for the same time period, 50 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 142 victims in OOH care maltreated by a parent:

- 64 children were in Trial Reunification (45.1%);
- 39 children were in a Kinship Foster Care – Relative Home (27.5%);
- 13 children were in a child welfare (CW) Foster Family Home (9.2%);
- 12 children were in a Kinship Foster Care Non-Relative Home (8.4%);
- 8 children were in a CW Foster – Supported Home (5.6%);
- 4 children were placed in a Psychiatric Residential Treatment Center (2.8%); and
- 2 children were in a Therapeutic Foster Care Home (1.4%).

Reporting Period Progress

Children Maltreated in 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 it occurred is important. Victims with a substantiation of abuse or neglect that happened 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 Oklahoma Human Services (OKDHS) custody reports the abuse. For this measure, if a child in OKDHS custody reported abuse that occurred in his or her parents' home prior to custody, and that abuse was substantiated, then the child is currently counted in the MIC 1.2 numbers, even though the abuse and/or neglect did not occur while the child was in OKDHS custody.

Measure 1.2a - Children Maltreated by Parent While in Out-Of-Home (OOH) Care - Excluding Prior Abuse														
Report Month	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	TOTAL	% SAFE
# in OOH	8685	8605	8496	8409	8418	8376	8322	8402	8443	8398	8406	8341	12268	
# Safe in OOH	8685	8601	8480	8401	8410	8373	8314	8398	8440	8387	8398	8339	12193	99.39%
# Maltreated in OOH	0	4	16	8	8	3	8	4	3	11	8	2	75	
<i># in OOH care is from the Annual File built from the MAR 2020 and SEP 2020 AFCARS files</i>														
<i># Maltreated in OOH is from the FFY 2020 NCANDS File</i>														
<i>Report Run on: December 7, 2020 at 10:24 am</i>														

Section 2, Table 1.2-2

MIC 1.2 Excluding Prior Abuse by Placement Type		
Placement Type	# Children	% Children
CW FOSTER FAMILY CARE	5	6.7%
CW FOSTER FAMILY CARE - SUPPORTED HOME	6	8.0%
KINSHIP/RELATIVE/CW FOST. FAM. CARE	14	18.7%
KINSHIP/NON RELATIVE/CW FOST. FAM. CARE	4	5.3%
TRIAL REUNIFICATION	46	61.3%
TOTAL	75	100.0%
<i>Data Source: # in OOH care is from the Annual File built from the MAR 2020 and SEPT 2020 AFCARS files. # Maltreated is from the FFY 2020 NCANDS File; Run Date: 7/7/2020</i>		

Section 2, Table 1.2-3

Based on the monthly reporting that ended 9/30/2020, 50 of these victims would be excluded because the alleged abuse/neglect occurred prior to the child coming into OOH care. Twelve of the 50 victims are already excluded in the NCANDS report as they are not included in the AFCARS population, leaving 38 additional victims that could be excluded due to reported abuse that 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 75 victims, from the originally reported 142 victims, out of a served population of 12,268. This calculates out to a rate of 99.39 percent safe. Of the 75 victims abused in OOH care by a parent, 46 victims or 61.3 percent were placed in trial reunification at the time of the MIC. This calculates to a rate of 99.39 percent safe, which is above the federal standard, and above the 99.00 percent target for this measure.

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 1/1/2020 through 12/31/2020.

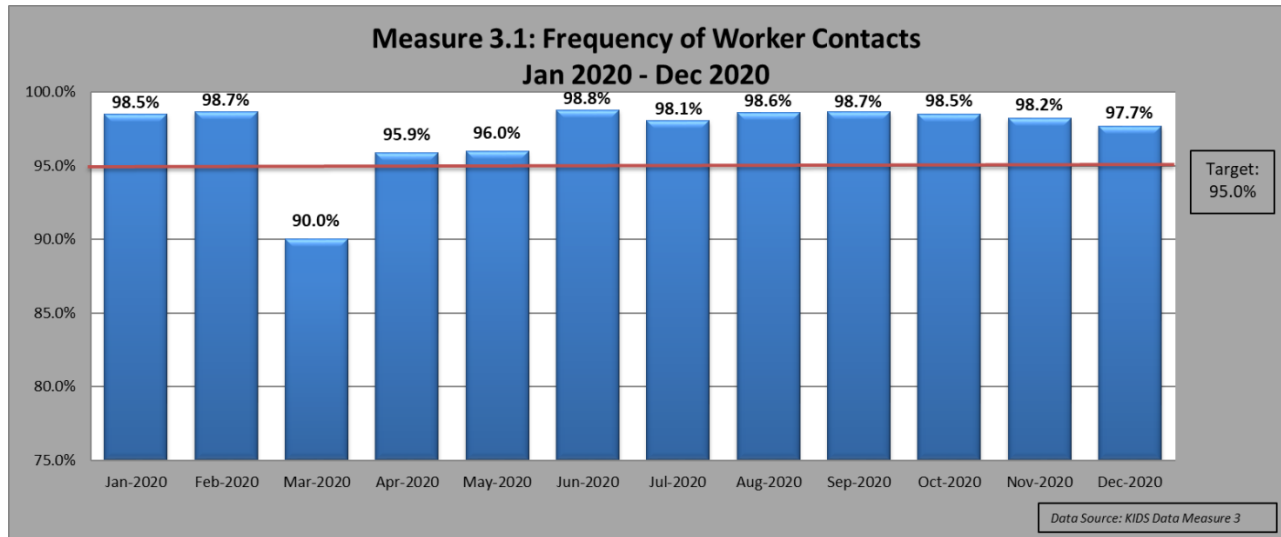
Numerator: The number of qualifying required monthly contacts made.

Trends

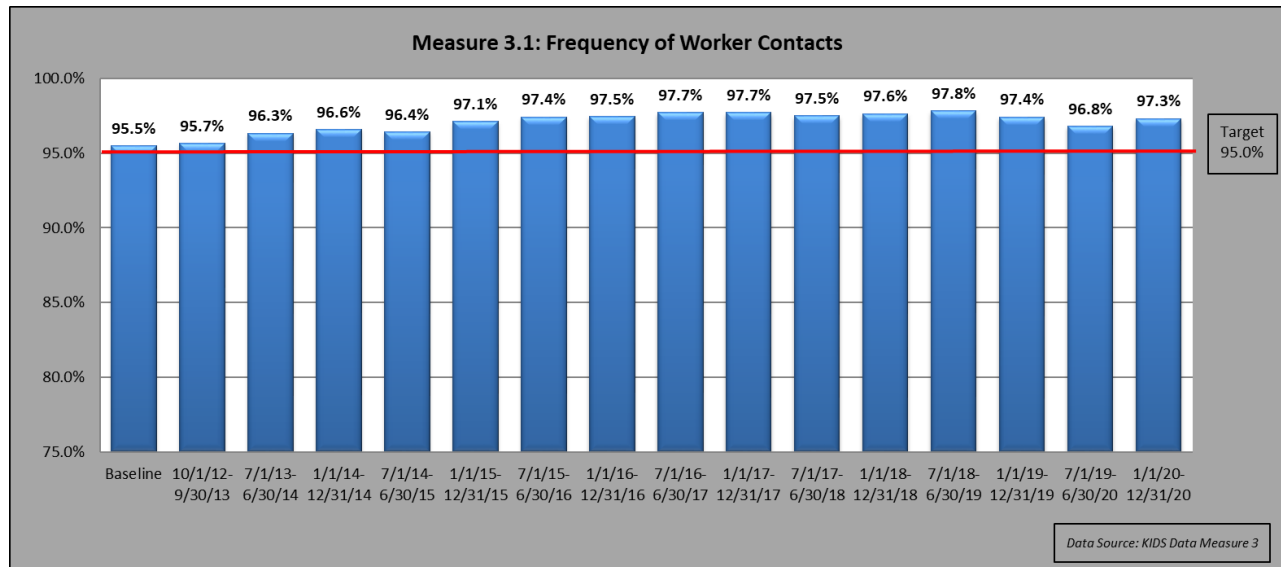
Reporting Period	Population	Numerator	Denominator	Result
Baseline: 7/1/2011 – 6/30/2012	All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012	90,355	94,639	95.5%
10/1/2012 – 9/30/2013	All children due a visit who were in care at least a full calendar month 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%
1/1/2019 – 12/31/2019	All children due a visit who were in care at least a full calendar month from 1/1/2019 – 12/31/2019	88,628	90,979	97.4%
7/1/2019 – 6/30/2020	All children due a visit who were in care at least a full calendar month from 7/1/2019 – 6/30/2020	87,210	90,082	96.8%
1/1/2020 – 12/31/2020	All children due a visit who were in care at least a full calendar month from 1/1/2020 – 12/31/2020	86,759	89,164	97.3%
Target				95.0%

Section 2, Table 3.1-1



Section 2, Graph 3.1-1



Section 2, Graph 3.1-2

Data Commentary

The baseline for this measure is 95.5 percent and the target is to sustain 95.0 percent. Over the 12-month period of 1/1/2020 through 12/31/2020, 89,164 monthly contacts were required and 86,759 monthly contacts were completed resulting in a compliance rate of 97.3 percent. Overall 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 1/1/2020 through 12/31/2020.

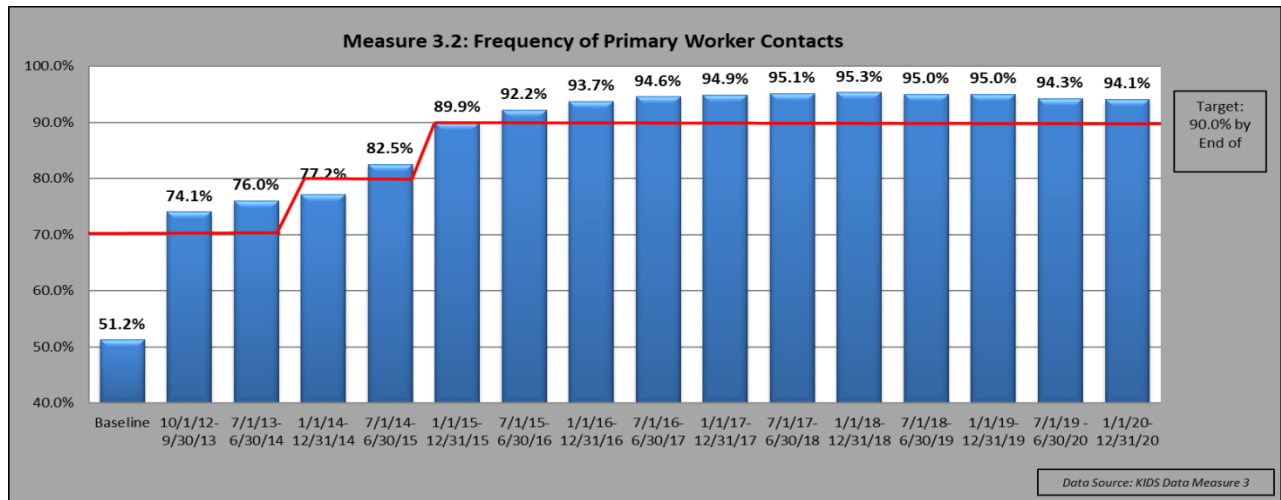
Numerator: The number of qualifying monthly visits made by a primary worker.

Trends

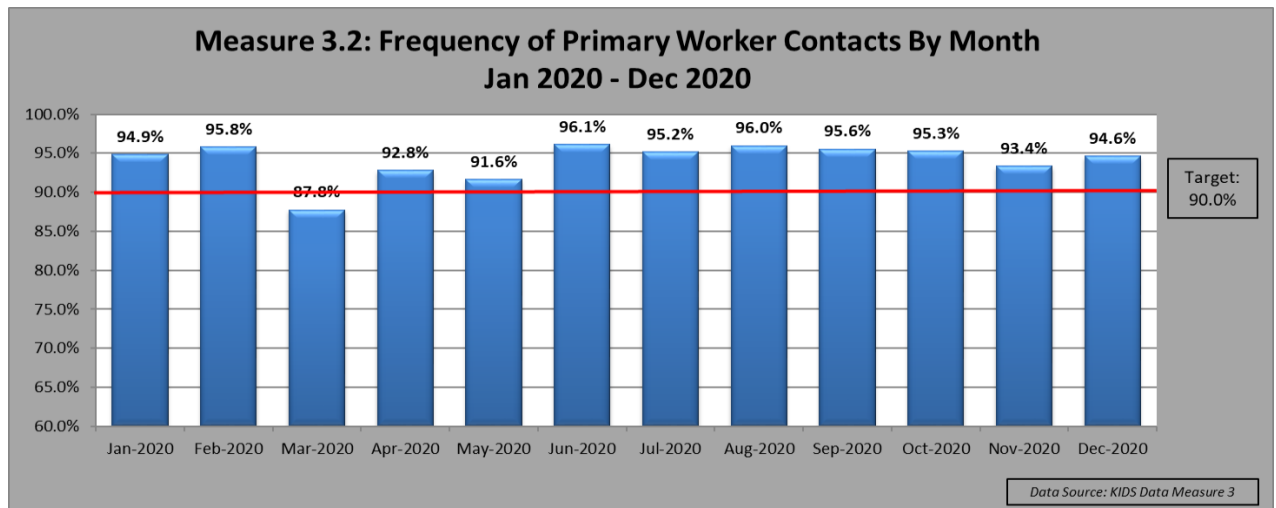
Reporting Period	Population	Numerator	Denominator	Result
Baseline: 7/1/2011 – 6/30/2012	All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012	48,497	94,639	51.2%
10/1/2012 – 9/30/2013	All children due a visit who were in care at least a full calendar month 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%
1/1/2019 – 12/31/2019	All children due a visit who were in care at least a full calendar month from 1/1/2019 – 12/31/2019	83,617	87,998	95.0%
7/1/2019 – 6/30/2020	All children due a visit who were in care at least a full calendar month from 7/1/2019 – 6/30/2020	82,348	87,352	94.3%
1/1/2020 – 12/31/2020	All children due a visit who were in care at least a full calendar month from 1/1/2020 – 12/31/2020	81,497	86,628	94.1%
Target				90.0%

Section 2, Table 3.2-1



Section 2, Graph 3.2-1



Section 2, Graph 3.2-2

Data Commentary

The baseline for this measure is 51.2 percent and the target is 90.0 percent. Over the 12-month period of 1/1/2020 through 12/31/2020, 86,628 primary monthly contacts were required and 81,497 of those monthly contacts were made by the primary worker for a compliance rate of 94.1 percent. Performance in this area continues to be above the baseline and 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 Oklahoma Human Services (OKDHS) 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 OKDHS 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 7/1/2020 through 12/31/2020.

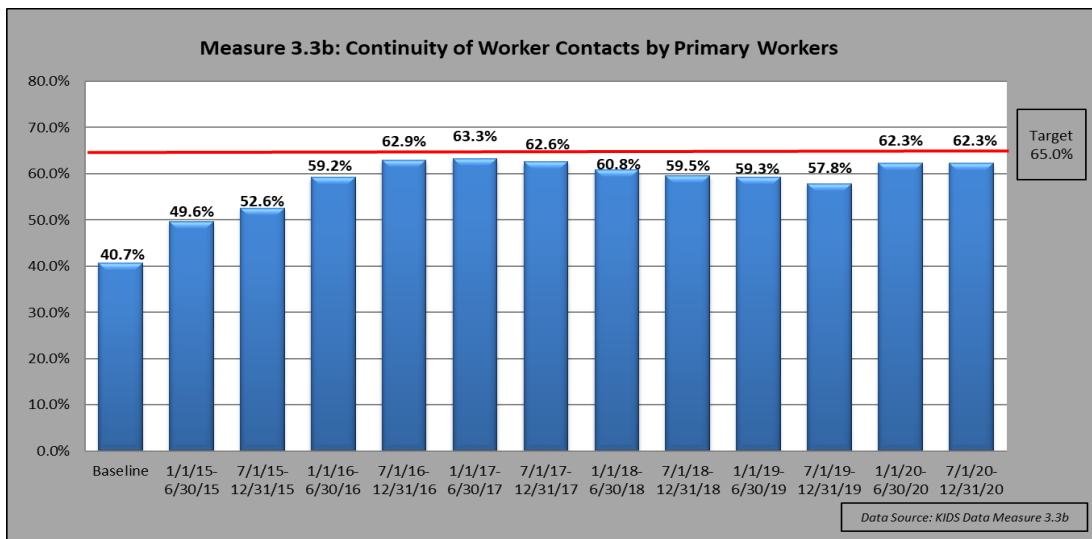
Numerator: Number of children who were seen for six consecutive months by the same primary caseworker for the last six months of the reporting period or for those children discharged from OKDHS legal custody during the reporting period, the last six months prior to discharge.

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%
7/1/2019 – 12/31/2019	All children in care at least 6 full calendar months from 7/1/2019 – 12/31/2019	4,216	7,297	57.8%
1/1/2020 – 6/30/2020	All children in care at least 6 full calendar months from 1/1/2020 – 6/30/2020	4,491	7,214	62.3%
7/1/2020 – 12/31/2020	All children in care at least 6 full calendar months from 7/1/2020 – 12/31/2020	4,510	7,242	62.3%
Target				65.0%

Section 2, Table 3.3-1



Section 2, Graph 3.3-1

Data Commentary

From 7/1/2020 through 12/31/2020, 62.3 percent of the children in out-of-home care were seen by the same primary worker for six consecutive months. The baseline was set at 40.6 percent. The measure remains at 21.6 percent above the baseline for the second consecutive reporting period.

Reporting Period Progress

During this reporting period, efforts continued to reduce caseloads, improve hiring, and retaining staff as these efforts directly support increased performance in Measures 3.1, 3.2, and 3.3. Child Welfare Services (CWS) leadership continues to communicate to district directors that caseworker continuity must be considered when reassigning cases. Staff retention and development efforts, as seen in the Worker Caseloads section of this report, are aimed at increasing workforce stability and decreasing turnover. During the last reporting period, implementation of the Supervisory Framework occurred in all five regions. The Supervisory Framework continues to enhance a supervisor's ability to support and coach staff, thus also improving worker retention and directly impacting Measures 3.1, 3.2, and 3.3. With CW staff teleworking due to the COVID-19 pandemic, the Supervisory Framework is especially important as these measures rely on staff retention through supportive coaching strategies. Data reports and other ongoing strategy efforts will continue to be used to help identify trends that impact the continuity of caseworker 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 – Adoption and Foster Care Analysis Reporting System (AFCARS) 20A and 20B

- 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 10/1/2019 through 09/30/2020 whose length of stay (LOS) as of 9/30/2020 was between eight days and 12 months.

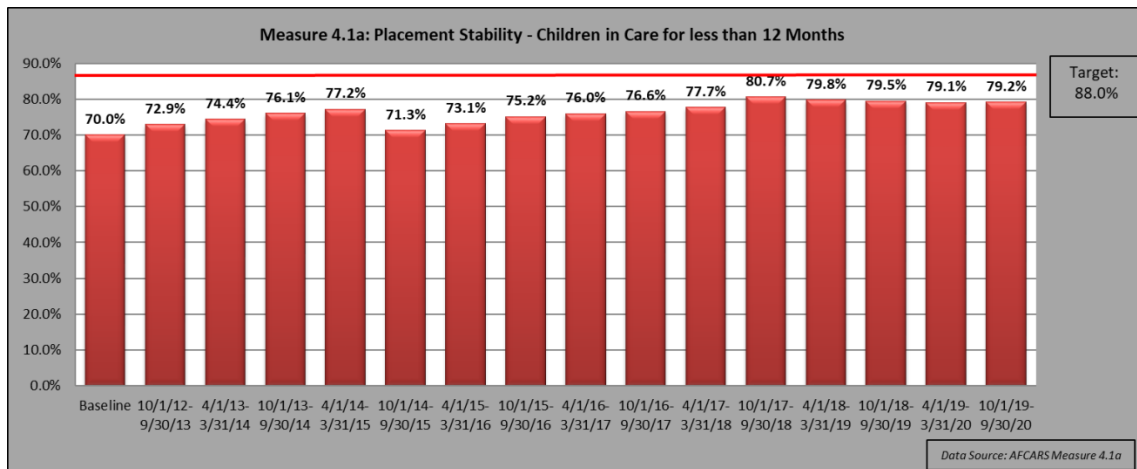
Numerator: All children served in foster care from 10/1/2019 through 09/30/2020 whose LOS as of 09/30/2020 was between eight days and 12 months and who had two or fewer placement settings as of 09/30/2020.

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%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019 with LOS between 8 days and 12 months	3,873	4,869	79.5%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020 with LOS between 8 days and 12 months	3,812	4,817	79.1%
10/1/2019 – 9/30/2020	All children served from 10/1/2019 - 9/30/2020 with LOS between 8 days and 12 months	3,432	4,332	79.2%
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 – Adoption and Foster Care Analysis Reporting System (AFCARS) 20A and 20B

- 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 10/1/2019 through 09/30/2020 whose length of stay (LOS) as of 09/30/2020 was between 12 months and 24 months.

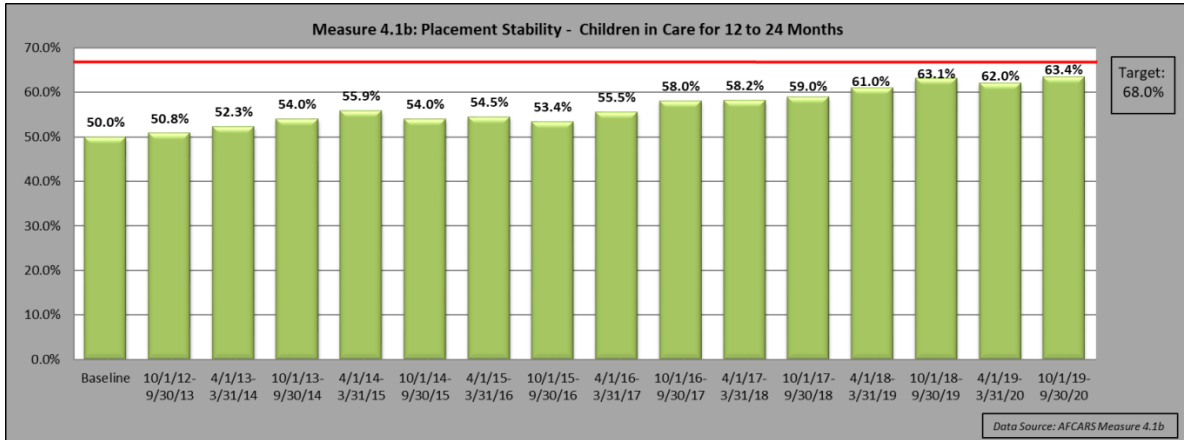
Numerator: All children served in foster care from 10/1/2019 through 09/30/2020 whose LOS as of 09/30/2020 was between 12 months and 24 months **and** who had two or fewer placement settings as 09/30/2020.

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%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019 with LOS between 12 and 24 months	2,719	4,309	63.1%

4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020 with LOS between 12 and 24 months	2,584	4,169	62.0%
10/1/2019 – 9/30/2020	All children served from 10/1/2019 - 9/30/2020 with LOS between 12 and 24 months	2,683	4,229	63.4%
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 – Adoption and Foster Care Analysis Reporting System (AFCARS) 20A and 20B

- 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 10/1/2019 through 09/30/2020 whose length of stay (LOS) as of 09/30/2020 was 24 months or longer.

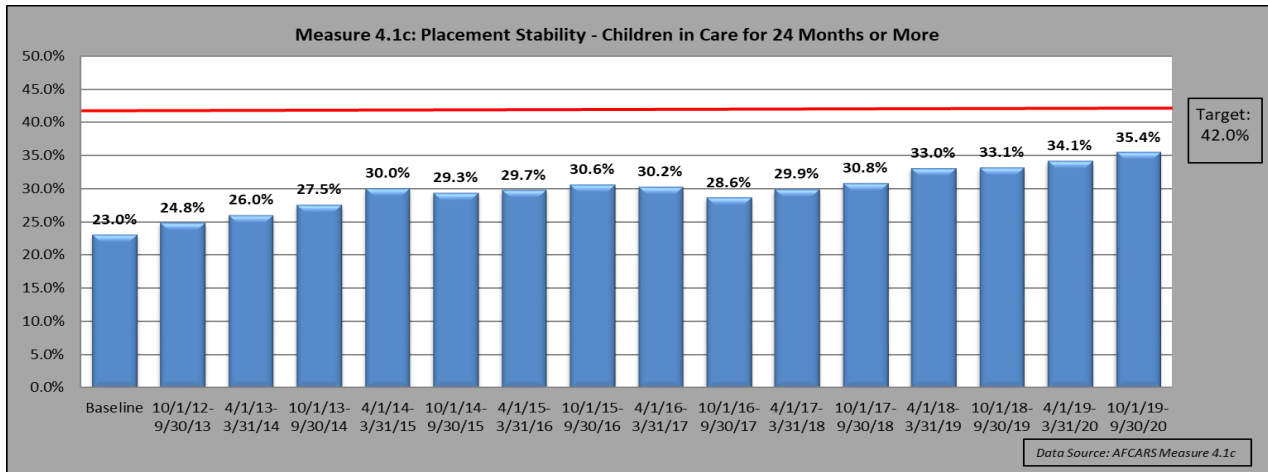
Numerator: All children served in foster care from 10/1/2019 through 09/30/2020 whose LOS as of 09/30/2020 was 24 months or longer **and** who had two or fewer placement settings as of 09/30/2020.

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%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019 with LOS 24 months or longer	1,213	3,669	33.1%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020 with LOS 24 months or longer	1,186	3,475	34.1%
10/1/2019 – 9/30/2020	All children served from 10/1/2019 - 9/30/2020 with LOS 24 months or longer	1,237	3,495	35.4%
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 10/1/2019 through 09/30/2020 whose current removal was prior to 09/30/2020 and remained in care at least 12 months.

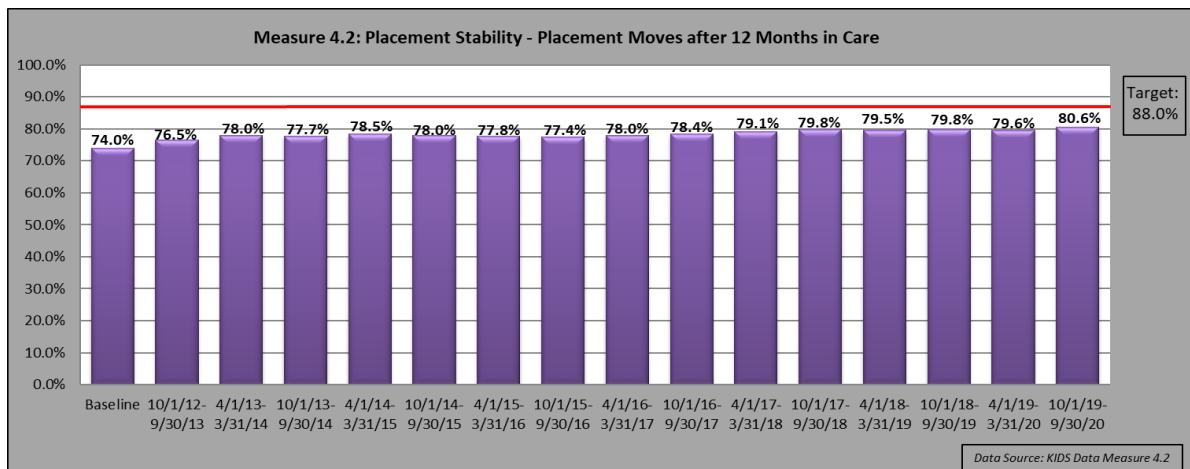
Numerator: All children served in foster care from 10/1/2019 through 09/30/2020 whose current removal was prior to 09/30/2020 and remained in care at least 12 months **and** had two or fewer placement settings.

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 at least 12 months	7,026	9,002	78.0%
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%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019 with LOS at least 12 months	6,172	7,737	79.8%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020 with LOS at least 12 months	5,883	7,390	79.6%
10/1/2019 – 9/30/2020	All children served from 10/1/2019 - 9/30/2020 with LOS at least 12 months	5,992	7,430	80.6%
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 - Jun 2017	1001	2598	38.5%
Jul - Dec 2017	1009	2264	44.6%
Jan - Jun 2018	1049	2138	49.1%
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%
Apr-19	163	352	46.3%
May-19	181	338	53.6%
Jun-19	170	335	50.7%
Jan - Jun 2019	974	2045	47.6%
Jul-19	126	331	38.1%
Aug-19	205	435	47.1%
Sep-19	152	363	41.9%
Oct-19	182	379	48.0%
Nov-19	126	296	42.6%
Dec-19	145	303	47.9%
Jul - Dec 2019	936	2107	44.4%
Jan-20	169	359	47.1%
Feb-20	169	332	50.9%
Mar-20	139	297	46.8%
Apr-20	104	225	46.2%
May-20	147	306	48.0%
Jun-20	162	336	48.2%
Jan - Jun 2020	890	1855	48.0%
Jul-20	149	324	46.0%
Aug-20	167	341	49.0%
Sep-20	184	325	56.6%
Oct-20	159	288	55.2%
Nov-20	148	274	54.0%
Dec-20	119	218	54.6%
Jul - Dec 2020	926	1770	52.3%

Data Source: Baseline-YI844; Run Date: 7/19/2017. YI867: Jan- Sept 2017; Run Date: 10/19/17, Oct 17- Dec 20th; Run Date: 10th of each month (report on 45 day lag).

Section 2, Table 4.2-2

Placement Stability						
Placement Stability Efforts	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
Resource Check-In Call	80.2%	82.4%	79.8%	84.7%	83.5%	88.7%
Initial Meeting	73.9%	76.0%	67.6%	71.9%	76.3%	79.0%
First Placement Kinship	46.0%	49.0%	56.6%	55.2%	54.0%	54.6%
Quarterly Visit	94.3%	95.5%	94.2%	94.4%	94.4%	93.6%
Subsequent Initial Meetings	56.4%	60.6%	59.1%	55.0%	52.2%	55.1%

Data Source: YI867 & YI827; Run Date: 10th of each month. Data on 45 day lag. YI840 monthly after 5th for Quarterly Visits.

Section 2, Table 4.2-3

Data Commentary

During this reporting period, Child Welfare Services (CWS) improved in all four measures for placement stability. CWS saw an increase of 0.1 percent in Measure 4.1a. Performance is now 9.2 percent above the baseline data. Measure 4.1b saw an increase of 1.4 percent from 62.0 percent to 63.4 percent, which is the highest overall percentage during this measure's reporting. Measure 4.1c increased by 1.3 percent, for an overall total of 35.4 percent, which is the sixth period of consecutive, positive trending. Measure 4.2 saw an increase of 1.0 percent making the overall performance 80.6 percent, which is 6.6 percent above the original baseline. This is the highest overall percentage seen in three of the four placement stability measures, 4.1b, 4.1c, and 4.2, since Pinnacle Plan reporting began.

Reporting Period Progress

Placement Stability Efforts

Placement stability efforts are continually examined and explored to ensure a continuous quality improvement approach is taken for outcomes. As such, oversight of the placement stability strategies shifted in October 2020 to align placement stability efforts with other strategies including Continuum of Care and Timely Permanency. This change is to further support the positive outcomes made in placement stability and at the same time, positively impact the other strategies, as they are all linked and support each other. Striving towards a proactive self-correcting system is vital to encourage forward thinking and continued improvement in child placement stability. The process of gathering information to learn what is improving outcomes and offering supports and resources to address areas needing improvement is carried out by analyzing both qualitative and quantitative data available from an ongoing occurrence.

In August 2020, the regional deputy directors and the Foster Care and Adoptions (FC&A) regional director were designated as leads moving forward for the placement stability core strategies. This change was made to heighten awareness, monitoring, and support to staff from leadership regarding the placement stability strategies. Since that time, the placement stability workgroup, which consists of the regional leads and program staff, meets on a monthly basis. In addition, individual meetings were conducted with the leads as well as their district directors to discuss perceived barriers to first placement kinship. During the individual regional meetings, the revision to the Important People in Child's Life/Family Tree form was discussed in-depth. To increase first placement kinship, the form was revised to include signature lines for the assigned child welfare (CW) specialist, CW supervisor, and district director to indicate a kinship placement was not secured upon removal. The signatures' purpose is to increase leadership involvement in the search and assessment of possible kinship placements and verify that efforts were exhausted prior to any non-kinship placement. The form's completion also became mandatory on all cases where an intervention was under consideration or implemented. The form is required to be completed prior to the child safety meeting (CSM) or during the CSM. This practice took effect on 9/28/20 per *CWS Numbered Memo 20-11, Update on Important People in a Child's Life/Family Tree*. A messaging flyer was distributed, in addition to the memo and the revised form, to point out the benefits of kinship placement.

In September 2020, the Placement Stability Move Report, YI827, was also used to focus on children with a move from their first placement with the exit reason of "placement cannot meet child behavioral treatment needs" or "provider requested change of placement." The assigned CW specialist is forwarded the report informing him or her that, due to the placement change reason, the child may benefit from Enhanced Foster Care (EFC) services. EFC services are designed to address the complex behavioral, medical, developmental and mental health needs of children of all ages in two ways: (1) stabilize placement for a child in family-based settings; and (2) support children who need additional services and supports to be successful in family-based settings, such as those transitioning from higher levels of care.

A required staffing is completed between the CW Permanency Planning specialist and Resource specialist to ensure the strengths and needs of the child and resource family were thoroughly communicated and assessed between both programs and an EFC referral was made, when appropriate. After this staffing's implementation, feedback from the field indicated this information is gathered and discussed during the Initial Meetings (IM) and subsequent IMs and that completing an additional staffing was duplicative. To ensure EFC is still considered for this population when an IM or subsequent IM does not occur, the Placement Stability Move Report identifying this population is emailed to the assigned

specialists and supervisors monthly with a detailed description of EFC and the referral process instructions. CWS Continuum programs currently tracks the number of received referrals and will utilize this information to inform enhancements to this strategy.

Beginning September 2020, a review of any previous kinship placement is conducted on all youth 16 and 17 years old who are not residing in a kinship placement. The assigned CW specialist and supervisor complete the review, followed by a second review conducted by the CW field manager and district director. The second review is to evaluate if adding additional supports can result in a successful placement. When the second review still results in a denial, the request is elevated to the assistant CW director with denied second reviews tracked in a spreadsheet. Since implementing this process, nine previously denied kinship requests were elevated to the assistant CW director who approved six with one pending.

The quality review process for IM and subsequent IMs was revised in September 2020. The process, referred to as IM review consultation, was altered to increase efforts to improve the quality and frequency of Child and Resource Family Support Plans created during IMs. The IM review consultation consists of Quality Assurance (QA) staff reviewing support plans and then reviewing a plan jointly with the supervisor of the assigned CW specialist who facilitated and documented the IM support plan. The QA staff, CW supervisor, and CW specialist are to jointly determine any strengths or areas needing improvement. When a support plan was not created during an IM, the consultation review includes guidance or support as to the importance and purpose of creating an IM support plan. The new process instructs the CW supervisor to review the IM/subsequent IM with the CW specialist to continue the transfer of learning with QA assistance upon request. The district director is kept in the feedback loop process by being copied on emails sent by QA staff to the CW supervisor and specialist notifying them of the scheduled review consultation meeting, as well as the review's conclusion. The support plan is attached to the emails for reference. QA staff also provides feedback to leadership during the monthly regional leadership meetings. After 90-calendar days of conducting this process, QA program supervisors will evaluate the effectiveness of the IM review consultation process. Based on the results of the evaluation, next steps will be determined.

Regional quantitative completion trends of placement stability efforts are electronically provided to CW staff monthly. Detailed information on children in need of an IM and/or documentation is emphasized in this monthly communication that stresses the IM's importance in stabilizing placements. This communication reiterates the value of placing children with family and/or people with whom they are familiar, to avoid additional trauma of multiple placement relocations to ensure their safety. Missing efforts emails are sent out on a weekly basis to the Placement Stability leads as a proactive way of identifying Resource Parent Check-In Calls and IMs that need to be documented in KIDS for capture on the compliance report.

The Resource Parent Check-In Call Guide for staff was updated to ensure information, such as medical needs, should be included during the call made two-business days after placement. The call continues to provide resource parents with any known pertinent and critical information about the child immediately upon placement. As a follow-up, additional feedback is in the process of being collected to determine if there are any other barriers that indicate a need for more support or guidance.

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 out-of-home (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 is better able to engage parents in services and visitations, which contributes to permanency. In addition, when children are stable in placements, resource parents are receiving the necessary supports that assist with retention and recruitment.

Training

The online placement stability training to support all CW specialists was finalized in December 2020 and will be made

available to all staff in January 2021. A communication email will be sent to all staff outlining expectations for completion dates and time frames for this mandatory training. Placement stability training is one component of a four-part training series. The other trainings consist of: (1) Diligent Search (2) Utilization of the Child Behavioral Health Screener; and (3) Treatment Placement Best Practices. Combining the four trainings together as a series was a decision to better support staff in recognizing how placement stability is impacted by many other areas of practice. Moving to a virtual working platform is an opportunity for placement stability efforts to conduct IM-Support Plan trainings as requested. An email was sent to Placement Stability leads on 8/31/20 offering this training. The training's duration was no more than one hour and included discussion of IM: purpose, time frame, scheduling, facilitation, participation, support plans, and documentation. At the end of this reporting period, the previous Placement Stability Lead conducted approximately 30-40 trainings statewide.

Move Report

Continued emphasis remains in effect for staff to use the *Important People in the Child's Life-Family Tree Form* as a tool to gather contact information about potential first kinship placements in the event removal is inevitable. Additionally, the Move Report continued to be used to identify the top five reasons for moves statewide and regionally. The data is collected, analyzed monthly, and provided to all CWS district directors and deputy directors; thus, highlighting an awareness of why the majority of children are experiencing multiple placement episodes. The data also helps determine the guidance needed to equip staff in selecting the most appropriate reason in KIDS as to why children are moved from one placement into another.

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

The emphasis on children placed initially in kinship is still a significant focus. CSM monthly data usage informs an awareness of placement recommendations for child removal. This data provides comparison percentages of recommendations for kinship, foster home, group home, shelter, residential treatment, and own home. When kinship placement is compared to all other placement types, the need for it to be higher is apparent along with the understanding that increasing child placement with kin requires recommending it first. *Statewide CSM Protocol May 2020* was updated regarding time frames, documentation, and virtual meetings, and was provided to all CW staff on 7/2/20 along with the updated *Safety Guidance 2020 - CSM*. A meeting is scheduled for January 2021 to discuss the Family Meeting Continuum (FMC), which encompasses CSMs as the first meeting in the continuum. Each regional supervisor will be in attendance and the discussion will include plans for revamping the back-to-basics training as it applies to each region and district as necessary. Regions 3, 4, and 5 were recently trained on the FMC and the expectations of conducting a CSM within the two-business days. Monthly data continues to be sent to district, regional, and executive leadership to identify CSM timeliness to aid in coaching staff about adhering to the CSM model.

Continued focus is on the efforts of completing Child and Resource Family Support Plans during IMs as well as considering their quality. The IM review consultations conducted by QA staff also provide feedback to leadership as to whether or not support plans were created and scanned into the KIDS File Cabinet. As a result of this feedback loop, the reviews revealed the majority of IMs reviewed do align with the IM's intent as evidenced by increased parent participation and the higher number of support plans created.

CWS continues learning and self-correcting placement stability practices as more qualitative and quantitative trends are gathered and analyzed. CWS stays focused on coaching staff on the importance of early family engagement and identification of services, resources, and supports. This focus aligns with efforts included in the timely permanency strategies, such as the FMC. The FMC's overall goal is to increase family engagement through frequent and purposeful family meetings. The IMs and subsequent IMs are included in the FMC timeline. Both meetings are critical for the family to come together and support the child's placement as stability can impact permanency. A KIDS generated report was requested that will track when each meeting included in the FMC is due or overdue. Expected time frame for completion of the FMC report is mid to late summer of 2021; however, FMC facilitators are tracking completed meetings in the interim until the report is available. Moving forward, CWS will remain focused on current practices with an emphasis on quality IMs, ensuring IMs occur in subsequent placements, the creation of Child and Resource Family Support Plans, providing

supports and guidance to overcome barriers to first placement kinship, analyzing the prominent reasons children are moving monthly, and finalization of the online training.

Conclusion

CWS made progress in all Placement Stability metrics since focusing on the strategy to minimize placement episodes for children. Measure 4.1c increased by 1.3 percent, for an overall total of 35.4 percent, which is the sixth period of consecutive, positive trending. This number is the highest overall percentage seen in Measure 4.1c since Pinnacle Plan reporting began. Over the previous reporting periods, CWS used COVID-19 relief payments and Kith Care for foster parents as supports for placement stability. Additionally, CWS enhanced strategies to emphasize relative placement, data-driven planning at the local level, and higher-level leadership involvement in placement stability efforts. CWS remains committed to streamlining efforts related to placement stability, permanency planning, and the continuum of care while continuously examining opportunities for improvements in the quality of work conducted to achieve each metric's targeted goals.

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 7/1/2020 through 12/31/2020, how many nights were spent in the shelter?

Data Source and Definitions

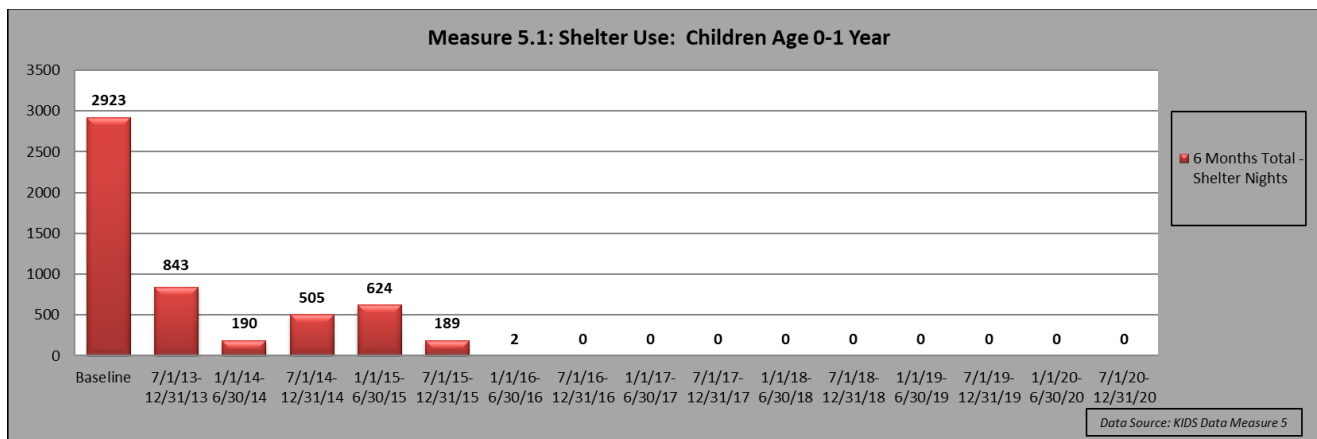
Data shown is the total number of nights children ages 0-1 year old spent in the shelter during the time period from 7/1/2020 through 12/31/2020. The baseline for this measure was 2,923 nights with a target of 0 nights by 12/31/2012. Automatic exceptions are made when the child is part of a sibling set of four or more or when a child is placed with a minor parent who is also in the Oklahoma Human Services (OKDHS) 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
7/1/2019 – 12/31/2019	All children age 0-1 year with an overnight shelter stay from 7/1/2019 – 12/31/2019	0 Nights
1/1/2020 – 6/30/2020	All children age 0-1 year with an overnight shelter stay from 1/1/2020 – 6/30/2020	0 Nights
7/1/2020 – 12/31/2020	All children age 0-1 year with an overnight shelter stay from 7/1/2020 – 12/31/2020	0 Nights
Target		0 Nights

Section 2, Table 5.1-1



Section 2, Graph 5.1-1

Data Commentary

There were zero children, age 0-1 year, who spent nights in shelter care from 7/1/2020 through 12/31/2020. During this time period, 1,923 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.

Reporting Period Progress

Child Welfare Services (CWS) continues to have completely eliminated shelter usage for children ages 0-1.

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 7/1/2020 through 12/31/2020, how many nights were spent in the shelter?

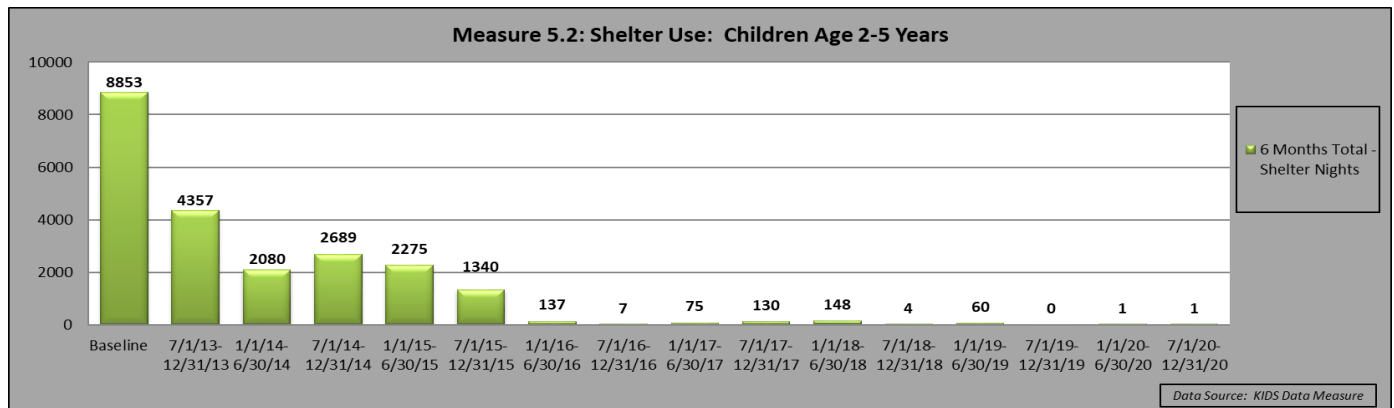
Data Source and Definitions

Data shown is the total number of nights children ages 2-5 years old spent in the shelter during the time period from 7/1/2020 through 12/31/2020. 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 OKDHS custody. Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.

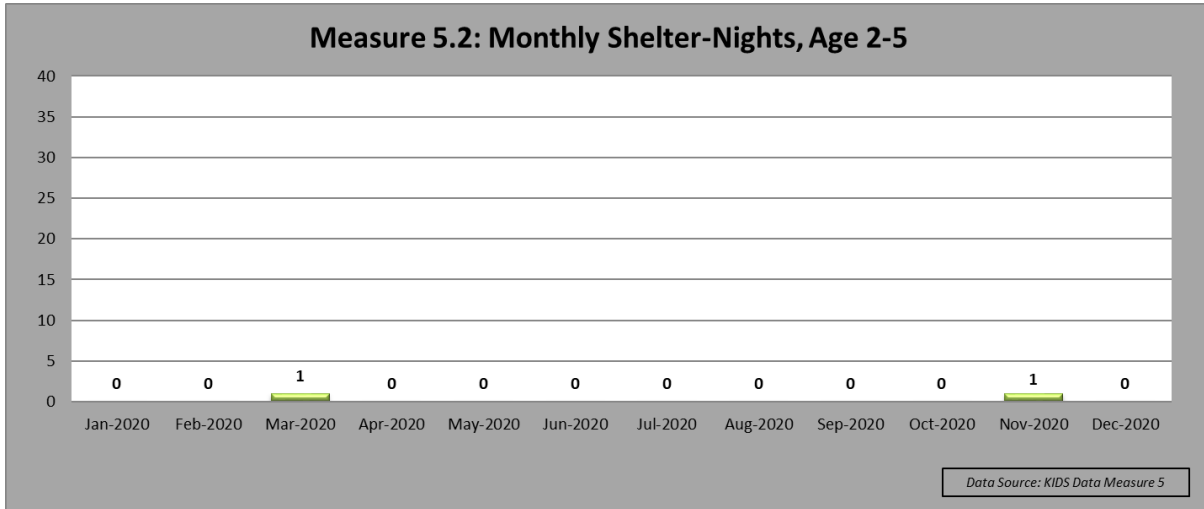
Trends

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
7/1/2019 – 12/31/2019	All children age 2-5 years with an overnight shelter stay from 7/1/2019 – 12/31/2019	0 Nights
1/1/2020 – 6/30/2020	All children age 2-5 years with an overnight shelter stay from 1/1/2020 – 6/30/2020	1 Night
7/1/2020 – 12/31/2020	All children age 2-5 years with an overnight shelter stay from 7/1/2020 – 12/31/2020	1 Nights
Target		0 Nights

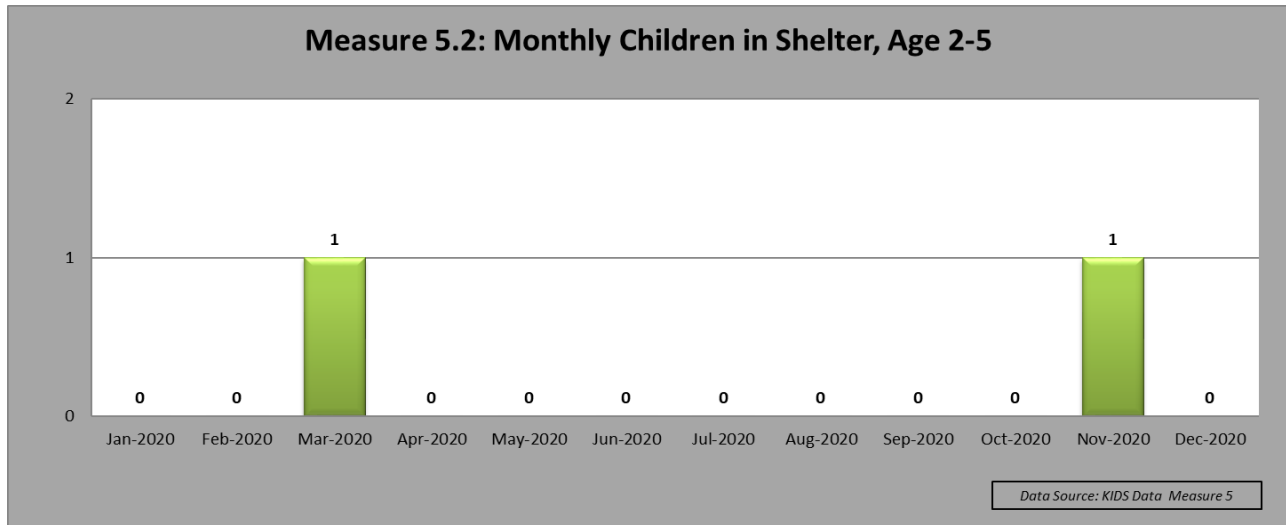
Section 2, Table 5.2-1



Section 2, Graph 5.2-1



Section 2, Graph 5.2-2



Section 2, Graph 5.2-3

Data Commentary

One child, age 2-5 years, spent one night in shelter care from 7/1/2020 through 12/31/2020. During this time, 3,039 children, ages 2-5 years, were in care and 99.9 percent of those children did not have a shelter stay. One child was placed in the shelter afterhours with two siblings, and stayed one night.

Reporting Period Progress

One child age 2-5 spent one night in the shelter during this reporting period. This child was placed after midnight in a shelter with two siblings and exited to a non-relative kinship foster home later in the same day.

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 7/1/2020 through 12/31/2020, how many nights were spent in the shelter?

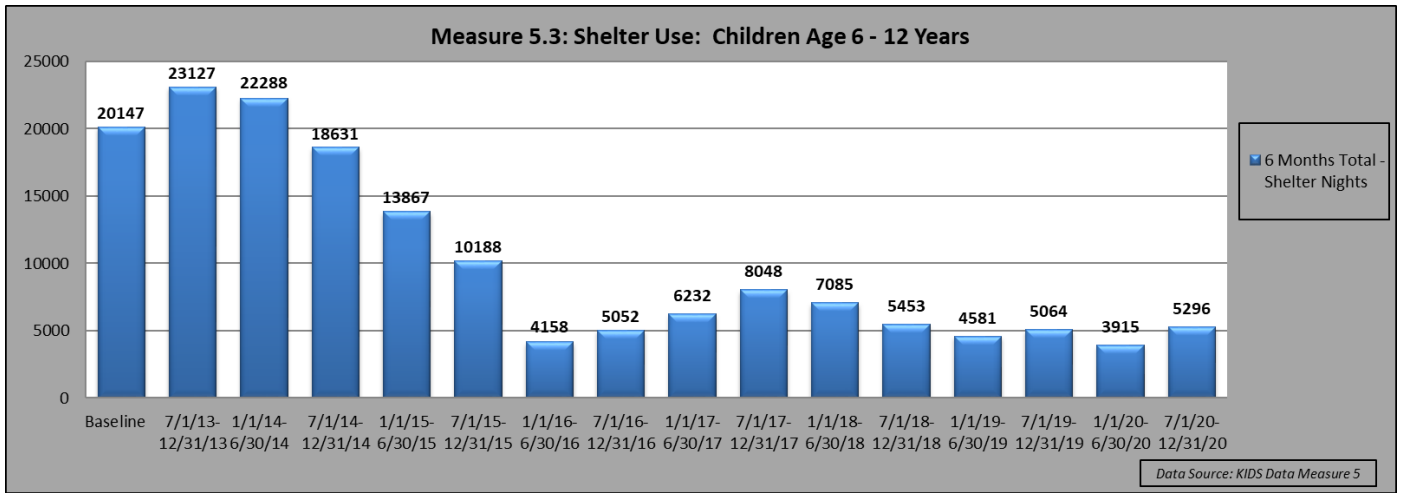
Data Source and Definitions

Data shown is the total number of nights children ages 6-12 years old spent in the shelter during the time period from 7/1/2020 through 12/31/2020. 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.

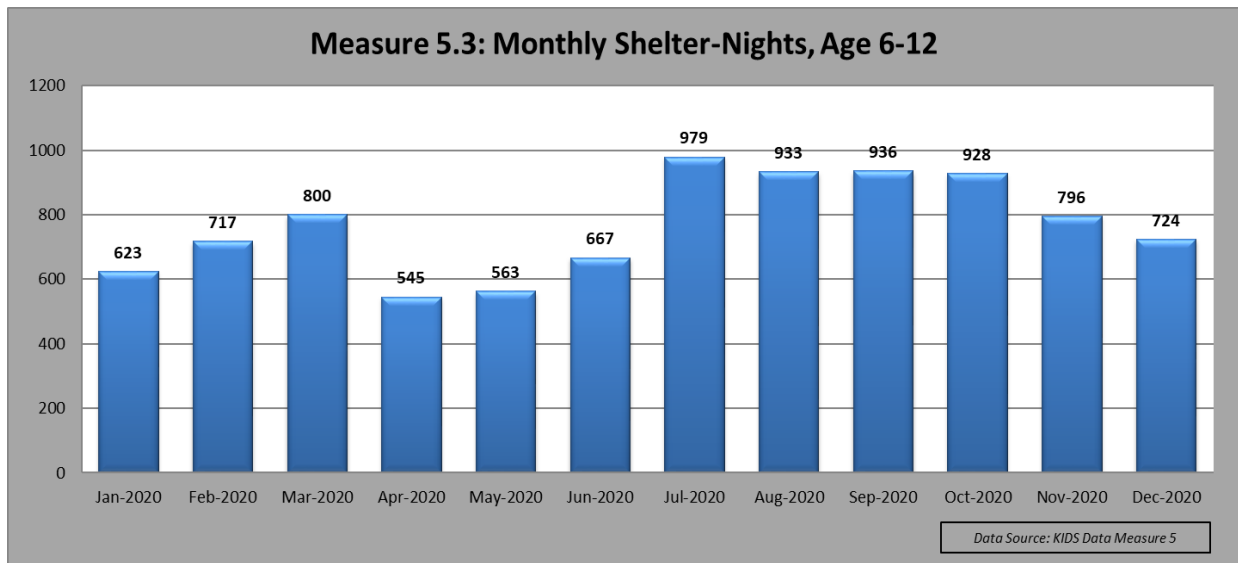
Trends

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	4,581 Nights
7/1/2019 – 12/31/2019	All children age 6-12 years with an overnight shelter stay from 7/1/2019 – 12/31/2019	5,064 Nights
1/1/2020 – 6/30/2020	All children age 6-12 years with an overnight shelter stay from 1/1/2020 – 6/30/2020	3,915 Nights
7/1/2020 – 12/31/2020	All children age 6-12 years with an overnight shelter stay from 7/1/2020 – 12/31/2020	5,296 Nights
Target		0 Nights

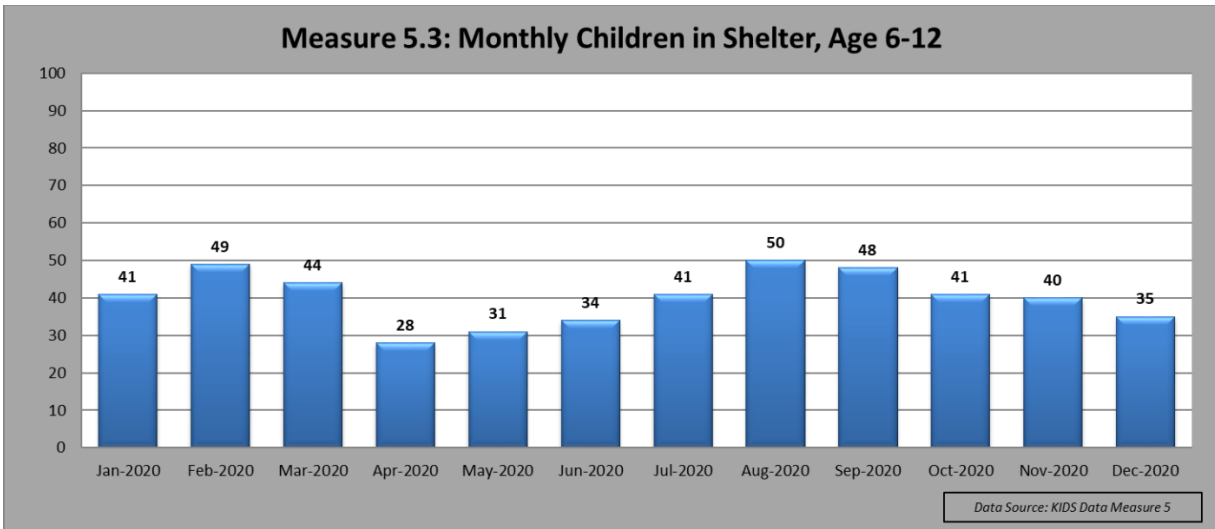
Section 2, Table 5.3-1



Section 2, Graph 5.3-1



Section 2, Graph 5.3-2



Section 2, Graph 5.3-3

Data Commentary

A total of 104 distinct children, ages 6-12 years old, spent a total of 5,296 nights in shelter care from 7/1/2020 through 12/31/2020. Section 2, Graph 5.3-3 identifies 255 children spending time in shelters from July through December 2020. 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, 3,011 children, ages 6-12 years old, were in care and 96.5 percent of those children did not have a shelter stay.

Reporting Period Progress

For children ages 6-12, the number of shelter nights for this reporting period increased by 1,381 total shelter nights from the previous reporting period. The number of nights for this cohort was at its highest level in July 2020 at 979 nights, but decreased over the course of this reporting period to the fewest nights in the final month of December 2020 at 724 nights. In the same manner, nights for individual children trended down over the course of the reporting period, from a high of 50 nights in August 2020 to a low of 35 nights in December 2020. Although challenged in the beginning of this reporting period by a spike in number of nights, CWS was able to self-correct using existing practice and the roll out of new shelter reduction strategies during the first three months of this reporting period to bring both the shelter nights and number of children age 6-12 served in shelter care to a level more consistent with previous reporting levels.

One strategy that impacted the 6-12 cohort was the move towards shelter usage elimination for children ages 6-10, which was completed in stages to minimize the transition's impact on CW staff. The first stage was elimination of shelter usage for children ages 6-8 initiated on 9/1/2020. At that time, approximately six children were in shelter care between the ages of 6-8 based on the shelter report of 9/4/2020. The second stage was elimination of shelter usage for children ages 9-10, which began on 12/1/2020. At that time, five children ages 9-10 were in shelter care based on the shelter report of 12/4/2020. This practice shift involved regional and shelter program leadership engaged in discussion, planning and evaluating all options before placing a child under age 10 in shelter care. The data reflects that individual children age 6-12 utilizing shelter care dropped by seven from September to October 2020, and shelter nights for children age 6-12 dropped by 132 nights from October to November 2020. Although children age 11-12 are included in these totals, it is reasonable to accept that this strategy had a direct impact on reducing the usage of shelter for this cohort. Future reporting periods will be evaluated to determine if the strategy to reduce the usage of shelter care for this cohort has a significant impact. As of 2/11/2021, no children under age 8 are in shelter care and only eight children between the ages of 8-10 were in shelter care.

A youth and family shelter has identified itself as passionate for caring for children with developmental disabilities and autism, and has developed numerous community and professional supports to achieve success. This shelter participated in additional training and consultation with the CWS Education Services and Developmental Disabilities Program (ESDDP) program field representatives (PFRs), as well as outside training and collaboration with community partners, to ensure children have access to appropriate education and medical services. This reporting period, the shelter served 18 unique children and youth for a total of 908 nights. Of the 20 placements made at this shelter during this reporting period: six were the child's first placement following removal; six were from a family setting, one was a disrupted trial adoption; and the other eight were from higher levels of care with three moved from another shelter intentionally to this shelter so their needs could be better served. Ten of these children left this shelter over the course of the reporting period for higher levels of care, while seven children who left did so to family-like settings. The great majority of children served by this shelter have unique or higher levels of need, but are able to be successfully served in this shelter, which prevents placement at a level E group home. Children from this shelter who fit criteria for placement at a level E group home were considered by CWS leadership for placement, but the decision was made that these children's unique needs were best served by this shelter through existing relationships with staff, local providers, and services provided to the shelter. This shelter remains a strong partner in serving the needs of this small group of children, primarily within the 6-12 age cohort. The CWS Director visited the shelter during this reporting period and discussions are underway as this provider recognizes the need for stable long-term placement and permanency for children with disabilities and is considering how their organization might develop additional programs beyond emergency shelter care to support those efforts.

Another effort for children ages 6-12, although not an official strategy, has been the work of one of the Specialized Placements and Partnership Unit (SPPU) program supervisors assigned as the SPPU liaison to therapeutic foster care (TFC)/intensive treatment family care (ITFC). This supervisor works closely with the TFC/ITFC field manager to elevate children for review, as needed, as well as work directly with TFC/ITFC providers in considering placements available with their agencies. Previous reporting described this effort as completing individual staffings with TFC agencies, which has now evolved into a more child-specific approach. This effort, assisted by one of the shelter PFR's, resulted in six individual children being moved out of shelters into appropriate TFC care through planned discharge. In conjunction with this, similar type work was done with children in this age group who are long-stayers in shelter care. The desired outcome for this intentional, more child-specific approach will result in more thoughtful and planned discharges culminating in successful non-shelter placement; however, the timeframe to achieve this may be longer due to the elevated needs of long-staying shelter children.

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 7/1/2020 through 12/31/2020, how many nights were spent in the shelter?

Data Source and Definitions

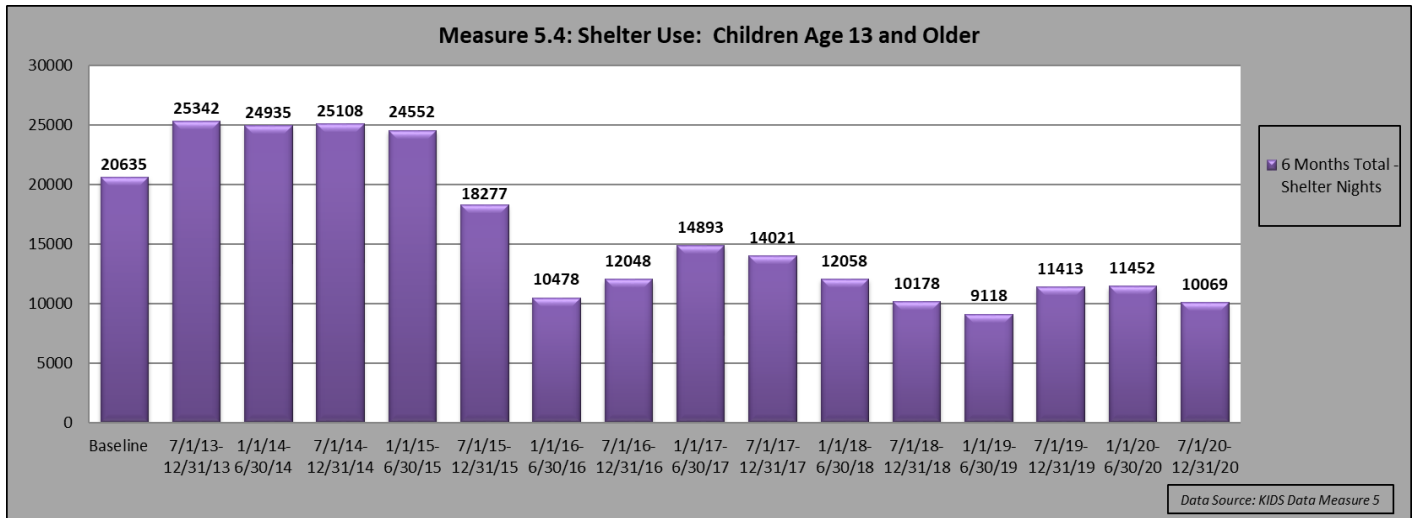
Data shown is the total number of nights children ages 13 years or older spent in the shelter during the time period from 7/1/2020 through 12/31/2020. The baseline for this measure is 20,635 nights with a target of 8,850. Of the children 13 years and older placed in a shelter during this period, the 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 an automatic exception are still included in the count of total nights spent in the shelter.

Trends

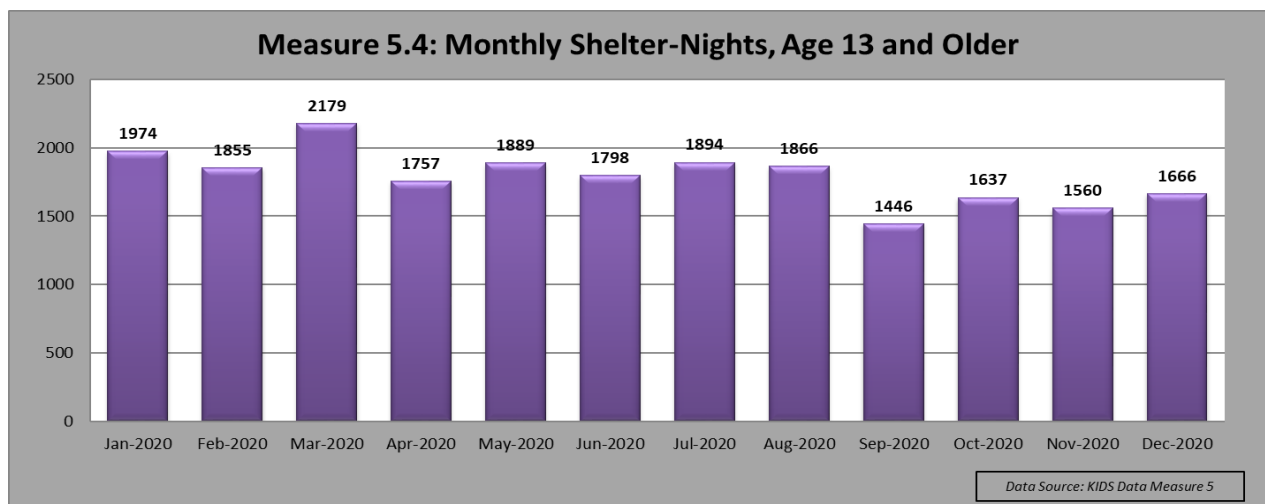
Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 13 or older with an overnight shelter stay from 1/1/2012 – 6/30/2012	20,635 Nights
7/1/2013 – 12/31/2013	All children age 13 or older with an overnight shelter stay from 7/1/2013 – 12/31/2013	25,342 Nights
1/1/2014 – 6/30/2014	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	9,118 Nights
7/1/2019 – 12/31/2019	All children age 13 or older with an overnight shelter stay from 7/1/2019 – 12/31/2019	11,413 Nights
1/1/2020 – 6/30/2020	All children age 13 or older with an overnight shelter stay from 1/1/2020 – 6/30/2020	11,452 Nights
7/1/2020 – 12/31/2020	All children age 13 or older with an overnight shelter stay from 7/1/2020 – 12/31/2020	10,069 Nights
Target		8,850 Nights

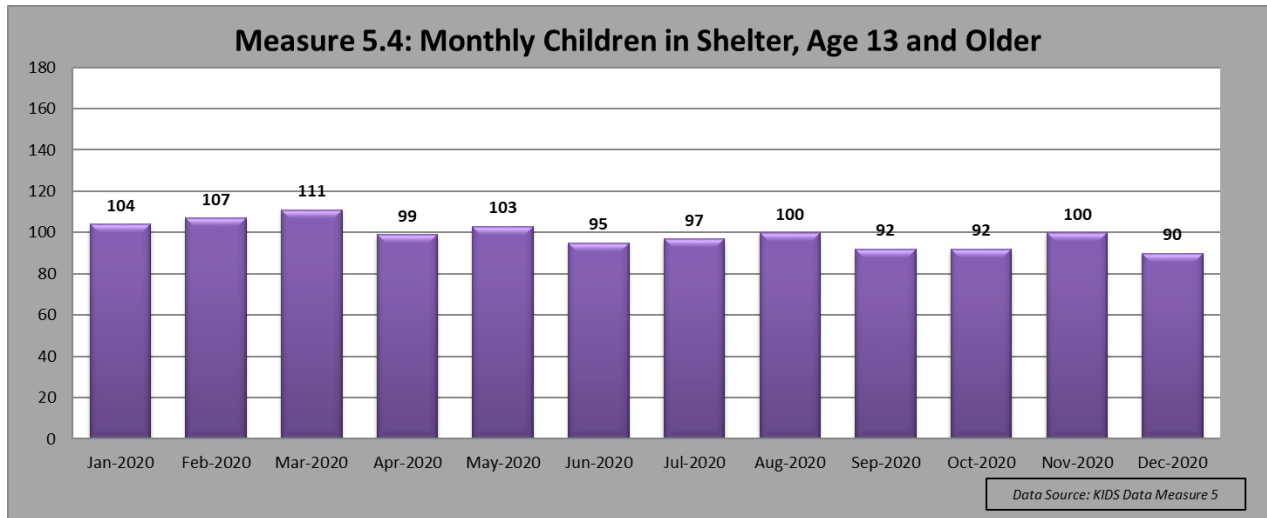
Section 2, Table 5.4-1



Section 2, Graph 5.4-1



Section 2, Graph 5.4-2



Section 2, Graph 5.4-3

Data Commentary

A total of 254 distinct youth, ages 13 years or older, spent a total of 10,069 nights in shelter care from 7/1/2020 through 12/31/2020. Section 2, Graph 5.4-3 identifies 571 children spending time in shelters from July through December 2020. 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, 1,592 youth, ages 13 years or older, were in care and 84.0 percent of those children did not have a shelter stay.

Reporting Period Progress

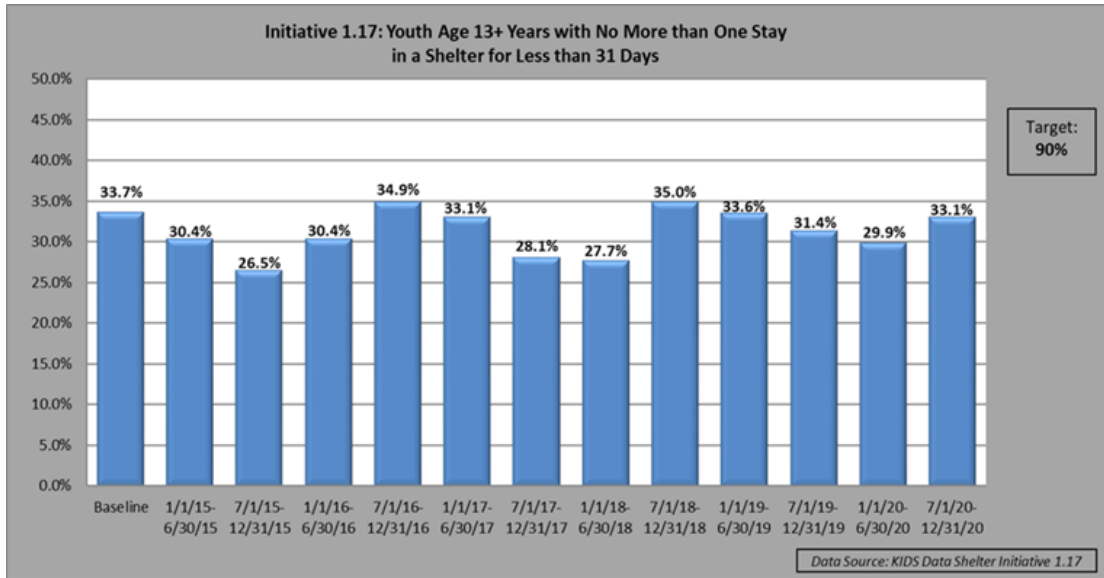
For youth ages 13-17, the number of shelter nights decreased by 1,383 from the previous reporting period. The number of nights for this cohort also was at its highest level in July 2020 with 1,894, but trended downward over the course of the reporting period before slightly increasing in December 2020 with 1,666 nights. Individual youth in this cohort fluctuated between 100 and 92 until ending the reporting period with a low of 90 individual youth that were served in shelter care in December 2020.

A new shelter strategy appeared to make an impact on this cohort: a review of previously denied kinship placements for youth 16 and 17 years of age. When a youth, 16 or 17 years of age, has a potential kinship placement denied due to criminal or child welfare history, the district director staffs with the regional deputy director and when appropriate, the regional deputy director now staffs with the deputy directors for both CWS Field Operations and FC&A Programs to determine if the youth's protective capacities and needs, family situation, proximity to age 18, and other factors allow for placement with this kinship provider. This process resulted in at least two youth exiting shelter prior to age 18, and placement of others where all other options were previously thought to be exhausted. The data indicates that the number of youth 17 years of age in shelter care decreased from 13 on 7/3/2020 to seven on 12/31/2020. As of 2/11/2021, there are eight youth age 17 in shelter care. Future reporting periods will evaluate the strategy's efficacy on the cohort of 16 and 17-year-old youth as a whole. For this reporting period, the focus was largely on youth 17 years of age.

Two new level C group homes opened during this reporting period with 12 beds for males. As of 12/31/2020, six of the 12 available beds were being utilized. These two new programs focus on the youth's success in the community by creating unique plans to support youth's educational goals while also ensuring the youth has a focused opportunity for gainful employment. Each youth must complete interviews for the program, including with the program director, to ensure that the program can support the individual's goals. These programs focus on listening to the youth for guidance on programming and services. The goal is to use these programs to serve youth 17 years of age; however, youth who are 16 may also be considered.

CWS is consistently reviewing all previous placements for 16 to 17-year-old youth. The regional multidisciplinary team (MDT) leads engage with the district director to consistently elevate these placements for review when appropriate. This process seems to be one of the contributing factors to the declining number of 17-year-old youth in shelter care.

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

Data Commentary

For the six-month period ending 12/31/2020, 33.1 percent of youth, age 13 and older, experienced no more than one stay in the shelter lasting less than 31 days. Of the 254 youth, age 13 and older, who had a shelter stay during the reporting period, 84 youth had one shelter stay lasting less than 31 days. Of the remaining 170 youth, age 13 and up, who had a shelter stay: 69 youth, 27.17 percent, had one stay that lasted longer than 31 days; 22 youth, 8.7 percent, had two or more stays that lasted less than 31 days; and 79 youth, 31.1 percent, had two or more stays that lasted more than 31 days in the shelter. CWS had an improvement of 3.2 percent from the last reporting period.

Reporting Period Progress

For Initiative 1.17, which reflects youth who are not to be placed in shelter care more than one time during a 12-month period and with a shelter stay lasting no more than 30 days, this reporting period continues to see a similar percent of youth who exit shelter care in less than 31 days and did not return in the following 12 months. CWS improved slightly since the last reporting period.

The SPPU shelter PFR continues to review all shelter authorization forms. While this practice does not seem to have an impact in preventing youth and children from entering shelter care, the review highlights opportunities that identify barriers and lead to more programmatic or creative suggestions. Entering data from the shelter authorization forms into the shelter survey database also assists in identifying trends and needs for youth entering shelter care that can then be disseminated to the field.

This reporting period included the roll out and implementation of several shelter strategies designed to not only reduce shelter usage, but to increase prevention of shelter usage as well. The continual training across the state impacted the messaging to CWS field staff about not only appropriate use and prevention of shelter care, but a better understanding that shelter care is a stepping-stone into either kinship foster care, traditional foster care, or TFC/ITFC levels of care. This training is now included in the CW Supervisor Academy in addition to regional leadership and supervisory teams, so the

messaging can be reinforced and presented to new supervisors to guide their teams and improve practice. Usage of the shelter discharge planning tool is increasing, which has been helpful in providing information to the youth's next placement or in an initial meeting. CWS continues to engage Oklahoma Association of Youth Services (OAYS) partners in using this tool more consistently across shelters to support youth with planned discharges into family-like placements as well as to gather appropriate information to share with the next placement provider when the discharge is unplanned.

CWS communicates frequently with OAYS regarding improvements in shelter supports provided to custody youth. SPPU staff continue to participate in treatment team meetings and discharge planning, as well as continuing to work on contract monitoring enhancements and completing quarterly facility reviews.

During this reporting period, CWS worked with group home and shelters to ensure same-day admissions are available for youth. The SPPU program administrator is also working with a group home on intake enhancement practices to provide more robust information on the youth to the provider for treatment planning and service delivery.

This reporting period also included the merging of the Enhanced Shelter Reduction Plan, which began in 2018, with the new regional MDT process. The MDT process is an evolved CWS practice that directly relates to shelter usage.

- The MDT process brings a higher level of oversight and accountability from regional leadership, as well as helping CW field staff feel supported by regional leadership's presence in the MDT meeting and as active participants in the MDT process.
- The MDT process elicits more robust information in shelter authorization requests, which leads to a more complete picture of the youth's needs and a better starting point for the MDT discussion for that particular youth.
- The MDT process resulted in increased unpacking of previous denials and rule-outs of family and kinship placements. For example, previously a determination of "all family has been considered" now results in determinations of "we have made contact with a family member previously ruled out." While not always resulting in a placement or shelter exit, many times it results in a new or rebuilt connection for the youth, giving them another potentially supportive adult in their life and their journey through the CW system.
- The MDT process gives CW field and program support staff a better understanding of the needs of this population of youth, including family history, behavioral context, and the youth's strengths. This helps to better determine how best to serve and meet each youth's specific needs.
- The MDT process leads the way towards better transition and exit from shelter care through discharge planning, although work still needs to be done in this area going forward.

Direct Care Authorization and Other Supports

The contract with four Youth Service shelter providers continues; however, the need for them decreased. The direct care per diem's goal was to be a short-term support while CWS worked to put into place a best-fit service array for children and youth who could not maintain safely with typical shelter staffing ratios and services. During this reporting period, only two Youth Service Agencies (YSAs) accessed funding for one-on-one staffing.

Additional supports.

- The CW staff assigned to work with the OKDHS Developmental Disabilities Services (DDS) division expanded. The assigned CW staff are instrumental in working quickly to offer support when a child or youth with known or suspected intellectual disability is served in shelter care.
- One-on-one training opportunities continue for shelter staff when appropriate, but the biggest support is the identification of necessary action steps to move children and youth quickly to a more needs-based placement.
- The CWS Nursing team supports YSA shelters when questions arise. Nurses are assigned regionally throughout the state, thus allowing children or youth to be placed in the shelter that keeps them closest to their community or can best meet their specific needs.

- The SPPU shelter program has two PFRs who regularly attend the OAYS agency meetings. The shelter directors can contact either their assigned CWS shelter liaison or the two shelter PFRs to get any needed supports when caring for children and youth in OKDHS custody.

Office of Juvenile Affairs (OJA)

Beginning 1/1/2020, OJA contracted with 23 YSAs for shelter care. The contracts now include a tier system for rates based on a child or youth's needs. The shelter PFRs and shelter liaisons are available to gather additional information for any YSA shelter and/or OJA when determining the most appropriate tier level for a youth in OKDHS custody. Continued collaboration occurs between CWS and OJA. Currently, three SPPU liaisons are assigned to the 23 youth shelters to provide support to the youth in shelter care, the youth's assigned CW specialist, and the shelter providers. CWS and OJA partners meet through quarterly conference calls; however, due to the COVID-19 pandemic, these calls are held every four to six weeks to address any ongoing concerns, new protocols, and/or needs. When the COVID-19 pandemic restrictive protocols are lifted, these calls will return to a quarterly basis. The calls were previously shown to be effective in maintaining quality communication between the two entities and building the partnership between CWS and OJA.

COVID-19 Impacts

When the COVID-19 pandemic began to impact Oklahoma in March 2020, YSA shelters and OJA partners participated in weekly check-in support calls that later transitioned to bi-weekly and then ended in late May 2020. These calls focused on concerns around the COVID-19 pandemic, the impact on shelter staff, and the possible impact of new shelter placements. Through these calls, the need for a COVID-19 shelter was discussed, ultimately leading to a new contract for this service. A new 12 bed COVID-19 shelter contract was issued on 4/23/2020, specifically for youth who test positive for COVID-19 or who are highly likely to have been exposed, with a purpose of reducing the virus' spread. The **COVID-19 Shelter Report**, filterable by name and enter/exit dates, details the children and youth served by the COVID-19 shelter, which has been open since early April 2020. The count does include children and youth who entered the COVID-19 shelter from family settings and returned to family settings when COVID-19 related issues were resolved. These children and youth are also counted in overall shelter numbers. During the reporting period, 68 children and youth spent a total of 772 nights in the COVID shelter. A contract to open a second COVID-19 shelter is in process and expected to be completed in early 2021, thus providing another quarantine option for COVID-19 exposed or COVID-19 positive children and youth. CWS and OJA partners continue meeting by conference call every four to six weeks to address any ongoing concerns, new protocols, and/or needs related to the COVID-19 pandemic. CWS also continues to provide tangible support to shelters, such as tablets to ensure youth have video contact with CW staff and family members, and through providing personal protective equipment and cleaning supplies, as needed.

Conclusion

The SPPU shelter program team, in collaboration with the CWS and the OKDHS Executive Teams, continues to focus on reducing the use of shelter placements through building a robust continuum of care with family-based placements to best meet the needs of each specific child and youth in care. The CWS Executive Team receives weekly updates on the number of children and youth in shelter care with the ability to follow-up with their regional teams for case and child-specific information, when needed. While the cohort of children age 6-12 initially increased in both nights and numbers of children during this reporting period, CWS showed the ability to modify existing practice and self-correct, moving the number of children in this cohort back towards previous reporting period levels. Data indicates children enter shelter care for various reasons, including but not limited to disruption of kinship or foster care placement, upon initial removal, discharge from higher levels of care, and discharge from OJA custody/placement. Additional strategies were developed and implemented during the course of this reporting period, with specific impacts seen from the regional MDT roll out; review by higher levels of CWS leadership of previously denied kinships for 16 to 17-year-old youth; and the move towards eliminating shelter usage for children under 10 years of age.

With the continued evolution of roles within the SPPU program, including designating staff to assist with shelter reduction strategies, efforts remain focused to shorten the shelter stay through collaboration with the regional teams in finding the appropriate level of placement for each individual child and youth who enters a shelter. The SPPU shelter staff continues

to engage with the child or youth's assigned CW specialist to meet any specific needs and increase opportunities for visitation with people important to the child, and support the shelter in times of crisis. The SPPU shelter team will continue to assess the interventions and supports available to CW staff and shelters so that the best outcomes can be achieved for children and youth.

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 Adoption and Foster Care Analysis Reporting System (AFCARS) files.

Description of Denominator and Numerator for this reporting period

Denominator: All children who entered foster care from 4/1/2019 through 9/30/2019.

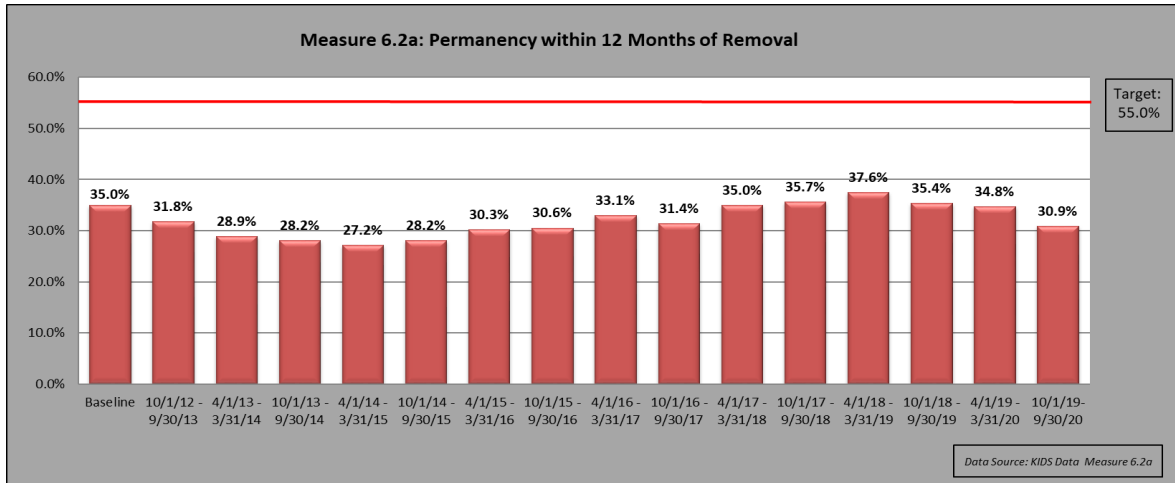
Numerator: The number of children who entered foster care from 4/1/2019 through 9/30/2019 and exited to a permanent setting within 12 months of removal.

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%
10/1/2018 – 9/30/2019	All admissions from	795	2,247	35.4%

	4/1/2018 – 9/30/2018			
4/1/2019 – 3/31/2020	All admissions from 10/1/2018 – 3/31/2019	701	2,017	34.8%
10/1/2019 – 9/30/2020	All admissions from 4/1/2019 – 9/30/2019	669	2,165	30.9%
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 4/1/2018 through 9/30/2018.

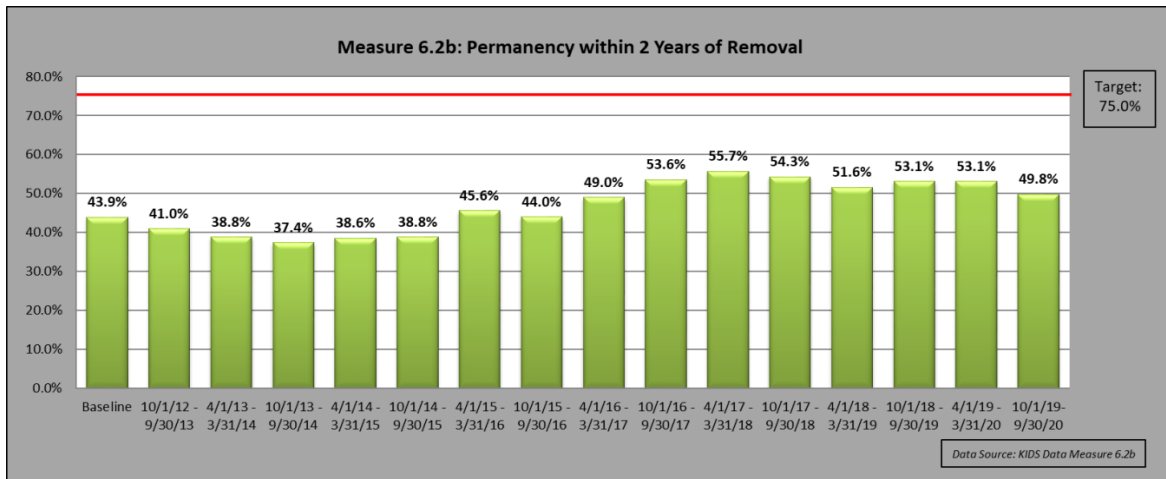
Numerator: The number of children, who entered foster care from 4/1/2018 through 9/30/2018, were removed at least 12 months, and exited to a permanent setting within 24 months of removal.

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%
10/1/2018 – 9/30/2019	All admissions from 4/1/2017 – 9/30/2017	781	1,472	53.1%
4/1/2019 – 3/31/2020	All admissions from 10/1/2017 – 3/31/2018	680	1,281	53.1%
10/1/2019 – 9/30/2020	All admissions from 4/1/2018 – 9/30/2018	715	1,435	49.8%
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 Adoption and Foster Care Analysis Reporting System (AFCARS) files.

Description of Denominator and Numerator for this reporting period

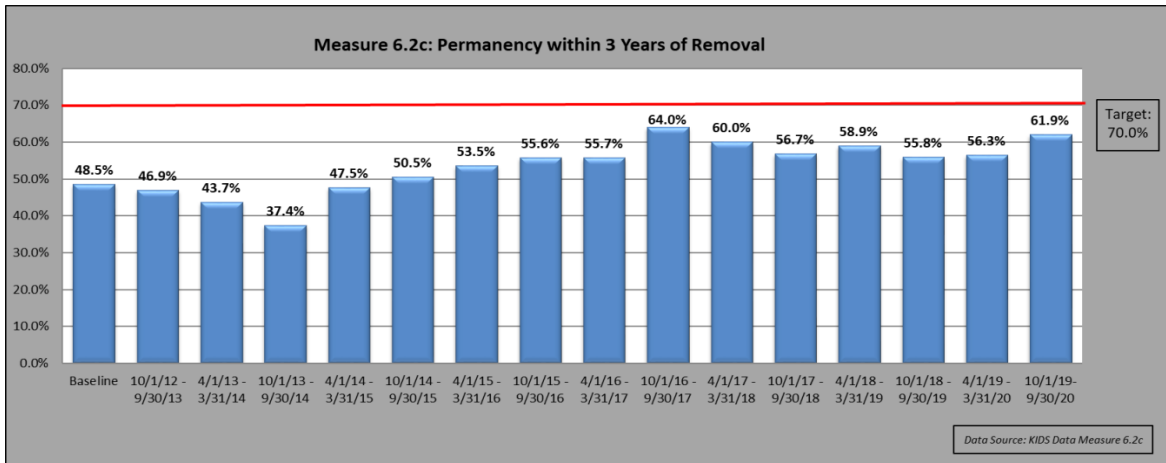
Denominator: All children who entered foster care from 4/1/2017 through 9/30/2017.

Numerator: The number of children, who entered foster care from 4/1/2017 through 9/30/2017, 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%
10/1/2018 – 9/30/2019	All admissions from 4/1/2016 – 9/30/2016	405	726	55.8%
4/1/2019 – 3/31/2020	All admissions from 10/1/2016 – 3/31/2017	405	720	56.3%
10/1/2019 – 9/30/2020	All admissions from 4/1/2017 – 9/30/2017	406	656	61.9%
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 Adoption and Foster Care Analysis Reporting System (AFCARS) files.

Description of Denominator and Numerator for this reporting period

Denominator: All children who entered foster care from 4/1/2016 through 9/30/2016.

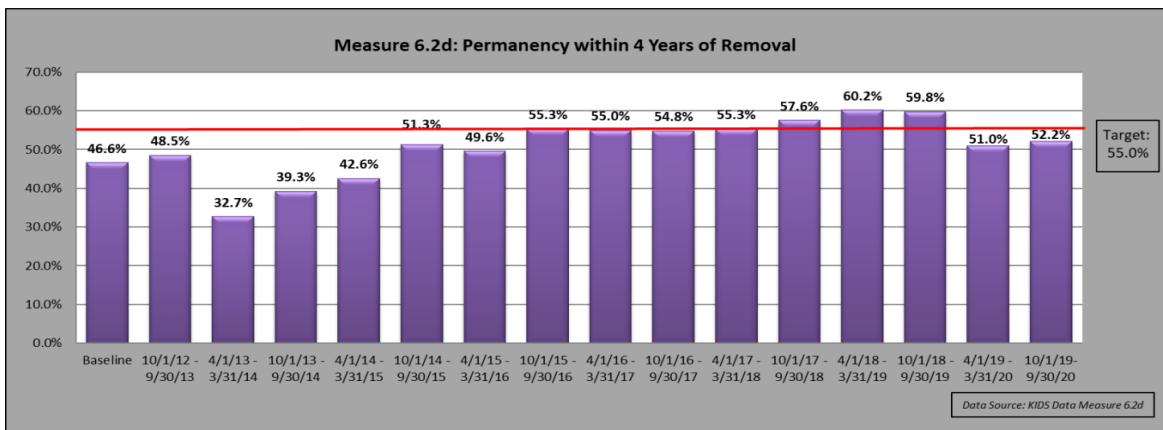
Numerator: The number of children, who entered foster care through 4/1/2016 through 9/30/2016, were removed at least 36 months, and exited to a permanent setting within 48 months of removal.

Trends

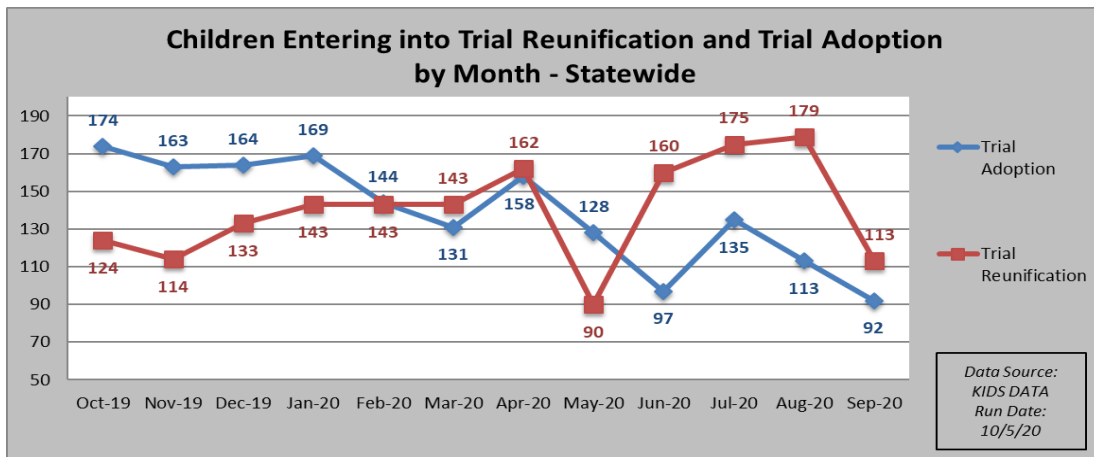
Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2008 – 9/30/2008			46.6%
10/1/2012 – 9/30/2013	All admissions from 4/1/2009 – 9/30/2009	128	264	48.5%
4/1/2013 – 3/31/2014	All admissions from 10/1/2009 – 3/31/2010	91	278	32.7%
10/1/2013 – 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%
10/1/2018 – 9/30/2019	All admissions from 4/1/2015 – 9/30/2015	192	321	59.8%
4/1/2019 – 3/31/2020	All admissions from 10/1/2015 – 3/31/2016	126	247	51.0%
10/1/2019 – 9/30/2020	All admissions from 4/1/2016 – 9/30/2016	156	299	52.2%
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 September 2020. 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 9/30/20 with Goal of Return to Own Home	
Children in Care 90+ Days with Goal of Return to Own Home	3,184
Children with Permanency Safety Consultation	3,022
% with Permanency Safety Consultation	94.9%
<i>Data Source: KIDS Data Y1104; Run Date: 10/1/20</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 Apr 2020 - Sep 2020				
Month of PSC	# of PSC	# of Children with PSC	PSC Recommendation Safe	PSC Recommendation Unsafe
Apr-20	498	915	259	656
May-20	390	700	192	508
Jun-20	393	684	168	516
Jul-20	397	701	169	532
Aug-20	389	698	176	522
Sep-20	368	665	177	488
Total	2435	4363	1141	3222
<i>Data Source: Y1838- Permanency Safety Consultations; Run Date: 5/11/20, 6/9/20, 10/10/20, 8/11/20, 9/11/20, 10/7/20</i>				
<i>**Children in Trial Reunification are excluded from the population.</i>				

Section 2, Table 6.2d-3

	Number of Family Meetings (FM) Held	Unique Count of Children Included in FM's	Total Children Served in Care	% of Children with FM
10/1/19-9/30/20	5963	7113	12,268	57.98%
<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

Data Commentary

During this review period, CWS improved in two of the four measures. Measure 6.2a declined by 3.9 percent. A total of 669 children, 30.9 percent, achieved permanency within the first 12 months in out-of-home care. Performance Measure 6.2b declined 3.3 percent for an overall result of 49.8 percent. Seven hundred and fifteen children achieved permanency within 24 months, which is 35 more children than in the last semi-annual reporting period. Performance in Measure 6.2c increased by 5.6 percent, improving performance to 61.9 percent. This is Measure 6.2c's second consecutive period of positive trending. Measure 6.2d increased by 1.2 percent for an overall percentage of 52.2 percent.

Of the 4,555 children included in all of the 6.2 measures, 1,946 children achieved timely permanency. An additional 401 children achieved permanency after the timeliness target dates. There were 90 children who exited to non-permanent exits, leaving 2,118 children remaining in out-of-home care that did not achieve permanency as of 9/30/2020, out of the original population of 4,555 children. Of those 2,118 children, 200 children were placed in trial reunification and 107 children were in trial adoption for a total of 307 children close to achieving permanency.

As of 9/30/2020, 3,022 children had a Permanency Safety Consultation (PSC) completed out of 3,184 children who were eligible with the goal of return to own home. Forty-two children were excluded from the population without a PSC as they were currently in trial reunification. During the review period of April 2020 to September 2020, a total of 2,435 PSCs were completed and those PSCs included 4,363 children. This number only includes children with a case plan goal of return to own home.

Reporting Period Progress

CWS leadership continues to embrace the belief that parent and family engagement can impact successful outcomes for children through ongoing safety assessments, accurate service delivery, and involving family in case planning. While there are many components that contribute to timely permanency, the inclusion of the child's family in important decision-making is paramount. This key belief has guided recent leadership conversations regarding the expansion of permanency strategies to include a family meeting continuum (FMC) and increased focus on worker/parent contacts. While the strategies themselves speak to the values and beliefs of the child welfare (CW) system, robust plans for tracking and monitoring will drive these strategies to achieve timely outcomes for children. For this reason, CWS leadership made a commitment to ensuring accountability for permanency strategies.

FMC

Family meetings (FMs) continue to occur with each biological family to engage the family on an ongoing basis. Historically, the first FM took place 60-calendar days after removal and at a minimum once every six months thereafter. Additional meetings could be conducted to address changes in family composition, changes in case plan goals, individualized service plan (ISP) development, and reunification planning. In reviewing the time frames that existed as part of instructions to staff, along with conversations with the Co-Neutral team, it was evident that the time frames were not frequent enough to adequately engage families.

In September 2019, Region 4 developed and implemented an FMC pilot in Districts 17 and 27. Enhanced goals were established to improve outcomes for children and families, such as placement stability, reunification rates, and timely permanency. Frequent and purposeful FMs provide a valuable opportunity for family engagement. The FMs in Region 4 were strength-based, safety-focused, and included more completed meetings than the required six-month intervals. For this FMC pilot, FMs also included Child Safety Meetings, Child Placement Meetings, Initial/Case Transfer, or any other FM as requested by CW staff, biological families, service providers, or any other case participants. The pilot also required that the same FM facilitator, a CW specialist designated and trained as an FM facilitator, be assigned to the same family for all their meetings. During the meetings, this same FM facilitator led conversations that elicited more and better information as he or she was familiar with the case and family interactions rather than a newly assigned facilitator trying to both lead a conversation and learn the family's dynamics during the meeting. The FM facilitator is well-versed on the family's journey with CWS and better equipped to facilitate conversations that are solution-focused in nature in order to achieve timelier permanency. Region 4 received positive feedback that communication increased amongst CW staff and the FMs were held more closely within the established meeting timeframes. Considering this FMC pilot in districts 17 and 27 to be successful, Region 4 trained additional CW staff as FM facilitators in its remaining districts in preparation for a region-wide FMC implementation date of 11/1/2020.

Because of the success Region 4 experienced with the FMC, as evidenced by feedback from families and staff, Region 5 began training staff in January 2020 and implemented the FMC in March 2020 using select FM facilitators. During this reporting period, Region 5 expanded to all districts within the region. Using the same facilitator consistently is a core FMC component that requires one FM facilitator be assigned to one family and facilitate each of the different meetings. Upon reviewing the success of the FMC in Region 4, as well as positive feedback from Region 5's FMC trainings, CWS leadership decided to incorporate the FMC in each region across the state, based on the capacity of FM facilitators.

In September 2020, a Quality Assurance (QA) staff member was allocated to assist with the development and implementation planning for the FMC in the other regions. In October 2020, training was created and conducted for FM facilitators, as well as CW staff who might be part of the FMC including Permanency Planning (PP), Child Protective Services, and Foster Care and Adoptions (FC&A). Region 4 FM facilitators and supervisors were asked to share their experience in the virtual FMC trainings with other regions. The guest supervisors were very complimentary of the FMC practice based on their experience as well as the feedback of their staff and families. Guidance was also created for staff to reference, highlighting the value of assigning the same facilitator to each family for all FMC meetings, as it assists CWS in addressing barriers to safe and timely permanency. The guidance also describes the new FMC timeline that includes ISP finalization and the FM at 30-calendar days post-removal and is held every 60-calendar days thereafter for the first 12

months. After the 12th month, FMs occur every 90-calendar days to ensure staffing capacity to facilitate every meeting in the first 12 months. Analysis will be ongoing to determine if meetings should continue to occur every 60 or 90-calendar days after the 12th month.

The FMC will be region-wide in Regions 3, 4, and 5 as they already have a sufficient number of FM facilitators. Due to the lack of FM facilitator capacity, FCM implementation in Regions 1 and 2 is occurring in the following districts at this time:

- Region 1: Districts 2 & 26
- Region 2: Districts 3 & 21B

FMC expansion into other districts in Regions 1 and 2 will be based on facilitator capacity, which will be evaluated on an ongoing basis.

Program staff met with KIDS to discuss creation of an FMC report that permits facilitators to easily identify and track the families due for meetings, as well as those families with overdue meetings. The projected completion date for the report is mid to late summer of 2021; however, until the report is available, facilitators are required to track FMs in an Excel spreadsheet similar to what was used in the Region 4 pilot. The FMC lead gathers the individual regional spreadsheets for tracking purposes to identify trends or areas of the FMC that need to be addressed.

Because the FMC is a fairly new process across the state, a focus among both program and field leadership is necessary to ensure success. The PP program administrator, along with QA staff, are meeting with the FMC lead twice a month to review data, discuss any concerns that arise, and discuss any communication needs. The FM lead is meeting with all facilitators statewide every month so they can share positive practices as well as identify and address any issues that may have come up. There is a standing agenda item on the monthly permanency lead meeting, to ensure the roll out and ongoing practice of FM's is successful. A FMC workgroup including facilitators, program and field leadership will meet every other month to share positive FMC outcomes as well as address any problematic processes related to the FMC in the regions.

Worker/Parent Contacts

To ensure worker/parent contacts are occurring and are as equally valued as worker/child contacts, a target of 95 percent completed contacts per month was established. Accountability plans are in development and will be implemented in February 2021. The plans will consist of CW staff providing explanations to their district director on missed documentation for worker/parent visits. Visits can include visiting face-to-face, attempting to visit the parent, or a contact exception when either the parent's location is unknown or there is a court ordered no contact. Beginning in March 2021, any missed worker/parent visit documentation will require an explanation to the regional director as well as the assistant CWS Director.

The Parent Visit Report is pulled three times a month and sent to CW supervisors, district directors, and regional leadership. Reports are sent the first of each month and mid-month to provide status updates on the percentage of documented contacts. The final report is sent to district and regional leadership after the fifth day of each month, along with visual charts representing statewide, regional, and district level data. Data points displayed include of "% of Cases with all Parents Visited," consisting of cases in which all parents had a completed worker visit documented, and "% of Parents Visited," which consists of parents with a completed worker visit documented. The visual data representation allows for easy viewing of trends across recent months and within regions. Positive recognition of regions or districts with higher worker/parent monthly contact percentages or significant recent improvements are included in the staff communication emails. The Parent Visit Report was updated this review period, so that it now displays a total percentage that reflects all documented parent engagement efforts, including attempted, completed, and parents with documented contact exceptions. Separate percentages are displayed for the categories within the total. Although completed contacts with parents is the desired goal, including attempted contacts in the total percentage allows for monitoring of all efforts to engage a parent. This includes attempts to identify, locate, and visit parents.

Beginning in October 2020, the total percentage was included as one of the visual charts sent in the final monthly report email as it depicts a more accurate representation of efforts to engage with parents. The COVID-19 protocol allowing for modification of face-to-face parent contact remains in place to be used, as needed, due to the pandemic's varying impacts across the state. The report continues to account for COVID-19 protocol allowing for phone or live video contact with parents in lieu of face-to-face. Per COVID-19 protocol, worker/parent visits completed via phone or live video are now counted as a completed visit when deemed necessary, so that CW staff and leadership are able to monitor contacts with parents accurately.

During this review period, the Parent Visit Report was one focus of a communication email series intended to support CW supervisors' and district directors' use of data in supervision and coaching. Information was provided about accessing, interpreting, and utilizing the report in supervision to not only monitor compliance but also inform quality practice. Documentation requirements, including COVID-19 protocols and best practice for quality engagement, were reviewed, as well as discussion tips provided for using the report's data in coaching for quality engagement improvement. In addition to the enhanced focus on completion of worker/parent visits, the overall quality of the visit or conversation with the parent is evaluated through other efforts, such as the Supervisory Framework. The Monthly Case Staffing Guide is one of three tools provided to supervisors to better support their CW specialists through intentional supervision. Contact with the parent can be captured and explored during the case staffing with a CW specialist to ensure thorough conversations are happening to continuously engage the parent and assess safety for the child returning home. The quality of worker/parent contacts can also be explored during PSCs as one of the discussion sections outlined on the form is the person responsible for the child's progress. The section guidance includes engagement with the parents to assess if behavioral changes are occurring and to assess the parent's protective capacities.

PP programs staff continued to provide ongoing training and support to regional, district, and individual requests for clarification of worker/parent contact and documentation requirements. In response to requests for clarification in some documentation areas, PP programs staff collaborated with KIDS to address clearer documentation guidance in accordance with how KIDS pulls data into reports, and potential changes to KIDS screens to ease confusion among CW staff and lessen documentation errors. Discussion was also held surrounding what possibilities exist for adding completion documentation and "Parent Visit Summary" content that contains parent input, which was a critical piece of parent engagement efforts related to the now completed Child and Family Services Program Improvement Plan (PIP) and is a current goal in the OKDHS 2020-2024 Child and Family Services Plan. The worker/parent visit summary node will be added to the KIDS parent contact type in the KIDS release scheduled for August 2021.

Parent Engagement

When the COVID-19 pandemic necessitated the majority of Oklahoma Human Services (OKDHS) employees to work from home, communication gaps were discovered, especially ones CWS had directly with families engaged in the CW system. Prior to the COVID-19 pandemic, information about CW services, programs, and support was relayed to families on an individual level from various CW specialists. Due to the pandemic requirements, a direct line of communication from CWS as a whole to families did not exist. One solution for this identified need was to create a webpage targeted solely for parents and families engaged with CWS. As such, a parent section of the okdhs.org website was developed and launched during this review period. Adding a parent section gave parents and families involved with the CW system one specific place to look for information and answers specifically about them. While much of the website's information was given to the parents previously by various programs, the website offers this information in totality and in a user-friendly, always available format.

Preliminary research for the website's design and layout began in April 2020. Over the course of the next few months, the website's layout and content were developed with help from various CW programs, such as CPS, Family-Centered Services, PP, Indian Child Welfare Act (ICWA) program staff, and from outside community partners. The website's content includes information about each program, frequently asked questions (FAQs), and community resources, such as information and resources for COVID-19. Content for the parent website was submitted to parent partners for review and to ensure the website would meet a parent's needs by answering questions and providing resources when needed.

The parent partners offered overall positive feedback about the website. The team of parent partners indicated the content included on the website was crucial information and access those parents needed. The website was launched partially in August 2020. Some of the content needed to be structured differently to make navigation easier. These changes, as well as other small content changes, were completed in October 2020.

Elevating parents' voices and input remains a valued goal within the parent engagement strategies. As CWS remains committed to improving outcomes and parents' experiences, the need for ongoing feedback from them is critical. In July 2020, conversations began with OKDHS Innovation Services about a Parent Exit Survey. Questions for inclusion in the survey will focus on experiences related to the court, child visitation, caseworker visits, and services. A draft of questions was compiled, shared with Permanency leads for input, and sent back to OKDHS Innovation Services for revisions in January 2021. CWS anticipates the survey will be ready for dissemination to families in March 2021, through email distribution within 30 days of exiting the CW program.

PP programs created and oversees a specific email address inbox for parents to utilize for any questions they may have about their case or child. This email inbox was created as an additional support for permanency specialists, as PP programs collaborates with regional staff when parents send questions to the inbox. Additionally, in August 2020 the first *Parent Newsletter* was launched and was sent out each month thereafter through December 2020. The newsletter features relevant content based on the calendar year. The newsletter is emailed to parents and the delivery system compiles a report of how many email addresses received it or bounced back, as well as how many opened the email and accessed the link to view the newsletter. Parent email addresses are pulled from KIDS and compiled in a newly developed parent contact information report. As of 12/31/2020, 1,112 parents have a valid email address entered in the parent demographic information and 287 do not have a valid email. "No valid email" is still entered in the demographic screen to indicate the CW specialist inquired of the parent and they were not able to or did not wish to provide an email address. The newsletter is emailed to all CW staff to ensure CW specialists are aware of what is communicated to parents and can follow up or answer questions related to the newsletter topics. Reminders are included in the staff's newsletter emails to continue documenting parent email addresses as the newsletter is a valuable tool to engage and communicate with parents. Additionally, the newsletter is also sent to the Court Improvement Project lead who shares the newsletter with judges. This additional dissemination effort ensures all parties who work with a parent are aware of the information communicated to parents to further support parent engagement efforts.

Guardianship Expansion

Trainings were conducted during this reporting period to clarify the overall message and understanding of when a guardianship might be an appropriate permanency option for a child and family, as well as when it is in their best interest. In June 2020, training was completed for FC&A staff. Training for tribal partners, as well as specific FM coordinators in every region, was completed in July 2020. In June 2020, FM coordinators in Regions 3 and 4 received training to support quality discussions about guardianship as a permanency option for Quad 3 children. The trainings were informal and did not consist of a PowerPoint; however, handouts were provided including the updated *Planning for Permanency* pamphlet. In September 2020, a recorded question and answer (Q&A) session was conducted with the president of the Foster Care Association of Oklahoma (FCAO) and PP program staff. The session consisted of a discussion regarding FAQs that typically arise when a family is considering guardianship versus adoption. The recorded session was uploaded to the FCAO Facebook page, which has approximately 7,000 members. As a result of the video's availability to resource parents, several inquiries were sent to program staff by resource parents asking for more information.

Due to the success of the FCAO recorded video, a similar guardianship training was pre-recorded in December 2020 as a FAQ session and will be made available to all regional CW staff through the Learning Management System (LMS). The FAQ session included the Region 4 safety analyst supervisor in an effort to gain insight and provide a field perspective for answering questions that typically arise when considering guardianship. The recorded session will be uploaded to LMS and is projected to be available to staff by 3/1/2021. The course objective is for staff to be better equipped and able to articulate to resource parents, court partners, and any other party involved with assigned cases, a general overview of guardianship benefits. The guardianship liaison continues to answer emails and questions as they arise from foster

parents and CW field staff as to when guardianship is a good permanency option, or what steps are needed to achieve permanency through guardianship. The guardianship liaison also continues to attend FMs when available, or conducts a staffing with the coordinators when they have questions prior to or after their meetings. The guardianship liaison also attends the supportive transfer of learning (TOL) sessions conducted by the PSC coordinator.

Collaboration with FC&A program staff led to the creation of a *Guardianship Information Tip Sheet* for FC&A field staff. The tip sheet included details and guidance for FC&A staff on when it would be appropriate to discuss and consider guardianship as a permanency option for children and youth. The tip sheet was emailed to all FC&A staff in October 2020. The tip sheet was created by FC&A program staff and was specific to the role of an Adoption specialist when discussing the case plan during an adoption criteria staffing. The tip sheet was prompted in part by the communication emails sent to all CW staff including PP and FC&A regarding an emphasis on guardianships. Once the guardianship FAQ training video discussed previously is made available to all CW staff, a communication email will be sent. At that time, all tip sheets and supportive resources/tools for guardianships created in calendar year 2020 will be included in the email for all CW staff.

Additionally, two mandatory guardianship questions will be added to KIDS within the adoption criteria staffing section under the node Connections/Relatives. The first question will inquire if guardianship was discussed with the family and their connections. CW staff entering the adoption criteria staffing contact will be expected to select a radio button of yes or no. Another follow-up question allows for CW staff to provide additional information about any discussions and/or meetings where guardianship was considered. This section is mandatory regardless if the previous question is answered yes or no. This addition to the adoption criteria staffing contacts is expected to be released in May 2021.

Guardianship information was distributed to all kinship resource homes in June 2020 as a resource reminder. All Resource specialists had a discussion with their kinship families about guardianship during their monthly contact. Additionally, FC&A programs had a discussion with FC&A supervisors at the statewide supervisor meeting held on 9/29/2020 about guardianship expansion efforts and exploring guardianship as a possibility during adoption criteria staffings, as well as adoption quad staffings.

In June 2020, FM coordinators contacted CW staff, parents, and resource families to schedule FMs to discuss if guardianship would be an appropriate permanency option for Quad 3 children when an FM was not held in the last six months. This effort was the result of discussions with the Adoption Timeliness Accountability Team (ATAT) leads and the Adoption Transition Unit (ATU) surrounding Quad 3 children and youth that are not legally-free, but residing in an identified kinship adoptive home where guardianship could be considered as a possible permanency option. Overall, guardianship requests continued to increase and average approximately eight requests per month. However, in December 2020 the number of requests dropped, which may have been due to the holidays. This decline in the number of requests is monitored by the guardianship liaison for trends to identify if additional support or guidance is needed. Following the FM/Quad 3 effort, 30 families decided to pursue guardianship. Data was recently pulled for Quad 3 children and youth. The recent data was compared to previous data to determine what additional children and youth might be a good candidate for guardianship. This data will be shared with the guardianship and permanency leads in January 2021 to begin discussions on how to proceed with this additional group of children as the targeted focus on Quad 3 children yielded positive results for many families.

There have been intermittent court closures and a large number of continuances due to exposure or positive cases of COVID-19. Additional delays occurred for more recent guardianship requests as the courts are prioritizing cases that did not have hearings when they were shut down at the beginning of the pandemic. While the lack of court hearings caused delay in guardianship finalizations for this reporting period, the number of guardianship exits for 6.2a increased from 34 to 44 and for 6.2b guardianship exits increased from 27 to 55 compared to the last semi-annual data. Feedback from the field indicates more families are choosing to pursue a guardianship rather than an adoption due to the court delays for jury trials to terminate parental rights, as those typically take longer than achieving guardianship finalization.

Conversations with the permanency and guardianship leads are ongoing to identify and discuss any barriers to children achieving permanency through guardianship when it is an appropriate permanency option. The log to track supported guardianship requests is continually updated as efforts to expand guardianships increased; this process also expanded to better monitor children who exit care due to a supported guardianship. Not all children who are counted in the exit to guardianship have supported guardianships in place. Supported guardianships require approval from the guardianship liaison who reviews the requests for funding and exceptions depending on the child's age and funding type. Supported guardianships logs are then shared with both guardianship and permanency leads and discussed during the monthly 6.2 conference calls.

Permanency Safety Consultations

PSCs remain as a strategy to impact outcomes in Pinnacle Plan Measures 6.2a, b, c, and d. The set time frame of an initial 90-calendar day PSC permits CWS to fully assess the family, in order to identify and refer to the needed services, and to also allow time for parents to initiate services. Within the first 90-calendar days following removal, the family will have participated in a case transfer meeting, initial meeting, 30-calendar day FM, met with the PP specialist to complete an initial Assessment of Child Safety (AOCS) and be referred to services. The time frame also allows the specialist to have more intentional opportunities to engage parents prior to completing the initial PSC, as well as time to obtain more information through the ongoing AOCS to present to the PSC team. Consideration of the PSC due dates was taken into account when developing the FMC dates. Best practice would be to conduct a PSC following an FM so that the most current information obtained from the meeting can be shared with the group during the PSC safety recommendation discussion. Alternatively, safety recommendations determined at a PSC can also be shared with the family during FMs to assist in case planning with the family.

Due to the COVID-19 pandemic, beginning in March 2020, guidance was given to field CW staff to conduct PSCs virtually. PSCs remained virtual due to the COVID-19 pandemic throughout this review period. Although the PSC Coordinator's role during site visits remained focused on providing, as needed, help guiding the conversation surrounding safety threat identification, barriers to permanency, and identifying action steps to achieve permanency, the complexities presented by the COVID-19 pandemic added new context and challenges to these conversations. The virtual format still allows team debriefings to occur following the PSCs to discuss practice strengths and areas for improvement observed during site visits. Some districts in particular are creatively utilizing virtual platforms to maintain quality PSCs and model fidelity. For example, using the "share screen" feature to visually provide safety threshold or other staffing information, uploading documents into virtual platform for ease of access and review by the group, and blending in person and virtual participation. Review team members are able to share observations from groups successfully adjusting to virtual PSCs with groups who are struggling to hold quality PSCs virtually. Some groups experienced improvement in certain areas of quality despite the technological adjustments needed. For example, in some districts their group participation improved because the facilitator individually asks each group member for perspective and input, which helps overcome any barrier to offer spontaneous conversation that virtual group meetings often create.

Beginning in October 2020, the PSC Coordinator focused on one district in all five regions region for three-month intervals, facilitating TOL sessions with CW supervisors as an extension of the PSC Fidelity Review process. The district data provided to regional leadership in August 2020 was used to inform decision-making regarding which districts may benefit from additional support. The goal of these district-level supportive TOLs is to provide additional assistance connecting ongoing and enhanced strategies and practice areas by using available tools from the Permanency dashboard, such as coaching strategies within the Supervisory Framework. PSCs serve as the springboard for these TOLs, offering the PSC Coordinator opportunities to observe any practice trends apparent through the case staffing to incorporate into discussion during TOLs. The TOLs are intended to be individualized and responsive to the district's strengths and needs as identified by district level data, practice trends observed in PSCs, or requested by the CW district director or supervisors. The TOLs' focus includes PSC specific practice, gaining insight from district level data and outcomes, and a combination of strategies related to permanency, such as maltreatment in care, quality parent engagement, permanency rates, and court relationships. The selected topics are broad enough to allow for variation between districts while still allowing for discussion of how the activities within each are intertwined and can be impacted through the use of the same tools or

strategies, such as PSCs or the Supervisory Framework. Discussion surrounding coaching techniques within each topic incorporate suggestions shared by group participants and programs staff leading the TOLs. Specific areas of focus are tailored to each district, identified through a combination of group input, observations of practice during PSCs, and district level data. Following the completion of the set three-month interval, the district director and PSC Coordinator discuss progression or the supervisor group's learning and achievement of set goals to determine if additional months are needed. While increasing permanency within 12 months remains a priority for CWS leadership, meeting with districts in three-month intervals permits the group to identify a performance baseline, set district goals for practice improvement, and measure performance at the completion of 90-calendar days. Conversations are still underway about a strategy dashboard as a management tool; however, many tools and dashboards currently exist. Reviewing the permanency dashboard with permanency supervisors during the supportive TOLs is instrumental in assisting CW field staff with increasing usage of existing management tools.

Fidelity Reviews continue to be completed by reviewers for each case that receives a PSC in which the reviewer is able to participate. Due to the complexities of completing a Fidelity Review virtually, only the daily summary was entered in Qualtrics as trying to answer the questions could have shown misrepresentation for district performance. QA staff and the PSC Coordinator specifically discussed changes to the PSC form to capture specific topics, such as guardianship, parent engagement, and more specific and measureable action steps. Qualtrics summaries were compiled for each region dating back to the first reviews entered in Qualtrics and shared with the regional directors during this reporting period.

The revised PSC form and Action Item Guidance was distributed to field staff in July 2020 and attached to subsequent monthly PSC update emails included in this reporting period. The form was updated to guide more specific discussion related to quality parent engagement and parent-child visitation; the possibility of guardianship or concurrent case plan goal; increased utilization of the safety threshold in safety recommendation; and increased accountability and intentionality of action items. These changes were made upon reflection and review of PSC practice observations and to coincide with ongoing and enhanced strategies aimed at affecting safe and timely permanency. With the complexities of completing PSCs virtually, quality action steps continue to be vital to the PSC process as those action steps support reunification planning. Changes made to the PSC form, as well as the action step guidance, will be added to the *PSC Guidebook* and emailed to staff upon completion.

Support continues to be provided to CW district directors and supervisors through a monthly email with attached reports of upcoming and overdue PSCs. The PSC Coordinator filters a report at the beginning of each month to identify which children and youth are due for a PSC in the coming month or overdue for a PSC. Beginning in July 2020, a "Practice Highlight" topic was added to these monthly emails. The Practice Highlight provides best practice reminders and tips for incorporating the highlight into existing practice. Support is also provided through monthly virtual meetings with the regional permanency leads. The call's focus is to provide updates to the leads related to permanency efforts and for them to share with their leadership teams. The leads also provide feedback on the strategies, which is taken into consideration when making any changes or improvements to permanency efforts.

Court Improvement Project (CIP)

In June 2020, PP programs shared the results of the CIP with the statewide CWS leadership team. The district director from the large jurisdiction who participated in the project shared with the group their district's individual CIP outcomes and the overall value of project involvement. The judicial dashboards, an internal and external WebFOCUS data report, provide data on time to adjudication, first placement hearing, time to permanency exit, and termination of parental rights. The judicial dashboards can provide performance data for each jurisdiction. CWS worked with an external consultant, who was previously a deprived judge in Oklahoma, to modify and adjust the dashboards to be user-friendly to court officials. Both dashboards are now active and available internally and externally.

During this reporting period, a communications email was sent to court partners regarding the dashboard's functions and how to utilize it to look at their district's outcomes. District directors were asked to reach out to their district judges about

identifying areas they can work on together to improve permanency outcomes and continue to facilitate positive court relationships. In an effort to provide support for district directors and facilitating purposeful conversations with court partners, **Judicial Talking Points** were developed that focused on the judicial dashboard and how it can be used to target efforts to improve child outcomes. Part of the guidance also included action steps that can be replicated to successfully improve outcomes based on the CIP results in the small, medium, and large jurisdictions. Another piece of the guidance includes the reiteration of safety language, with explanation of the safety language used when CWS makes recommendations about changes in visitation and reunification. The state PP and CIP leads continue meeting quarterly with the CIP multi-disciplinary team to build relationships, and work with external partners on ways to improve systemic barriers to permanency, including the COVID-19 pandemic's effect on timely court hearings which directly impacted timely permanency.

Family Time

For any state to make advancements in best practices to improve a family's experience with an agency, continued self-evaluation and enhancement of current practices are vital. Parent engagement through frequent and intentional parent/child visitation also remains an identified key component to timely permanency. Region 5 was instrumental in assessing the current practice of visitation planning and made strides in revamping materials, content, and culture related to a parent visiting their child. From research and consultation with other states, Region 5 decided to shift from visitation and pilot Family Time. As a result of conversations held with the states of Texas and Georgia including a deprived judge, a Region 5 Family Time workgroup created a process to help CW staff determine if unsupervised Family Time is appropriate at the beginning of a case rather than supervised time. The workgroup consisted of CW supervisors, CW specialists, QA staff, with support from PP programs and CWS leadership. Included in the training is a tool, **Family Time Best Practice Guide**, outlining different levels of supervision explained in terms that encourage the specialist to critically consider the safety threat preventing the case from progressing forward to unsupervised Family Time. The tool is also designed to emphasize the importance of utilizing natural family connections. Training occurred virtually; completed first in Tulsa County and then expanded to the rural areas of Region 5. Region 5 completed a series of Family Time trainings that the workgroup was responsible for leading. The trainings continued during this reporting period with the final training occurring 1/13/2021.

The FMC and Family Time planning go hand-in-hand with engaging parents and families. Because of this overlap of efforts, Regions 1 through 4 began Family Time implementation planning. In December 2020, each region was asked to identify who their Family Time champions or workgroups would be. Those two teams will attend the final Region 5 training in January 2021. A follow-up meeting will be held where questions can be asked by the newly formed regional workgroups and answered by the Region 5 team. The regions will be responsible for training their own staff on Family Time, as having field staff train peers was instrumental in Region 5's success. Other regional trainings are projected to be completed in the spring of 2021. Revisions were also made to the current visitation form to be included in the Family Time pilot. The revised **Family Time Plan Draft** tool is more user-friendly and engaging for families. The tool encourages safety conversations to occur between CW staff and the family with a section for identifying the current safety threat and how it meets the threshold. This tool can be reviewed and updated at FMs in addition to worker visits, as FMs will be held more frequently as part of the FMC. Since staff are asked to review safety threats and application of the threshold during PSCs, CW staff will be better equipped and prepared to review the safety threats/threshold with the family during Family Time planning. Safety review with the family assists in accurate safety versus risk identification, action planning to address any safety threats listed and in turn lead to better outcomes for children and families.

Analyzing Permanency Outcomes

CWS leadership participated in many conversations with the Co-Neutrals regarding continued exploration and understanding of the children and youth who are not exiting to permanency in a timely manner, as well as those children and youth who have exited to permanency timely for each reporting period. Following the data pull for the August 2020 Semi-Annual submission, it was determined more detailed information was needed to assist in the ongoing development and expansion of the 6.2 strategies. The initial goal was to conduct a qualitative analysis of cases, in which the children and youth were reunified within 12-15 months of being out-of-home, to determine what factors, if any, may have

contributed to the delay in not meeting the 12-month permanency goal. Once this review began, it became apparent that there was a need to additionally review children and youth who did meet the 12-month permanency goal and were returned home within 12 months. The cases that met the 12-month goal are referred to as the 6.2a cohort, and the cases that did not are referred to as the 6.2b cohort.

From the August 2020 Semi-Annual, 120 children and youth achieved permanency in the 6.2b measure. From the data, it is evident that the majority of the 120 children and youth who did not achieve in the 6.2a measure, but did in 6.2b exited to adoption. It should also be noted that of the 16 children and youth who exited to trial reunification in the 6.2b measure, 12 children and youth exited in 13 months, which is slightly outside the 6.2a metric. Cases for those 12 children and youth were part of the analysis to determine what, if any, barriers prevented reunification within 12 months. Originally, 501 children met the 6.2a criteria. After filtering this down by length of time in care and ensuring statewide performance was captured, a final selection of 58 children and youth were analyzed. Full details and conclusion of the analysis can be found in the complete report that was submitted to the Co-Neutrals in September 2020. The case analysis assisted CWS leadership in permanency strategic planning and decision-making related to targeted permanency efforts for CWS including the FMC expansion.

For this reporting period, 6.2a saw a decrease of 3.9 percent resulting in 30.9 percent of children and youth exited to permanency within 12 months. This is the lowest the measure has been in the last eight reporting periods. In an effort to prevent future decline in this measure and to achieve substantial positive trending, the CWS leadership recognizes the importance of dissecting permanency outcome data to identify trends or factors that may have caused the steep decline. An analysis of exits for this group of children and youth will be provided to the Co-Neutrals in February 2021. CWS will begin implementing additional targeted efforts in February 2021 with the districts underperforming in this area through scheduled calls to track efforts, such as worker/parent contacts, FMs, PCSs, number of worker changes, participation in initial meetings or subsequent initial meetings, and other data as deemed appropriate to ensure all efforts are focused on achieving timely permanency. To do this, reports of identified children and youth will be sent monthly to regional leadership that assist in tracking efforts to engage families early on following removal of the child or youth.

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 Adoption and Foster Care Analysis Reporting System (AFCARS) data.

Description of Denominator and Numerator for this reporting period

Denominator: All children who exited foster care from 10/1/2018 through 9/30/2019.

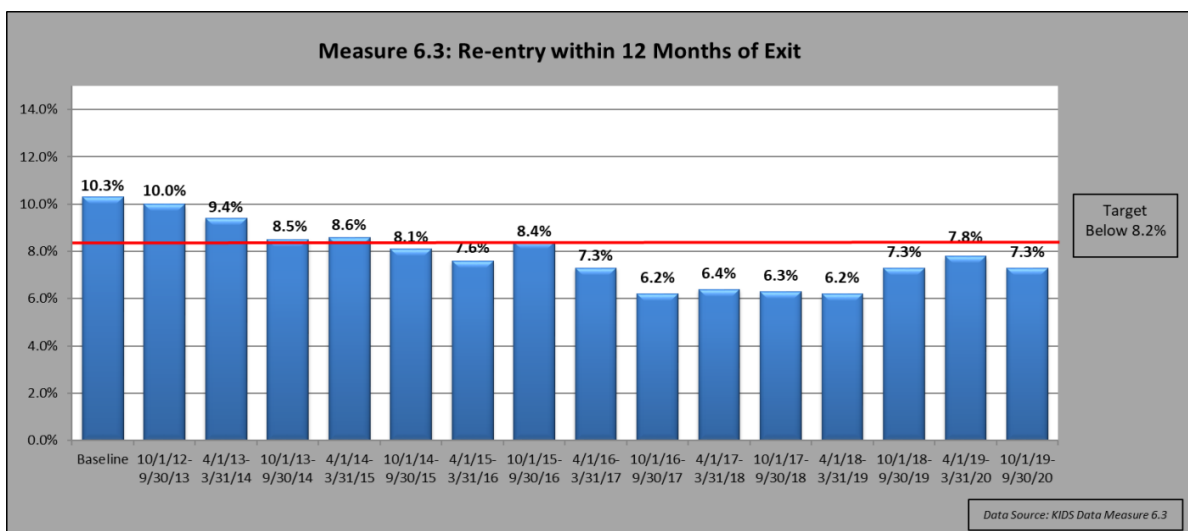
Numerator: All children who exited foster care from 10/1/2018 through 9/30/2019 and re-entered care within one year of exit.

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	2,622	6.3%
4/1/2018 – 3/31/2019	All exits from 4/1/2017 - 3/31/2018	155	2,482	6.2%
10/1/2018 – 9/30/2019	All exits from 10/1/2017 - 9/30/2018	181	2,486	7.3%
4/1/2019 – 3/31/2020	All exits from 4/1/2018 - 3/31/2019	201	2,576	7.8%
10/1/2019 – 9/30/2020	All exits from 10/1/2018 - 9/30/2019	169	2,307	7.3%
Target				8.2%

Section 2, Table 6.3-1



Section 2, Graph 6.3-1

Data Commentary

The number of children re-entering out-of-home care within a 12-month period is now at 7.3 percent, which remains below the set target of 8.2 percent. The measure is 3.0 percent lower than the original baseline and exceeds the target by 0.9 percent.

Reporting Period Progress

Permanency Safety Consultations (PSCs) continue to be the primary strategy utilized to maintain reduced re-entry rates. PSCs with a safe recommendation continue to 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. Quality action steps further support the child welfare specialist in adequately assessing safety to determine if any safety threats are still present. PSCs remain a group safety discussion with the district director present to support more quality decision-making, thus impacting re-entry into care. Services such as Comprehensive Home-Based Services, Intercept, and Systems of Care continue to be utilized to support families during trial reunification.

During this reporting period, in November 2020, the Family Meeting Continuum (FMC) was implemented in two districts each in Regions 1 and 2 and in all districts of Regions 3, 4, and 5. The FMC has two main purposes: more frequent and intentional family meetings and the use of the same facilitator at each meeting for the duration of the case. The FMC will further support lower rates of re-entry through successful identification of needed services for families with quality frequent quality meetings and facilitator consistency.

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 Adoption and Foster Care Analysis Reporting System (AFCARS) for both mother and father.

Description of Denominator and Numerator for this reporting period

Denominator: All children in care who turned 16 from 10/1/2017 through 9/30/2018 and were legally free at the time they turned 16.

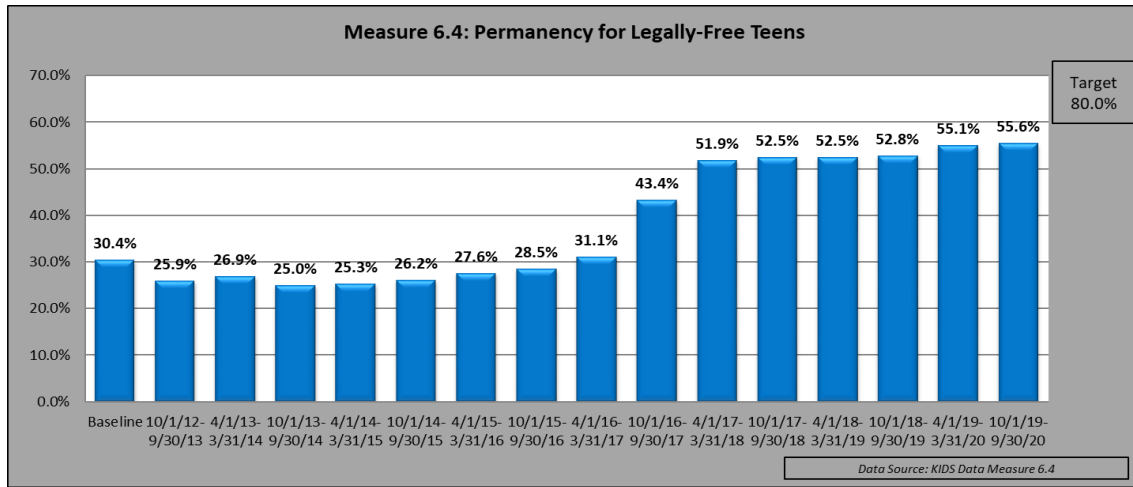
Numerator: The number of children, who turned 16 from 10/1/2017 through 9/30/2018, were legally free at the time they turned 16, and reached permanency prior to their 18th birthday.

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%
10/1/2018 – 9/30/2019	All children in care who turned 16 from 10/1/2016 - 9/30/2017 and were legally free at the time they turned 16.	66	125	52.8%
4/1/2019 – 3/31/2020	All children in care who turned 16 from 4/1/2017 - 3/31/2018 and were legally free at the time they turned 16.	65	118	55.1%
10/1/2019 – 9/30/2020	All children in care who turned 16 from 10/1/2017 - 9/30/2018 and were legally free at the time they turned 16.	60	108	55.6%
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	12	30.0%	20	36.2%	14	29.5%	8	30.8%	19	30.3%	73
REUNIFICATION	3		1		4		4		1		13
GUARDIANSHIP	3	18.0%	5	8.6%	5	9.8%	4	10.3%	8	12.1%	30
CHILD AGED OUT / OTHER	8		1		1		1		1		2
OTHER EXITS	1	52.0%	32	55.2%	37	60.7%	23	59.0%	38	57.6%	156
Still in Care	26		32		37		23		38		156
TOTAL	50		58		61		39		66		274

Data Source: Totals include Measure 6.4 for reporting periods ending 3/21/21, 9/30/21, 3/31/22 and 9/30/22. Run Date: 10/7/2020

Section 2, Table 6.4-2

Data Commentary

From 10/1/2017 through 9/30/2018, a total of 108 legally-free youth turned 16 years of age. Of these youth, 60 or 55.6 percent achieved permanency and 48 or 44.4 percent exited care prior to reaching permanency.

Achieved Permanency:

- 54 youth were adopted (50.0%);
- 3 youth were placed in guardianship (2.8%); and
- 3 youth were placed in custody to relative (2.8%).

Exited Care Prior to Reaching Permanency:

- 48 youth exited care through emancipation/aging out (44.4%).

This reporting period ended with 55.6 percent of legally-free 16-17 year old young people achieving legal permanency, as seen in Section 2, Graph 6.4-1. This is an increase of 0.5 percent, 25.2 percent above the baseline and the highest of all reporting periods. It should be noted 154 young people aged out of care for State Fiscal Year (SFY) 20, which ended 6/30/2020. This number is the lowest it has been in the past six years: SFY 19 – 169; SFY 18 – 214; SFY 17 – 255; SFY 16 – 273; and SFY 15 – 311. Youth missing from care (AWOL), youth with Office of Juvenile Affairs involvement, or youth needing specialized placements continue to impact permanency rates for legally-free teens.

Section 2, Table 6.4-2 captures the next four cohorts for Measure 6.4. The data includes children that would be in the periods ending March and September 2021, as well as March and September 2022. This data will be used to assist in monitoring youth remaining in out-of-home care as youth are more likely to achieve permanency in the first year of this measure, at age 16, than during the second year, at age 17.

Reporting Period Progress

Statewide efforts continue to support Pinnacle Plan Measure 6.4, which aims to increase the number of legally-free youth in care ages 16 through 17 years old who exit care to legal permanency before their 18th birthday.

Continued statewide efforts for legally-free teens.

- Staffing of any youth age 13 and older with the district director when there is a potential for teen coming into custody.
- Multi-level permanency staffing to include district director to begin at age 15 and continue on at 15.5, 16, 16.5, 17, 17 and 3 months, 17 and 6 months, and 17 and 9 months. A monthly report was created to identify the young people that are due a monthly staffing and can be filtered down by each region and district director. All tracking tools for this strategy remain the same.
- Intentional permanency staffings occur monthly between primary child welfare (CW) specialist and supervisor with a focus on legal and relational permanency.

Oklahoma Human Services (OKDHS) continues to demonstrate commitment to build its statewide Adoption Transition Unit (ATU) structure and team of caseworkers and supervisors dedicated to achieving permanency for children with no identified permanent homes. In addition to building a strong ATU team, the Dave Thomas Foundation for Adoption collaborated and shared resources with OKDHS to implement the foundation's Wendy's Wonderful Kids (WWK) evidence-based adoption model. WWK focuses on completing diligent searches and case record reviews, network building, child-specific recruitment planning, building a strong relationship with the child, and assessing adoption readiness for both the child and any identified families. An independent five-year evaluation by Child Trends of this child-focused recruitment model showed that children served under the program are 1.7 times more likely to be adopted than those not included in the model but for whom permanency efforts were a challenge. Notably, the foundation reported that the model's evaluation showed, "its impact on adoption is strongest among older youth, and children with mental health disorders – groups that have traditionally been the least likely to be adopted. Using this evidence-based program, these children are three times more likely to be adopted." Near the end of the six-month period of July through December 2020, ATU workers were providing permanency efforts under the WWK model for 530 children. In January 2021, of the 274 youth in the future 6.4 cohorts, 118 of the youth had an ATU assignment.

The permanency expeditors (PEs) continue to support 6.4 efforts by assisting district directors with the multi-level staffing to ensure they take place and are documented at each critical point starting at age 15 through exiting care to legal permanency or until turning 18 years of age. The PEs still work with youth with the goal of guardianship and young people with more difficult circumstances as deemed appropriate by the regional lead. Child Welfare Services (CWS) recognizes the value of the efforts made by the PEs over the last several years in reducing use of the planned alternative permanent placement (PAPP) case plan goal (CPG), as well as the role they played in messaging the importance of legal and relational permanency to field staff. The PEs track and report their efforts with the Monthly PE Tracking Tool. PEs received training on all Oklahoma Successful Adulthood (OKSA) programming and funding to ensure they can provide information on transitioning services for young people age 14-21 to support their permanency plan. During the next reporting period, CWS leadership will further evaluate the PEs' role and work, in addition to the efforts and resources dedicated to improve relational and permanency outcomes in 6.4.

Beginning in August 2020, required higher leadership level reviews are expected for denied kinship placements or previously failed kinship placements for youth 16 and 17 years of age. If a kinship placement for youth 16 years of age or older is denied, it is always elevated to the next level for review. The district director and field manager review the denial. When the decision is made at that level to deny the kinship placement, the regional deputy and Foster Care and Adoptions (FC&A) deputy director reviews and if denial is still recommended, the assistant CWS director reviews the denial. The purpose is to consider the youth's placement preferences and to ensure all efforts to support the kin were identified and provided. This review happens immediately if the youth is in immediate need of placement. The youth's specific case and

circumstances are always considered in the kinship assessment process, especially in regards to the youth's functioning and vulnerability, while ensuring that efforts and supports to mitigate risks are evaluated to work toward kinship placement and permanency for older youth. This strategy applies to all youth ages 16 and 17, not only those identified as the 6.4 cohort; therefore, this effort is aimed at increasing the relational and legal permanency rates for all older youth and decreasing the rate of all children aging out of foster care, which demonstrates OKDHS' commitment to be self-correcting.

Beginning January 2021, the multi-level staffing for all 17 year olds in the 6.4 cohort will be staffed by the regional multi-disciplinary team (MDT) quarterly until the youth exits care. The MDT facilitator will lead the multi-level staffing, which will address barriers to achieving permanency and identify steps needed to ensure the youth is on a progressive track to legal and relational permanency and adulthood. Examples of MDT core team members include Permanency Planning (PP) programs, Resource specialist, Foster Care Recruitment, Adoption Transition Unit (ATU), Specialized Placements and Partnership Unit, OKSA, Resource Family Partner Liaison, Education Services and Developmental Disabilities Program, CW Nurse, Mental Health Consultant, therapeutic foster care/RFP Partner, OKDHS Clinical Team, Oklahoma Health Care Authority, Tribal Liaison, Continuum of Care (COC)/Enhanced Foster Care, and Community Partnerships. The youth's PP and ATU specialists, supervisors, and district director all remain as required participants. A contact purpose of Multi-level Staffing will be added to KIDS, with a tentative release date of February 2021. Then, a WebFOCUS report will be created to track completion of all multi-level staffings, which is aimed at improving accountability.

Beginning January 2021, the PAPP CPG for any youth ages 16 and 17 will be approved by the supervisor and district director. For 16 year olds, the regional director and assistant CWS director must also give approval. Youth with a current PAPP goal prior to January 2021 will be excluded from the enhanced leadership approval. This new practice and expectation further heighten the importance to exhaust reasonable efforts to achieve permanency for every teen and continue to shift agency culture and practice.

By March 2021, OKDHS will develop and implement a quality assurance process to review a sample of cases involving youth in the 6.4 cohort. The focus will be on legal and relational permanency efforts and OKSA efforts. OKDHS will determine how to embed trends identified from the case reviews into transfer of learning.

The OKSA program is currently restructuring how it provides supports to the field to ensure transition planning for teens, starting at age 14, and include the participation of supportive adults in the young person's life and permanent connections. CW staff will be able to simultaneously include youth engagement to help young people achieve their permanency plan goals. Ensuring relational permanency is addressed early and often positively affects legal permanency rates. OKDHS Innovation Services is developing a platform for OKSA that will also include an accountability tool to ensure tasks are completed timely. The target to begin using the platform is February 2021. OKSA will train all OKSA County Coordinators and the OKSA Transition Coordinator, who will assist in mentoring specialists in the field.

The OKSA program is actively promoting youth engagement at all levels of OKDHS' decision-making process to include the youth voice in advocating for programs and services that support young people in foster care. The OKSA program is working with its Oklahoma Foster Youth Advocates to identify young people in and out of foster care who would like to be part of meetings and focus groups aimed at improving the foster care experience for young people and their families. These young people are mentored and prepared to "Present with Purpose" and are compensated monetarily for their time. Improving the foster care experience for teens in the areas of behavioral health, placement stability, and peer support can potentially improve legal permanency outcomes for teens in OKDHS custody.

Several OKSA-supported projects connect young people to the efforts and include youth voice.

- OKSA is actively participating in the CWS COC work to improve the capacity of providers and service support array that provide behavioral health services to young people. A focus group with young people was held in November 2020 surrounding mental/behavioral services the young people participated in while in care and is an opportunity for them to give feedback regarding their experiences with these services.

- OKSA identified several young people to tell their story in support of National Adoption month in November 2020. A social media video was created to provide to the Children's Bureau to showcase in November. OKSA and Recruitment are in the initial planning to create a teen adoption video to utilize as a tool to recruit foster families willing to serve teens. Currently, a "Children in Foster Care" video is available on the OK Fosters website, which allows families to hear from teens directly about their experience and needs in the CWS system.
- OKSA is providing young people for focus groups in partnership with the Center for States to address foster home placement support and explore foster parent mentorship for foster parents willing to take teens. Young people will also participate to provide youth a voice.

The statewide Permanency for Teens face-to-face training is converting into an online training on the Learning Management System and is expected to be finalized by March 2021. The training will be mandatory for CW specialists with a teen on their caseload ages 13 and older and will include topics, such as the importance of legal and relational permanency for teens; how to engage teens in permanency conversations and their own search for permanency; how to review a case record with focused efforts towards permanency; and myth-busting about the independent living benefits a youth will be eligible for when he or she achieves legal permanency before the age of 18. Additionally, the OKSA program is exploring how to utilize virtual connectivity to provide training to staff, peer-to-peer mentoring, and support on a virtual platform to not only improve legal and relational permanency for teens, but overall information as well. The OKSA program will continue to provide technical assistance to staff regarding benefits a young person can receive upon achieving legal permanency. The overall messaging of the importance of legal and relational permanency for legally-free teens will continue to be infused into program messaging.

House Bill 233 was amended during the 2020 legislative session to allow Chafee funds to be utilized for young people ages 16-17 years old that were reunified. This proposal is one objective of the 2020-2024 Child and Family Services Plan and has the potential to increase legal permanency rates when passed. However, due to the COVID-19 pandemic, the legislative season stopped abruptly. The bill's subject matter will most likely be revisited in the 2021 legislative season.

Conclusion

It will be important to work closely with the court system to ensure the COVID-19 pandemic does not negatively impact the timeliness of reunifications, adoptions, and guardianships, not only for Strategy 6.4, but with the overall work CWS does with children and families. As stated, OKDHS' performance in 6.4 is the highest since the reform. OKDHS significantly decreased the number of youth with the PAPP CPG, which signals a cultural and practice shift with a heightened focus on relational and legal permanency for teens. OKDHS demonstrated a commitment to dedicate resources to improve permanency outcomes, which includes building a robust ATU team; implementation of evidence-based model, WWK; PE roles; and higher leadership involvement in the removal of a teen and permanency efforts for a teen.

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 Adoption and Foster Care Analysis Reporting System (AFCARS) for both mother and father. This measure is federal metric C 2.5.

Description of Denominator and Numerator for this reporting period

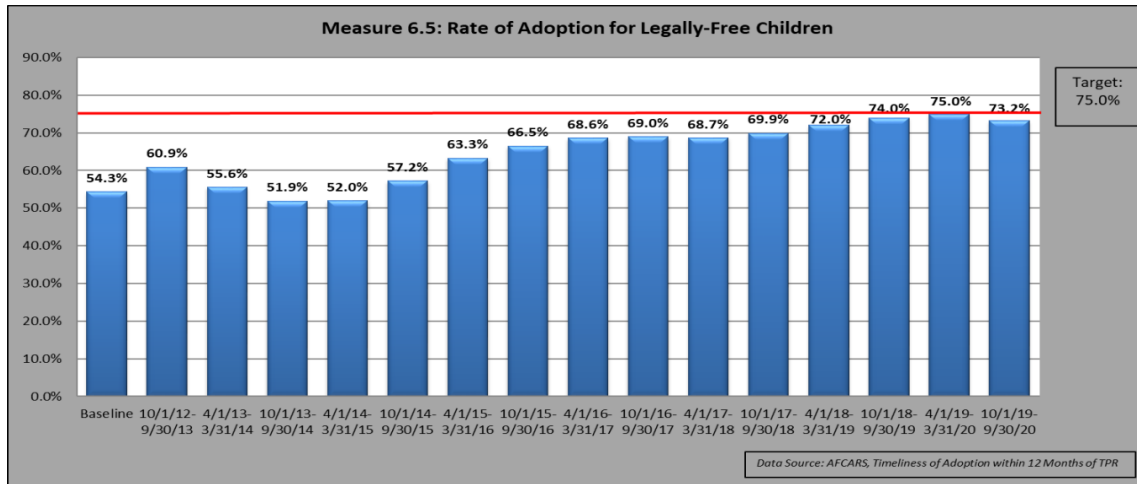
Denominator: All children who became legally free for adoption from 10/1/2018 through 9/30/2019.

Numerator: The number of children who became legally free for adoption from 10/1/2018 through 9/30/2019 **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 10/1/2010 - 9/30/2011			54.3%
10/1/2012 – 9/30/2013	All children who became legally free from 10/1/2011 - 9/30/2012	898	1,474	60.9%
4/1/2013 – 3/31/2014	All children who became legally free from 4/1/2012 - 3/31/2013	857	1,540	55.6%
10/1/2013 – 9/30/2014	All children who became legally free from 10/1/2012 - 9/30/2013	839	1,618	51.9%
4/1/2014 – 3/31/2015	All children who became legally free from 4/1/2013 - 3/31/2014	935	1,797	52.0%
10/1/2014 – 9/30/2015	All children who became legally free from 10/1/2013 - 9/30/2014	1,200	2,099	57.2%
4/1/2015 – 3/31/2016	All children who became legally free from 4/1/2014 - 3/31/2015	1,459	2,304	63.3%
10/1/2015 – 9/30/2016	All children who became legally free from 10/1/2014 - 9/30/2015	1,567	2,355	66.5%
4/1/2016 – 3/31/2017	All children who became legally free from 4/1/2015 - 3/31/2016	1,754	2,558	68.6%
10/1/2016 – 9/30/2017	All children who became legally free from 10/1/2015 - 9/30/2016	1,886	2,734	69.0%
4/1/2017 – 3/31/2018	All children who became legally free from 4/1/2016 - 3/31/2017	1,770	2,577	68.7%
10/1/2017 – 9/30/2018	All children who became legally free from 10/1/2016 - 9/30/2017	1,674	2,395	69.9%
4/1/2018 – 3/31/2019	All children who became legally free from 4/1/2017 - 3/31/2018	1,669	2,319	72.0%
10/1/2018 – 9/30/2019	All children who became legally free from 10/1/2017 - 9/30/2018	1,634	2,208	74.0%
4/1/2019 – 3/31/2020	All children who became legally free from 4/1/2018 - 3/31/2019	1,596	2,129	75.0%
10/1/2019 – 9/30/2020	All children who became legally free from 10/1/2018 - 9/30/2019	1,525	2,084	73.2%
Target				75.0%

Section 2, Table 6.5-1



Section 2, Graph 6.5-1

Data Commentary

During this review period, Child Welfare Services (CWS) showed a decrease of 1.8 percent to just below the 75.0 percent target. Of the 2,084 children that became legally free, 1,525 children had a finalized adoption within 12 months of becoming legally free resulting in an overall performance of 73.2 percent. Overall improvement is 18.9 percent since the baseline was established.

Reporting Period Progress

Regional Updates

Each region holds monthly Adoption Timeliness Accountability Team (ATAT) calls virtually or by conference call. Each region staffs the Quad 1 children in the following cohorts until the barrier is resolved and the child moves to permanency, except Region 3 that continues to staff all Quad 1 children.

- Quad 1 for 60-calendar days or more and not authorized.
- Authorized 14-calendar days or more not in trial adoption (TA).
- TA 30-calendar days or more not finalized.

Adoption attorneys attend each region's monthly ATAT meeting. The attorneys' participation on the calls is very beneficial when a barrier arises that is court-related. ATAT leads report the adoption attorneys give general legal advice for specialists to pass along to adoptive families, and they assist in follow-up with courts when specialists struggle to receive needed documents. The strategy lead and Region 1 ATAT lead will monitor Region 1 districts where letters are being sent to families to determine if there is an increase in the use of Oklahoma Human Services (OKDHS) adoption attorneys and a corresponding increase in permanency timeliness. They will also evaluate districts that are staffing all Quad 1 children to determine if children achieve permanency more quickly. If notable improvement in the time to permanency is achieved, OKDHS will assess expanding the practice to all of Region 1 and potentially statewide.

The largest barrier this reporting period was the COVID-19 pandemic. COVID-19 caused delays due to positive cases and/or quarantine-related barriers where many court-related delays occurred. Other identified barriers were pending paperwork, waiting for finalization dates, families requesting to wait for various reasons, competing adoptions, all siblings not legally-free, delays in adoption assistance agreements and approval, and the Interstate Compact on the Placement of Children (ICPC). ICPC affects a small number of Quad 1 children throughout the state; however, an ICPC barrier usually takes the longest to resolve and increases average timeliness to adoption. Currently, approximately 57 Quad 1 children statewide are in different stages of the ICPC process. On average, each region staffs 85 to 90 children a month with 10-15 percent of children with an ICPC-related barrier.

CWS continues to look for system barriers as well as individual case barriers that prevent timely adoption finalization. The regional leads and field managers continue to look for any barriers through the ATAT process and make progress in timeliness. They also assess trends within their own region. Specialists in the field, along with field managers and ATAT leads, work together to improve their region based on the needs of families and common barriers identified. ATAT calls increase communication and raise involvement when barriers are within OKDHS' control. To assist with tracking barriers, the ATAT leads add action steps during the monthly calls. Action steps are established as needed at each staffing. District directors assist with follow-up on any Permanency Planning (PP) barriers and then follow-up with the ATAT team when completed. Adoption attorneys follow-up on legal barriers and field managers follow-up on timeliness and accountability-related issues of their teams. These procedures are embedded into the ATAT process and have shown to be a self-maintaining and evolving process based on each need or idea specific to each region. However, data does not always reflect children are reaching permanency after a long lasting barrier is resolved. Section 2, Table 6.5-2 represents the improvements of each region over the last six months based on the percent of children reaching permanency through adoption within 120-calendar days of the Quad 1 child becoming legally-free for adoption.

Adoption Finalization Timeliness						
Region/ District	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
REGION 1	6.3%	20.0%	27.3%	20.0%	63.6%	34.8%
REGION 2	9.1%	31.6%	50.0%	66.7%	40.9%	70.0%
REGION 3	41.7%	55.6%	88.9%	50.0%	57.1%	55.6%
REGION 4	31.3%	40.7%	40.0%	38.1%	73.3%	61.5%
REGION 5	5.7%	4.2%	11.4%	11.8%	11.8%	25.0%
TOTAL	20.0%	28.8%	34.9%	33.7%	51.1%	50.7%
<i>Data Source: Y1818-Finalized; Run Date: 1/6/21</i>						
<i>* This data is based on finalizing the child within 120 days of the child becoming legally free for adoption.</i>						

Section 2, Table 6.5-2

Guardianships and Adoptions

The strategy leads for ATAT and PP worked together to create guardianship information to send to all child welfare (CW) Resource specialists, supervisors, and field managers. This best practices tip sheet helps Foster Care and Adoptions specialists discuss the child's best route to permanency with their PP partners at adoption criteria staffings and regional quad staffings. While PP is able to discuss guardianship at any time throughout the life of the case, this additional step will ensure guardianship continues to be considered once the case plan goal is changed to adoption and throughout the adoption process. Information on guardianships was presented to CW Resource supervisors on 9/29/2020 and emailed out to all CW Resource specialists on 10/9/2020. PP is exploring a recorded guardianship training for all CW staff.

The strategy leads for ATAT and PP are also working with KIDS for enhancements to review guardianship as an option throughout the child's case. One enhancement is the addition of a guardianship node in the child's case and it is currently scheduled for release in May 2021. An additional enhancement includes the addition of guardianship questions in the adoption criteria staffing screen. This is scheduled for release in February 2021.

Tribal Liaisons

Since the last reporting period, the strategy lead met with the program CWS Tribal Unit to discuss how to approach barriers related to tribal partners. During the meeting, a decision was made that the tribal liaisons program supervisor would contact the liaisons and update them on their role to help with collaboration between the field staff and the tribes. The strategy lead contacted all ATAT regional leads and provided them with a list of the tribal liaisons, the tribes they represent, and their contact information. During the ATAT calls, this information helps the regional leads in assigning action steps and follow-up when the barrier is tribal-related. When the list is modified, the strategy lead redistributes the updated list to the ATAT leads.

Barrier Tracking and Reporting

CWS continues to work on a KIDS system enhancement for barriers to be documented and pulled to a report for easy access. Currently, the tentative release date is February 2021. When the update is released, the strategy lead and KIDS

staff will collaborate on a tip sheet and training to ensure proper documentation. The strategy lead will also work with the regional ATAT leads and field managers for assistance in successfully implementing this new practice. The strategy lead will monitor the barrier tracking for trends of improvement.

Overdue Annual Updates

Annual updates were difficult for CW specialists to complete with the onset of the COVID-19 pandemic. At the beginning of this reporting period, 90 annual updates were past due. As of December 2020, the past due annual updates increased to 110. CWS is aware of the increase in overdue annual updates and is working closely with families to complete them as timely and safely as possible. While CWS knows the annual updates are something that will be addressed, the safety and health of the CW specialists, foster/adoptive families, and the children in care are of the utmost importance. Specialists and supervisors are critically thinking on how to timely complete annual reassessments to ensure this is not a barrier that holds up a child's permanency.

Conclusion

The total number of children finalized this reporting period decreased as compared to the previous six-month reporting period. Statewide, as of 12/31/2020:

- authorizations had occurred for 653 children;
- 672 children were in trial adoption; and
- finalizations had occurred for 724 children.

Over the past reporting periods CWS has continued to see the total number of children in care and the total number of children with a goal of adoption decrease as well. The embedded ATAT process made a positive impact to keep the adoption process moving 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 Adoption and Foster Care Analysis Reporting System (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.

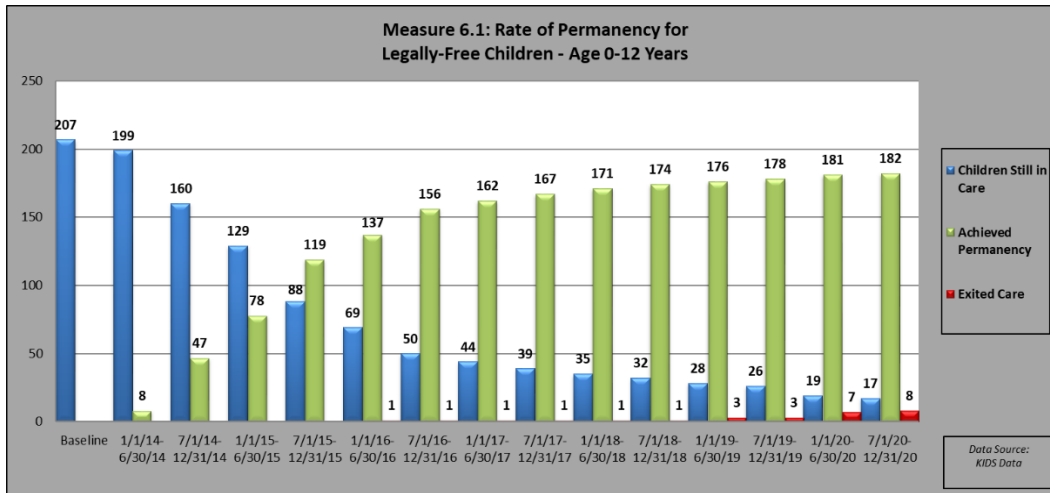
Numerator: The number of Quad 2 children with a case plan goal of adoption who achieved permanency.

Trends

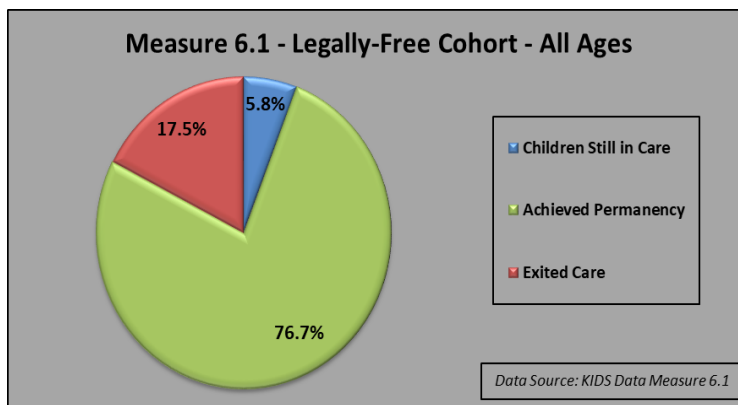
Reporting Period	Population	Numerator	Denominator	Result
Cohort Baseline 1/10/2014				292 Children
1/10/2014 – 6/30/2014	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	8	207	3.9%

	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	47	207	22.7%
	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	78	207	37.7%
	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	119	207	57.5%
	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	137	207	66.2%
	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	156	207	75.4%
	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	162	207	78.3%
	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	167	207	80.7%
	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	171	207	82.6%
	All Quad 2 children age 13 or older as of 1/10/2014 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 1/10/2014 with a case plan goal of adoption	174	207	84.1%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	42	85	49.4%
1/01/2019 – 6/30/2019	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	176	207	85.0%
7/01/2019 – 12/31/2019	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	178	207	86.0%
1/01/2020 – 6/30/2020	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	181	207	87.4%
7/01/2020 – 12/31/2020	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	182	207	87.9%
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

Data Commentary

Of the 292 children in the original cohort from 1/10/2014, a total of 224 children or 76.7 percent achieved permanency, 51 children or 17.5 percent left care to non-permanent exits, and 17 children or 5.8 percent remain in care, as seen in Section 2, Chart 6.1-1.

As of 12/31/2020, for the cohort of 207 children, age 0-12 who were legally free without an identified placement, 182 or 87.9 percent reached permanency, as seen in Section 2, Graph 6.1-1. Of those remaining in care, there are two children with a case plan goal of adoption, 14 youth with a case plan goal of adoption, and one youth with a case plan goal of planned alternative permanent placement.

During this reporting period, two youth from the baseline cohort left care:

- one youth exited care via finalized adoption, less than one month before her 18th birthday, to the family who adopted her siblings; and
- one youth exited care via emancipation at age 18 and transitioned into a Daily Living Services (DLS) home to assist with his long-term daily needs.

Reporting Period Progress

The Adoption Transition Unit (ATU) engages in a variety of permanency efforts individualized for each child or youth, and primarily follows the Wendy's Wonderful Kids (WWK) model. Permanency efforts undertaken within this model include diligent search and case record review, network building, child-specific recruitment planning, building a strong relationship with the child and youth, and assessment of adoption readiness for both the child and any identified families. Direct

practice work with the child or youth involves helping them understand the importance of permanency, the long-term impact permanency will have on their life, and how to live within a family unit using the ATU booklet and WWK tools, as well as permanent connections group meetings. Other ongoing efforts discussed previously and implemented during this reporting period:

- development of KIDS reports to reflect current work and case assignments;
- development of the virtual permanent connection meeting (PCM) for teens with standardized elements;
- ongoing use of the *Let's Talk* booklet with older youth regardless of case plan goal; and
- expansion of ATU's work to include all select cases where ATU carries primary assignment.

For this reporting period, ATU observed a 7.0 percent dip in adoption finalizations for children and youth authorized with a source of statewide family staffing (SWS) after entering trial adoption, likely due to challenges presented by ongoing COVID-19 precautions and restrictions. This number is still a 3.0 percent increase compared to previous fiscal years where only children and youth were presented, resulting in 70 percent finalization. Child Welfare Services (CWS) anticipates the number of authorizations from SWS will continue to drop as the pool of approved waiting families' drops with practice changes, but still finds this effort is a stronger vehicle for family matching than previous SWS iterations.

ATU continues its ongoing partnerships with the Oklahoma Successful Adulthood (OKSA) and Permanency Planning (PP) programs to increase the likelihood of permanency for children and youth in care. Enhanced partnerships between ATU, Foster Care and Adoptions (FC&A), Recruitment staff, and PP at all levels, as well as with community partnerships, resulted in a significant number of inquiries on youth publicly featured on partner sites. As part of the WWK model and ATU work, specialists continue discussions with 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 any hesitancy articulated by families and explore other family who may provide legal permanency.

As ATU works within the WWK model, CWS will slowly scale back generalized recruitment efforts.

- Oklahoma Heart Gallery activities and online presence. Photography and videography of children is limited due to COVID-19 restrictions; however, through creative measures, this partnership was able to video 22 new children and youth and added 21 children to the website during this reporting period.
- AdoptUSKids.org. Seventeen additional children and youth were registered on this website during this reporting period.
- Raise the Future (formerly The Adoption Exchange). During this period, The Adoption Exchange rebranded as Raise the Future, and ATU is in the process of bringing registrations current on their new online portal.
- News Media features. Three news stations feature waiting children in Oklahoma; however, no children were featured from mid-March through June 2020 due to the COVID-19 quarantine. The features resumed in limited numbers during this reporting period utilizing various COVID-19 precautions.
 - a) KFOR, an Oklahoma City station, videoed and featured nine new children from July to December 2020, and re-featured one youth. KFOR also featured three stories about foster and adoptive families, which included families who adopted teenagers.
 - b) KTUL, a Tulsa station, has not featured any children since the COVID-19 pandemic began.
 - c) KSWO, a Lawton station, videoed and featured two new children during this reporting period.

From July to December 2020, the Foster Care and Adoption Support Center reports receiving 11,183 inquiries. Referral Source was specified on 2,441 or 21.83 percent of inquiries. The numbers for Inquiry Channel, Specified Interest, and Referral Source are represented in Section 2, Table 6.1-2.

Inquiry Channel			Referral Source		
Internet	10206	91.26%	Other	432	17.70%
Hotline	647	5.79%	Facebook	351	14.38%
Direct Phone	168	1.50%	Internet	307	12.58%
AdoptUSKids	91	0.81%	Foster Parent	236	9.67%
OKBenefits App	39	0.35%	Friend	214	8.77%
Email	22	0.20%	TV	146	5.98%
Other	9	0.08%	Be a Neighbor	144	5.90%
Recruitment Event	1	0.01%	Adoptive Parent	95	3.89%
Total	11183		Adopt US Kids	93	3.81%
			Relative	82	3.36%
Specified Interest			Faith Based	78	3.20%
Adoption	6537	58.45%	Life Church	58	2.38%
Resource Parent	3819	34.15%	OKDHS Employee/Website	58	2.38%
Fostering	792	7.08%	OK Fosters Website	49	2.01%
Other	17	0.15%	OK Benefits	43	1.76%
Kinship	7	0.06%	Newspaper	26	1.07%
DDSD	4	0.04%	Informational Meeting	11	0.45%
TFC	3	0.03%	One Church	9	0.37%
OK Fosters	2	0.02%	Private Recruiter	6	0.25%
Respite	1	0.01%	DHS Recruiter	2	0.08%
ITFC	1	0.01%	Radio	1	0.04%
Total	11183		Total	2441	100.00%

Section 2, Table 6.1-2

Data Source: Foster Care and Adoption Support Center

The ATU Quad 2 Adoption Timeliness Accountability Team (ATAT) process continues to be a primary strategy in assisting staff to achieve permanency for children and youth. Participants include both ATU and PP staff assigned to the case, their supervisors and managers or directors, and any resource or other partners involved, specific to the child or youth. Quad 2 ATAT phone calls for each child or youth take place every other month, with some flexibility; older youth may be reviewed more frequently and children or youth with an impending permanency plan are staffed monthly to ensure action steps are completed. Due to the COVID-19 pandemic, new barriers arose and some tasks were paused, but ongoing review helps staff process through barriers. To ensure efforts remain under strict scrutiny, a monthly update from each ATU supervisor and Quad 2 ATAT information are synthesized into one report for full review by ATU leadership. Another function of these phone calls is to help track the WWK work and progress on these children and youth. The program field representative (PFR) ensures that WWK efforts on these children and youth are a priority by following up on established target dates and due dates. During this reporting period, two youth exited from care: one via a finalized adoption, and one transitioned into a DLS home. Progress is made through ongoing follow-up on action steps and assigned tasks for other children to eliminate barriers, as well as through support from other programs.

With the effectiveness of the Quad 2 ATAT process, ATU added the Quad 2 children and youth residing at a non-Oklahoma Human Services (OKDHS) facility, who are being staffed for discharge, as well as those Quad 2 children and youth that have experienced a recent disruption. Staffing the disruption cohort allows the entire child welfare (CW) team moving forward with each particular youth in mind, and brainstorming how to prevent another disruption in the future. During this reporting period, CWS staffed 31 children via the Quad 2 ATAT process: 19 from the 6.1 baseline cohort, four from the disruption cohort, and seven from the non-OKDHS facility cohort. One additional child was added as a special request.

This reporting period was the first in which ATU carried assignment of all youth with a goal of planned alternative permanent placement (PAPP). ATU staff received ongoing training on application of new protocols and WWK model for youth with a goal of PAPP and programs staff established weekly office hours for staffing case situations. Direct practice work with youth includes 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 through use of the new ATU booklet and WWK tools, as well as permanent connections group meetings. The field administrator will continue to assist staff and WWK in tailoring this work within the model, and assure that the YI132 daily reports, Planned Alternative Permanent Placement with Secondary ATU Assignment, meet the programs needs for workload management.

This reporting period ATU further developed the virtual PCMs, held via Zoom with youth, which includes games, competition for prizes, an encouraging keynote speaker, an informational segment, and an educational element. Discussion topics included the importance of building long-term positive connections with compassionate adults, developing goals with those connections, and the ability to maintain connections, which would provide supports for the youth while learning independent living skills. ATU staff collaborates with OKSA at the National Resource Center for Youth Services for this endeavor and hosted one additional virtual PCM during this reporting period. The next PCM is slated for January 2021.

Personnel

During this reporting period, one CW specialist II assigned to the ATU staff retired, and one CW specialist II promoted out of the program. ATU hired one CWS II, and currently has no vacant positions. ATU's total staff capacity is one field administrator, one PFR, eight CW specialist IV's, seven CW specialist III's, and 36 full-time CW specialist I and II's. ATU also has administrative staff consisting of one administrative assistant II, one part-time staff person serving as statewide internet liaison, and one part-time person in the role of statewide staffing coordinator, totaling 56 staff.

Each of the eight full-time ATU CW specialist IV supervisors supports a team of four to six staff. ATU continues to have one team without a CW specialist III; therefore, this team uses the shared responsibility approach and extends offers of additional duties to select CW specialist II staff that want to build leadership capacity. ATU currently has no staff on graduated caseloads, and during the majority of this reporting period, all staff met workload standards.

ATU staff participated in one full-day staff development meeting on 9/30/2020. The meeting's morning portion provided guidance on virtual meetings, new Oklahoma Human Services processes, planning for Christmas for foster children and youth, and ongoing COVID-19 restrictions and precautions. The afternoon portion included a discussion on working with youth who are adoption hesitant, best practices in maintaining electronic files, working with the WWK database, Oklahoma Heart Gallery partnership, and a discussion of trends related to adoption disruptions.

As part of the onboarding process and to aid with retention, all new ATU staff, whether new to the agency or not, are required to complete the National Training Institute (NTI) Adoption Competency and Mental Health training through the Center of Adoption Services and Education, as well as attend a two-day WWK training. At this time, all staff hired during the COVID-19 pandemic received full onboarding, despite initially being put on hold as training transitioned to virtual learning.

Monthly adoption trainings for ATU and Resource specialists who work with non-identified families continue to occur to ensure staff are apprised of new processes and protocol to support and preserve Quad 2 adoptive placements. CWS programs staff presented new supportive tools for families, discussed in this report's 6.6 Adoption Disruption section, along with NTI's Adoption Competency and Mental Health training. The presented material informs discussions with foster and adoptive families about realistic expectations of the adoption process, trauma-focused approaches to parenting/discipline, and bonding and attachment during those early days of trial adoptive placement.

Support

In previous reporting periods, the plan for the mental health consultants (MHCs) to participate in all disclosures for Quad 2 children and youth was determined to exceed their capacity. As such, CWS revamped the process used by CWS to triage children and youth for involvement with the MHC team, and created a process to involve the Education Services and Developmental Disabilities Program staff in the disclosure process for children and youth with higher-level needs. Under the new triage referral system, 23 Quad 2 adoption disclosures met the MHC triage parameters, and MHCs attended 16 disclosures. The ongoing multi-level staffing of Quad 2 children and youth is helpful in stepping them down from congregate or shelter care into family-like settings; this process also supports permanency efforts. Additionally, the Dave Thomas Foundation for Adoption staff is a constant, daily support to ATU staff in maintaining fidelity to the WWK model. Oklahoma's grant manager has direct contact with ATU specialists, supervisors, program staff, and administrator on a regular basis.

Conclusion

As ATU continues to evolve to meet more of the needs of children and youth in care, it has grown into a team specializing in youth needing permanency that maintains fidelity to the evidence-based WWK model, relies on data as a measure of programmatic health, and course-corrects to meet children's and youth's permanency needs. To-date, ATU takes a child-focused approach to advocacy and determining a customized permanency plan for each youth, regardless of case plan goal or quad designation.

ATU continually strives to find effective ways to support staff and achieve permanency for children and youth. Primary next steps include:

- engage in ongoing training and development for supervisors and staff working with youth with a PAPP goal, for staff carrying primary assignments, and for staff working with adoption hesitant youth; and
- continue the process of streamlining the child profile update and WWK assessments.

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 10/1/2018 through 9/30/2019.

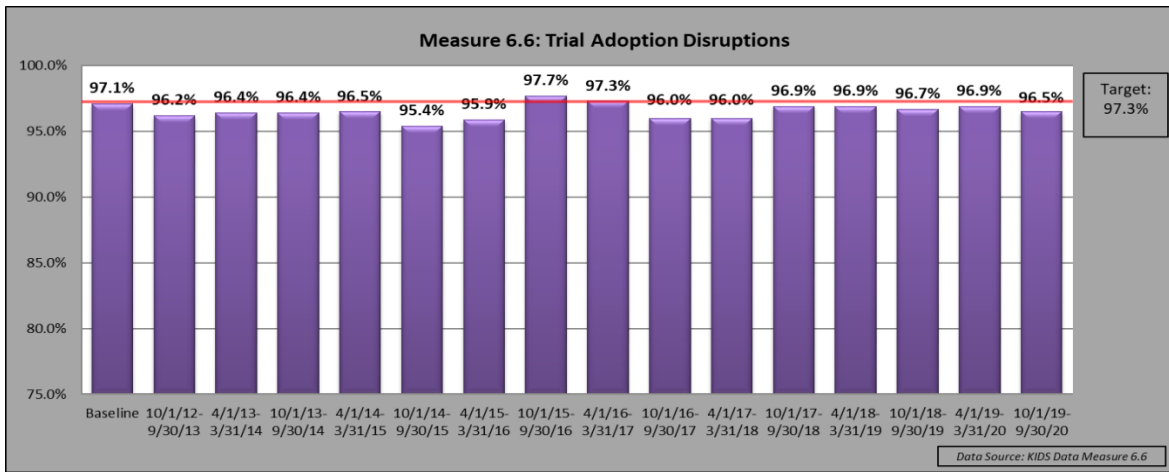
Numerator: Number of children that entered trial adoption from 10/1/2018 through 9/30/2019 and the trial adoption did not disrupt within 12 months.

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%
10/1/2018 – 9/30/2019	All children who entered TA from 10/1/2017 – 9/30/2018	2,162	2,235	96.7%
4/1/2019 – 3/31/2020	All children who entered TA from 4/1/2018 – 3/31/2019	2,127	2,196	96.9%
10/1/2019 – 9/30/2020	All children who entered TA from 10/1/2018 – 9/30/2019	2,044	2,118	96.5%
Target				97.3%

Section 2, Table 6.6-1



Section 2, Graph 6.6-1

Data Commentary

Child Welfare Services (CWS) slightly decreased by 0.4 percent for this reporting period with 2,118 children entering into TA and 2,044 or 96.5 percent not experiencing a disruption while in TA placement.

Table 6.6-2 shows the breakdown of identified placement and non-identified placement children with a disruption during this reporting period.

Trial Adoption Disruptions						
Relationship of Adopting Placement	# of Disrupted Cases	Total Cases	% Disrupted	# of Kids Disrupted	Total Kids	% Disrupted
ID Placement	35	1298	2.7%	45	2002	2.2%
Non-ID Placement	27	89	30.3%	29	116	25.0%
Total	62	1387	4.5%	74	2118	3.5%
<i>Data Source: Measure 6.6; Run Date: 12/10/20</i>						
<i>ID Placement includes relationships of Non-Relative Foster Parent, Relative Foster Parent, and Relative Not Receiving Foster Care Payment. Non ID Placement is Other Non- Relative (highlighted pink on report detail) *Two families are counted in both relationships for case types as they had children from ID and Non-ID adoptions.</i>						

Section 2, Table 6.6-2

Of children placed with an identified adoptive placement, 45 of 2,002 children experienced a TA disruption and 29 of 116 children placed with a non-identified adoptive placement experienced a disruption. Additional factors contribute to the higher disruption rate in the non-identified resource homes, such as these children being older, possibly having increased special needs, and being placed with families with no previous established relationship. CWS continues to seek ways to better support these placements.

Reporting Period Progress

CWS continued diligently implementing the expanded strategies over this reporting period. CWS regularly communicates with field staff and reiterates to Non-ID Resource specialists (Non-ID RS) and the Adoption Transition Unit (ATU) about new practices in place to assist with smooth transitions into TA and supports.

Quad 2 Adoption Disruption Reviews

The program field representative (PFR) for ATU continues to review all Quad 2 adoption disruptions. After the reviews are completed, the PFR sends the disruption information to the regional field manager. The field manager discusses and provides the information to the assigned Non-ID RS and supervisor. Of the Quad 2 reviews completed, the majority of Quad 2 children were placed in non-identified adoptive homes. The Quad 2 reviews also provided information regarding placement prior to TA and placement after the TA disruption.

From these reviews, CWS has learned several key factors:

- supports and services need to be established as quickly as possible;
- adoption competent service providers are important; and
- many of the children were able to return to family settings following a disruption.

Through the review analysis, CWS determined a contributing factor of disruptions is the adoptive family's unrealistic expectations. CWS implemented the trauma-based webinars, "The Impact of Trauma on Healthy Growth and Development" by Dr. Barbara Sorrels and "Trauma-informed Caregiver Responses to Children's Problematic Behaviors" by Sara Coffey D.O. in 2019. In November 2020, the strategy lead sent communication about the two webinars again as a refresher and to inform new specialists about the webinars and training credits for adoptive parents. At the monthly adoption training in November, the strategy lead discussed with Non-ID RS and ATU how the webinars tie into the expanded strategies and the adoptive family service plan (AFSP). From the guided questions created by the University of Oklahoma National Resource Center for Youth Services, the Non-ID RS facilitates conversations with adoptive parents about ensuring the correct resources are in place at TA placement.

Adoption Disclosure

The PFR for ATU and the strategy lead developed an informal tool, **Thoughts After Disclosure**, for an adoptive family to document thoughts and questions following disclosure. CWS is aware that the adoption disclosure is a lengthy meeting where a lot of important information is provided. It can be overwhelming and difficult for the adoptive family to remember all of the information provided about the child. In hopes of helping the family reflect and digest the information, the review tool is being developed to assist the adoptive family to externally process the information and write down any

questions that arise after disclosure. The Non-ID RS will follow up with the family to discuss the review tool and subsequently request a mental health consultant (MHC) follow-up call if any questions are generated from the discussion. While this review tool is not yet finalized and implemented, the Non-ID RS are proactively requesting follow-up consultations with the MHC for adoptive families when questions arise following disclosure. Adoptive families, Non-ID RS, and MHCs report these follow-up consultations are exceptional. The adoptive families are given the opportunity to digest the disclosure information and prepare questions for the Non-ID RS and MHC.

The MHCs continue to attend adoption disclosures based on the following parameters:

- children with multiple removals of three or more;
- children who have experienced a previous disruption or dissolution;
- children with 10 or more placements;
- all Quad 2 baseline children; and
- children with two or more diagnoses,

MHCs are invited to the adoption disclosures of Quad 2 children identified in the above parameters. During this reporting period, a total of 32 requests for MHCs were sent. Based on the above mentioned parameters, 23 of those children met the requirements for a MHC to attend the adoption disclosure. The MHC were able to attend 16 of the 23 adoption disclosures. As always, the MHCs are available to consult on any case with specialists and families at any time. The Post-Adoption Services field service workers (FSW) also continue to attend Quad 2 adoption disclosure. The Post-Adoption Services FSW attended 26 of the 32 adoption disclosures. The field specialists and Post-Adoption Services work closely together to ease the transition of adoptive families moving through the adoption process and into post-adoption status.

Monthly Adoption Training and Support

During this reporting period, the following monthly adoption trainings were completed:

July 14, 2020	<p>Conducting and Documenting Quality Visitation</p> <ul style="list-style-type: none"> • Quality contacts focusing on engaging the resource parent, discussion of well-being <p>Adoption Competency Training Overview</p> <ul style="list-style-type: none"> • Attachment • Practical application in our work 	Lynette King, PFR Bonni Goodwin, PhD Ashley Hairrod, PFR Tracy Chaufy, PFR
August 11, 2020	<p>Step by Step Disclosure Process</p> <ul style="list-style-type: none"> • Preparing for disclosure • During the disclosure • After the disclosure <p>Adoption Competency Training Overview</p> <ul style="list-style-type: none"> • Trauma & Child Development • Practical application in our work 	Bonni Goodwin, PhD Ashley Hairrod, PFR Tracy Chaufy, PFR
September 8, 2020	<p>Adoption Preplacement Visitation Plan</p> <p>Quad 2 Process Map</p> <p>Adoption Competency Training Overview</p> <ul style="list-style-type: none"> • Grief & Loss • Honoring Biological History & Identity Formation • Practical application in our work 	Bonni Goodwin, PhD Ashley Hairrod, PFR Tracy Chaufy, PFR
October 13, 2020	<p>Quality Monthly Contacts</p> <ul style="list-style-type: none"> • Before/During/After <p>Adoption Competency Training Overview</p> <ul style="list-style-type: none"> • Adoption Adjustment & Peak Challenging Times • Practical application in our work 	Bonni Goodwin, PhD Ashley Hairrod, PFR Tracy Chaufy, PFR
November 10, 2020	<p>Question and Answer session over new strategies</p>	Bonni Goodwin, PhD

	Adoption Competency Training Overview <ul style="list-style-type: none"> • Adoption Competent Mental Health Services • Practical application in our work 	Ashley Hairrod, PFR Tracy Chaufy, PFR
December 8, 2020	Adoption Competency Training Overview <ul style="list-style-type: none"> • Formal & Informal Post-Adoption Services • Practical application in our work 	Bonni Goodwin, PhD Ashley Hairrod, PFR Tracy Chaufy, PFR

The monthly adoption trainings result in quality discussion with field specialists and keep the new strategies and adoption competency in the forefront of each specialist's work. The strategy lead created a **Monthly Adoption Training Survey** for ATU and Non-ID RS and their supervisors to complete in January 2021. It is a short survey designed to capture the different learning styles of field specialists, identify topic areas where more training or support is needed, and the best way to continue ongoing education regarding adoption competency. This survey will provide the strategy lead, ATU PFR, and the Statewide Coordinator for Adoption Preservation with information to plan further specialist training and education. In addition to the monthly adoption trainings, Adoption specialists statewide were trained in November 2020 regarding the "Best Practices for Adoption Disclosure."

In addition to monthly adoption training and beginning in January 2021, the ATU PFR and the strategy lead will hold virtual office hours once a month via Microsoft Teams. During the office hours, specialists will be able to join the video meeting to ask questions about the expanded strategies, previous trainings, or even discuss a trial adoption case. CWS wants to ensure all specialists are able to get the support needed to best serve adoptive families and children in Oklahoma Human Services (OKDHS) custody.

Adoptive Family Service Plan

Forms 04AN042E, *Adoptive Family Service Plan*, and 04AN043E, *Adoptive Family Service Plan Guide*, were released for use in August 2020. A numbered memo outlining the AFSP's purpose and instructions for use was sent to all CW staff on 9/17/2020. The AFSP was designed to steer specialists and families into deeper conversations regarding the child's and the family's needs to determine the services to be provided for both. The AFSP was required to be completed for all Quad 2 children entering trial adoption effective 10/1/2020. When training on the AFSP and discussing with field specialists, the Statewide Coordinator for Adoption Preservation, the strategy lead, and the ATU PFR emphasize the importance of adoption competent service providers.

Quality Monthly Contacts

One area highlighted in the Quad 2 process map is the **Quality Monthly Contact Tip Sheet**. The strategy lead collaborated with Permanency Planning (PP) programs to create a best practices quality monthly contact guide for children and families in TA status. The goal is to assist the specialists with:

- planning and preparing for a visit to a child in TA;
- engaging the child and the family while at the visit to determine how the attachment process is going; and
- conducting follow-up after the visit with any identified action steps established during the visit.

Quad 2 Process Map

During this reporting period, the *Quad 2 Process Map* was also developed as a comprehensive guide to benefit all specialists involved with a Quad 2 adoption. The Process Map helps navigate the child welfare team, ATU, PP, and Non-ID RS, navigate through all steps and new practices created from the expanded strategies. In the Quad 2 Adoption Process Map, website links were embedded for specialists to easily find the current list of adoption competent services providers. The specialists were also provided a list of questions to ask service providers about their adoption competency. Specialists encourage families to feel empowered to ask these same questions of service providers and request current service providers to complete the National Training Institute adoption competency trainings if they have not. Tip sheets and new procedures are outlined and detailed to help ensure they are accurately embedded into practice. Training over the Quad 2 Process Map was conducted with ATU and Non-ID RS on 9/8/2020 during the monthly adoption training. The officially completed Quad 2 Process Map was sent out to specialists, supervisors, and field managers on 10/9/2020.

Adoption Preplacement Visitation Plan

On 9/9/2020, the newly created Form 04AN01E, *Adoption Preplacement Visitation Plan*, was released along with the *Adoption Preplacement Visitation Plan Tip Sheet*. The Adoptive Preplacement Visitation Plan Tip Sheet was created to assist specialists in conversations with families regarding the importance of the preplacement visits and family time. The Adoption Preplacement Visitation Plan will help with planning and scheduling of pre-adoptive placement visits. Preplacement visits and initial meetings for children and adoptive families have looked different since March 2020 due to the COVID-19 pandemic. However, specialists diligently work to incorporate intentional visits and family time as much as possible. Many of these intentional visits are held via video calls where the adoptive child and family discuss their likes, dislikes, expectations, and what a normal day or week consists of for them.

Family Preservation Check-In

The family preservation check-in meeting/call was implemented during this reporting period. Through adoption disruption reviews, it was determined that a disruption occurs on average around 90-calendar days after placement. Therefore, the family preservation check-in was designed to be completed around 45-calendar days into TA placement for a child and family. The entire support team participates on the call with the family. OKDHS facilitates the call, but the family is encouraged to talk about day-to-day life with the child. The team inquires how attachment and bonding are progressing, what behaviors the child has displayed, how relationships in the home are going, and current stress levels of household members since the child moved into the placement.

During the check-in, the mental health providers discuss how sessions are going with the family and determine if there are new areas that need to be addressed. The services provided are reviewed to look for any gaps in support the family may have. The MHC also attend this check-in. When gaps in services are identified, the MHC assists by suggesting additional mental health providers that can meet the need. Families and specialists both reported the check-in is a benefit and the families feel supported and encouraged by the time and effort the teams make for them. The families state it is great to have everyone together in one place to discuss everything going on in the home. Specialists report that the families are very open to the meeting and new topics surfaced that were not reported previously. With everyone present as a team, the concerns were then addressed instantly.

Adoptive Parent Handbook

During this reporting period, the strategy lead and the Statewide Coordinator for Adoption Preservation began developing an updated Adoptive Parent Handbook. This new Adoptive Parent Handbook will be interactive and require input from the adoptive family. Families will create a child-specific adoption process timeline to help document and track trauma-related triggers and time frames. The handbook will also have adoption competency questions and facts to assist in locating appropriate service providers for their needs. Attachment, grief and loss, adoptive family expectations, and updated Post-Adoption Services information are a sample of topics that will be included in the handbook.

National Training and Development Curriculum

The National Training and Development Curriculum (NTDC) pilot is currently underway. CWS is excited to participate in this project to help potentially shape a cutting edge, trauma-based curriculum for foster and adoptive parents. The NTDC trainings are currently in-person trainings. CWS is looking forward to seeing the outcomes from families attending the NTDC training and their preparedness for foster and adoptive placements. During this pilot, the Spaulding for Children organization presented Oklahoma and other pilot sites with an additional opportunity and evaluation they would like to conduct. NTDC built in "right time" trainings for families following completion of the pre-service training and upon approval. When the pilot is completed and the NTDC training is available nationwide, the "right time" training can be accessed by foster and adoptive parents at any point. These trainings can be viewed on either a computer or a smartphone/tablet. The topics are related to situations or issues a family may see during placement and offers educational support to families. Spaulding would like current foster families' feedback on the "right time" trainings. Oklahoma plans to offer these "right time" trainings to approved, experienced kinship foster families to watch and provide their feedback to Spaulding for Children. Oklahoma is eager to hear the voices of their foster families on these trainings.

CWS believes the impact of the COVID-19 pandemic is reflected in the adoption disruption data during this reporting period. While CWS anticipated this challenge, services providers and field specialists are developing new ways every day to help adoptive families in need before a crisis arises and a disruption occurs. The CWS team is working together to help families statewide receive the services and supports needed for a successful adoption. PP, ATU, and the Non-ID RS discuss Quad 2 trial adoption cases regularly throughout the process. From the TA planning call to contact before and after monthly contacts, the CWS team collaborates to discuss any needs and follow-up for the adoptive child and family. The "My Support Team" information is provided to the family, including all of the specialists' cell phone numbers, the regional MHC phone number, all service providers' phone numbers, and the crisis hotline.

The expanded strategies for adoption disruptions are applied and discussed regularly. Wendy's Wonderful KIDS is fully implemented and CWS is working diligently to create connections for Quad 2 children in hopes of producing a successful permanency option for the children through adoption. The strategy lead will continue to observe and monitor the expanded strategies to determine effectiveness and areas of needed self-correction. With the newly created expanded strategies implemented in the current and prior reporting period, not all children that entered TA and/or had an adoption disruption were able to experience changed practice. Over time, CWS anticipates a decrease in adoption disruptions as the new strategies are fully embedded in practice and adoption competency continues to be on the forefront of conversations held with services providers by CW specialists and adoptive families.

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 9/30/2018.

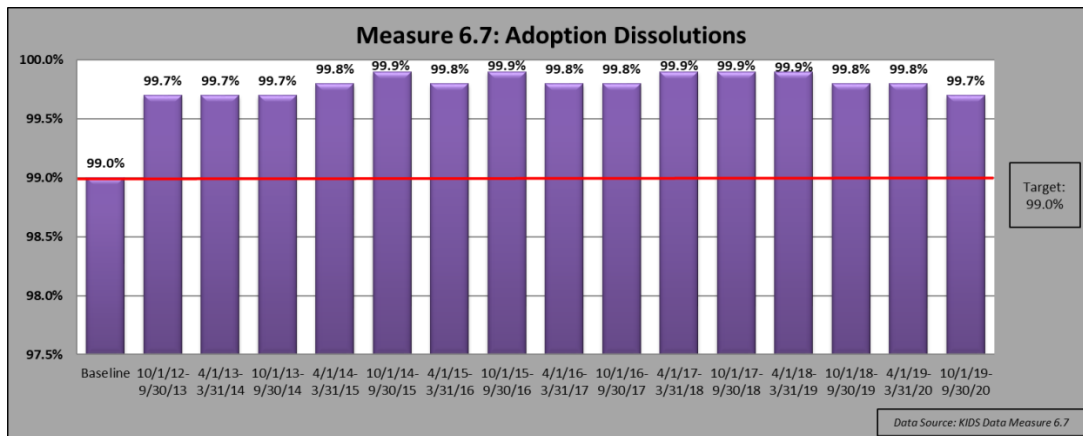
Numerator: All children who had a legalized adoption during the 24 months ending 9/30/2018 that did not dissolve in less than 24 months.

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%
10/1/2018 – 9/30/2019	All children with a legalized adoption from 10/1/2015 - 9/30/2017	5,109	5,119	99.8%
4/1/2019 – 3/31/2020	All children with a legalized adoption from 4/1/2016 - 3/31/2018	5,025	5,036	99.8%
10/1/2019 – 9/30/2020	All children with a legalized adoption from 10/1/2016 - 9/30/2018	4,836	4,849	99.7%
Target				99.0%

Section 2, Table 6.7-1



Section 2, Graph 6.7-1

Data Commentary

Child Welfare Services (CWS) continued to exceed the goal of a 99.0 percent success rate for adoption stability with less than 0.3 percent in dissolutions. There were 4,849 children with a legalized adoption during the 24 months ending 9/30/2018 and 4,836 or 99.7 percent of those adoptions did not dissolve within 24 months.

Reporting Period Progress

Post-Adoption Services continually looks for ways to improve practices that increase and enhance communication with the families they serve. Post-Adoption Services is advancing technologically by corresponding with families electronically. Technology increased responses and feedback from families and helped prevent delays in relaying important information. In an effort to maximize the use of available technology, Post-Adoption Services created a "no e-mail" report, which captures post-adoptive families without an existing e-mail address on file. Post-Adoption Services specialists use this report to contact each family without an email address and update the case file.

In lieu of mailing paper copies of annual reviews to adoptive families, Post-Adoption Services successfully launched all-electronic annual reviews in December 2020. This collaboration includes field Adoption specialists obtaining families'

email addresses at the onset of all potential adoptions. The success of this mission is key to helping families, as well as a cost-saving effort. Of the 1,352 annual reviews Post-Adoption Services conducted in December, only 193 adoptive families did not have active e-mail addresses. The majority of these were from cases established prior to Post-Adoption Services' goal of capturing e-mail addresses. This initiative was covered in the "Going Green" article of the ***Post-Adoptions Services 2020 4th Quarter Newsletter***, which shared this cost-saving capability with adoptive families. The electronic annual reviews were updated to provide adoptive families with the Post-Adoption Services specialists' cell phone numbers, further incorporating technology into the way the families are served.

Post-Adoption Services works with field managers to ensure the Adoption specialist completes a Warm Hand Off on the finalization day by informing the family of their Post-Adoption specialist's name and contact information, including email address and cell phone number. The Adoption specialist also offers continuity to the family until Post-Adoption Services completes a Warm Call introduction to the family. The Post-Adoption Services specialist will complete the Warm Call to the newly adopted family after the Finalization Team completes the Adoption Assistance process, sends the Welcome Packet to the family, and assigns the case for case management. During this call, the Post-Adoption Services specialist completes an introduction and verifies email addresses and all other demographics. The Post-Adoption Services specialist discusses the adoption assistance to ensure the family is receiving assistance and the amounts are correct for each child. The Post-Adoption Services specialist resolves any daycare or medical concerns at the time of the Warm Call. The Post-Adoption Services specialist reiterates to families that their annual review will be emailed, or mailed via the United States Postal Service in the absence of an email address. The Post-Adoption Services specialist also explains OK Promise when applicable and reminds families that updates and supportive articles can be found in the Post-Adoptions Services quarterly newsletter.

Post-Adoption Services actively responds to invitations from field specialists requesting participation in adoption disclosures, family meetings (FMs), and training. This participation with internal and external customers allows Post-Adoption Services further involvement with many adoptive families early on and offers valuable information and support, prior to finalization. Post-Adoption Services' engagement in these meetings further enables specialists to readily identify needs and help families in crisis. From July to December 2020, Post-Adoption Services participated in 26 disclosures via conference call and ZOOM as well as four FMs and six director's calls. Thanks to the new use of technology within Oklahoma Human Services, adoptive families are able to put a face to the voice/name of the Post-Adoption Services specialist attending the adoption disclosure. Also, in December 2020, Post-Adoption Services provided training for tribal partners on "What Happens after Finalization."

Due to the low staff turnover rate, Post-Adoption Services has a stable and reliable knowledge base comprised of dedicated, seasoned individuals with longevity representing decades of CWS experience. Staff continually strive to gain knowledge and improve practice to better serve children and families. Specifically throughout these critical months of the COVID-19 pandemic, virtual learning tips and a number of educational and pandemic-related resources were shared with families, along with virtual mental health resources and respite information. Post-Adoption Services works to ensure all post-adoptive families receive relevant resources for their unique needs.

In a commitment to learning and improving for children and families they serve, Post-Adoption Services is also embarking on an endeavor to receive ongoing trauma education and training. This training will further develop a specialist's skills, build competencies, and better equip specialists when responding to crisis situations that many families often experience. The "Adoption Competency Series" is offered to all Post-Adoption Services by the Statewide Coordinator for Adoption Preservation and will occur bi-monthly. The first training is scheduled for 3/18/2021.

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) 21?

Data Source and Definitions

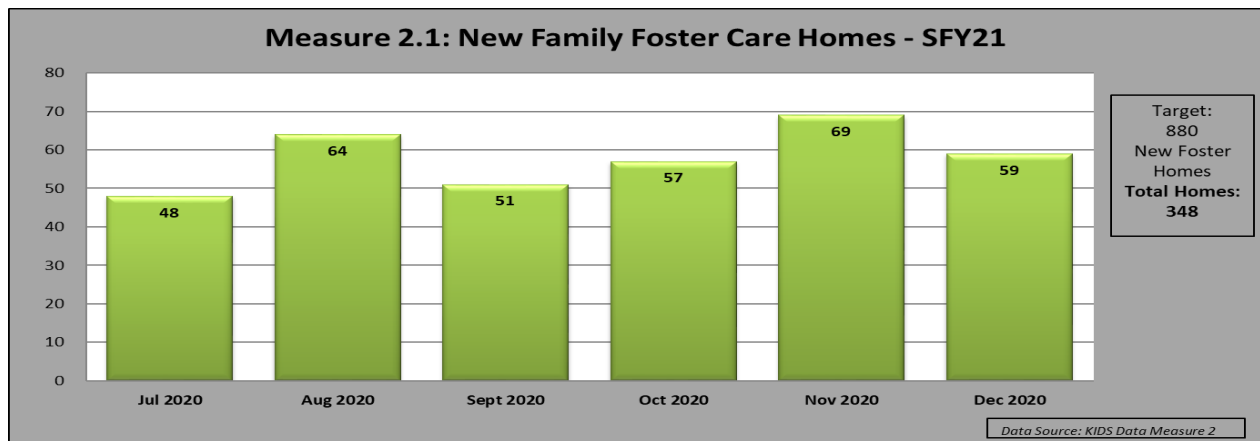
Total count of new foster homes includes all Foster Family Homes and Supported Foster Homes by the month that the family assessment was approved using the agreed upon criteria. As of 7/1/2014, this measure does not include Kinship, Contracted Foster Care (CFC) Homes, Emergency Foster Care (EFC), Shelter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

Trends

Reporting Period	Population	Result	
SFY 21 Baseline		2,106 Foster Homes open as of 7/1/2020	
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	
7/1/2019 – 12/31/2019	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 20	410 Homes	832 Total Homes opened in SFY 20
1/1/2020 – 6/30/2020	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 20	422 Homes	
7/1/2020 – 12/31/2020	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 21	348 Homes	348 Total Homes opened in SFY 21 (Year-to-Date)
Target		880 New Foster Homes opened by 6/30/2021	

Section 3, Table 2.1-1



Section 3, Graph 2.1-1

Data Commentary

As of 12/31/2020, Child Welfare Services (CWS) opened 348 foster family homes and supported foster homes that were counted as new according to Pinnacle Plan criteria. The target for new homes by the end of SFY 21 is 880 homes. CWS achieved 39.5 percent of the SFY 21 target for new homes in the first half of the SFY. As of 7/1/2020, 2,106 homes were open. During the first half of SFY 21, 379 homes were opened and 438 homes were closed, leaving 2,047 homes open as of 12/31/2020 for a net loss of 59 homes. Net gain or loss 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.

Reporting Period Progress

Recruitment and Retention

The organizational structure remains the same with one Foster Care and Adoptions (FC&A) Recruitment field administrator providing leadership for all 10 Recruitment units throughout the state. Each CWS Recruitment unit prepared a SFY 21 recruitment plan that is updated quarterly with the final update to occur in July 2021. In the updates, Recruitment supervisors and staff provide information on each completed activity and outcomes. Each unit carries out

both recruitment and retention activities in their respective regions.

Current foster families continue to assist CWS Recruitment staff with recruitment efforts in multiple ways, including radio speaking engagements, presentations for groups and churches, and sharing fostering journeys at large-scale events. Due to the COVID-19 pandemic, Recruitment staff brainstorm ways to continue to involve foster parents in non-traditional recruitment formats. As actionable ideas are developed, further information will be shared. During the fall of SFY 21, foster families continued to be a part of news articles and media interviews. FC&A recognizes that current foster parents are excellent recruitment partners because they can speak from their own fostering experience. In SFY 21, CWS Recruitment staff continue developing additional virtual recruitment options for current and former foster parent-staff collaboration. Virtual informational events are taking place for new and prospective families where a portion of the meeting is dedicated to allowing families to share their experiences.

In response to the ongoing COVID-19 pandemic, CWS Recruitment and resource family partners (RFP) are focusing on alternate ways to recruit families, such as using social media; contacting previous foster families to see if they want to re-open; and reaching out to families previously interested in fostering who did not follow through at the time. CWS is also leveraging social media and the Oklahoma Fosters Facebook and Instagram accounts to keep a strong online presence. Interactions with the Oklahoma Fosters social media pages increased when CWS Recruitment staff began creating content for the pages. The new content allowed CWS Recruitment to not only share the need for additional foster families, but also quickly share information about upcoming events and remind current families about benefit partners or important safety and/or health information. In addition, public service announcements for local radio stations are in development and families in the assessment pipeline are asked about their friends or relatives who might be interested in fostering. In July 2020, CWS Recruitment staff received training from a national trainer and expert on youth issues about virtual recruitment trends and ways to implement those strategies in SFY 21.

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, manageable regional goals. Currently, Regions 1, 2, 4, and 5 all appear to be on track to meet, or exceed, their target goals. Region 3 continues to have lower traditional approval rates by CWS Recruitment than other regions.

Region 5, with its previously lower recruitment numbers, experienced supervisor stability with two supervisors and is currently on track to surpass its goal. Region 3 also had historically lower numbers; however, supervisor stability was achieved and a sixth recruiter was added to the unit. The CWS Recruitment field administrator continues to work with KIDS and the RFP liaisons to calculate the percentage of CWS versus RFP-approved homes by region, as well as the number of RFP agencies that have a regional presence. Region's 3 data indicates over 89 percent of newly approved homes are opened by RFP agencies. Additionally, Region 3 has a high agency partner presence; however, when combining homes approved by agency partners and CWS, the total number of approved homes is similar to other regions in the state. Region 3 is impacted by the fact that all prospective applicants who contact the Resource Support Center are given a list of agencies to choose from, which is a much larger number due to the volume of agencies in the region. CWS recruitment teams often recruit for all agencies rather than just CWS. Inversely, Region 2, which historically produces the largest number of CWS recruited new homes annually, approves over 73 percent of the resources in that region compared to the RFP agencies. Region 3 is also actively working to increase awareness of the need for foster care in Oklahoma County through the Oklahoma Fosters website and a large open signing event in the spring where families can complete initial application paperwork on the spot.

Statewide, performance-based contracts for any agency interested in recruitment, approval, and support of foster families are in place with 15 agencies. Additionally, a new agency was awarded their own contract with an effective date of 1/1/2021. The new agency was previously a subcontractor for another agency, but will cover Regions 4 and 5.

In early September 2020, recruitment goals were openly discussed during a meeting with agency partners. After consideration of the overall SFY 21 RFP recruitment goal of 440, all parties agreed to the appropriate set goals for each

agency. A recruitment goal for the new agency was discussed, but is not yet finalized.

The RFP field administrator and RFP program field representative (PFR) reviewed the proposed SFY 21 recruitment plans for all agencies and provided feedback. For agencies that appeared to struggle writing their recruitment plans, additional meetings and/or conversations were held to assist them further. By October 2020, the recruitment plans for all 15 agencies were approved. By November 2020, CWS received the first quarter recruitment plan updates from all agencies. Second quarter recruitment plan updates are due to CWS in January 2021.

From July through December 2020, RFP agencies recruited 172 new homes, which is 39.1 percent of the overall goal of 440. Three agencies reached at least 50 percent of their goal while three additional agencies reached at least 45 percent of their goal. Six agencies reached between 26.1 and 35.7 percent of their goals. The remaining three agencies reached 10 percent or less of their goals.

The CWS RFP unit implemented actions designed to assist agencies behind in their recruitment progress. Each month, the homes that were opened by these agencies are reviewed by RFP PFRs. The CWS RFP unit meets internally to discuss the agency partners' recruitment efforts. Beginning in October and November 2020, Recruitment Progress Collaboration (RPC) meetings were held with RFP agencies struggling to make the necessary progress towards their recruitment goals. These meetings are ongoing and are attended by RFP PFRs and applicable agency staff. Each identified agency has an individual meeting to discuss recruitment goal progress, ongoing recruitment efforts, and barriers to recruitment. PFRs provide feedback and offer suggestions or ideas, when appropriate. The meetings will continue until the end of the SFY or until the RFP agency is on track with its recruitment progress.

Follow-up contact continues with supported foster parent applicants in the approval process for over 90-calendar days. From July 2020 through December 2020, 78 families completed surveys. Six families reported agency-specific barriers and 10 families reported personal barriers. The remaining 62 families did not report any barriers. These survey results continue to indicate that there are not any ongoing systemic issues, which is consistent with surveys completed over the past 18 months. The surveys are a permanent part of the RFP process; the responses will continue to be used to address concerns reported by applicants on a case-by-case basis. When a trend or systemic issue is identified, RFP staff and individual agency partners work together to immediately address it.

CWS Recruitment units continue their partnership with RFP agencies, therapeutic foster care (TFC) recruitment, and Developmental Disabilities Services (DDS) recruitment for events, when possible. Regional CWS Recruitment units are setting up ongoing collaboration meetings with agencies in their areas, with Regions 1 and 4 already having successful meetings in place. CWS implemented a quarterly meeting with agency partners, including TFC/Intensive Treatment Family Care (ITFC) and Tribes in March 2020, with the second meeting completed in July 2020. Additional meetings have not occurred since July 2020, but attempts are in process to continue these meetings with efforts focused on selecting a date for a virtual meeting and locating a speaker. The quarterly meeting, held with all Recruitment staff, both internal and external, was fruitful in further exploring regional collaborative efforts, brainstorming ideas for recruitment and retention, and developing stronger relationships among Recruitment staff.

CWS Recruitment units across the state continue to engage in retention activities. In April 2020, recruiters collaborated with the National Resource Center for Youth Services (NRCYS) to develop an online support group meeting in lieu of in-person meetings due to the COVID-19 pandemic. This online support group allows resource families to continue to interact with other resource parents and receive required annual training credit on topics useful to them. Recruitment staff works with local businesses to increase the number of community supports for families through offering assistance or discounted goods and services. The Oklahoma Fosters social media page made it a priority to highlight these businesses to bring community awareness. Recruiters across the state also continue follow-ups with newly approved families 90-calendar days post-approval to identify potential problems or issues the family may have encountered and to provide additional supports and continuity.

Communication and Supports

The OK Benefits foster parent portal continues to be the preferred avenue for prospective traditional foster and non-ID adoptive parents to submit their resource family application. CWS experienced an increase in application submissions since Phase 2 went live. November 2020 produced the highest percentage of applications to-date with approximately 60 percent of applications coming from the OK Benefits portal. Future enhancements to the OK Benefits project were paused in November 2020 at the request of the executive steering committee to focus efforts toward a new Comprehensive Child Welfare Information System (CCWIS). Though the OK Benefits system was paused, applications and documents can still be submitted through the portal and both child welfare (CW) specialists and families are still utilizing it as designed. The new CCWIS system will leverage innovations and new technology to better serve children and families. CCWIS will also serve as the new KIDS program used by CWS.

The CWS Community Partnerships team continues its work with the faith-based community through the CarePortal in partnership with the non-profit 111 Project in 23 counties statewide. Kingfisher and Woodward Counties were added in October and November 2020 respectively. Through the Community Partnerships team, training and technical assistance is available to all Oklahoma Human Services (OKDHS) staff in an effort to strengthen and expand the program statewide. The Community Partnerships team closely monitors the Centers for Disease Control and Prevention guidelines for social distancing; while creatively addressing how needs could be met by local faith-based organizations.

From 7/1/2020 to 12/31/2020, 1,656 children benefited from requests or needs that were met by churches. The estimated dollar value of these requests was \$224,517. CW specialists entered 1,141 requests and 803, 70.4 percent, were met. Fourteen outstanding requests are still open from this time period, so this rate may change. To-date, the CarePortal partnership allowed 328 churches to serve a total of 10,478 children since 2015 with a total economic impact value of \$4,156,981.

OKDHS' partnership through the CarePortal also allows 11 other agencies statewide to be requesting partners on the platform. This aspect of the partnership ensures helping families is proactive, which allows families to be assisted prior to having CWS involvement. The Community Partnerships team worked with the University of Oklahoma (OU) to create online, self-paced, modular staff training. The training is expected to be completed and implemented statewide by the end of March 2021. The Community Partnerships team completed the pilot of the CarePortal app and found that it assisted staff in keeping up with CarePortal requests and still following the required processes. The team is working to complete a statewide CarePortal app implementation plan.

Prior to the onset of the COVID-19 pandemic, NRCYS supported and coordinated 24 Network Support Groups, serving 32 counties within all five regions of the state. All Oklahoma Network Support Groups are open to CWS resource families, private resource family contracted agencies, and tribal resource families serving children in OKDHS custody.

In May and June 2020, due to the COVID-19 pandemic, CWS and NRCYS worked together to offer virtual support group meetings, with a plan to resume face-to-face Network Support Groups when safe to do so. Consequently, resource parents in each of the state's five regions had opportunities to participate in monthly support group meetings via Zoom. Each of the five monthly regional group meetings has the same trainer and topic each month. This plan continued in the first quarter of SFY 21, with virtual support groups offered in August, September, October, and November 2020. In August 2020, the topic was An Overview of Trust-Based Relational Intervention, presented by Amber Givens with the Healing, Attachment, Loving, Outreach Project. A total of 98 individuals from the five regions participated, including 72 resource parents. In September 2020, 63 resources parents and an additional 23 CW and NRCYS staff participated in the virtual support group meetings. The presentation was The Purpose Workshop – Finding Your Purpose, presented by Taylor Shekarabie with the Oklahoma Pottawatomie County Blue Zone Project, a community-based well-being initiative that discusses healthy choices that can lead to increased well-being for families. In October 2020, the topic was Educational Advocacy presented by Julia Sterr, CWS PFR for Education Services and Developmental Disabilities Program and a total of 26 parents participated. In November 2020, the topic was Oklahoma Successful Adulthood

(OKSA) program's Life Skills for Every Age, presented by NRCYS and OKSA staff with a total of 85 individuals participating, including 64 resource parents. Participant feedback after each virtual meeting indicated that resource parents liked both the virtual format and the presentation topics. Plans are to continue virtual support groups for the foreseeable future.

Prior to Oklahoma's stay-at-home order in mid-March 2020, prospective resource parents had the option to utilize either online or in-person Guiding Principles to complete their pre-service training requirements. In mid-March, in-person training was suspended, but did resume 7/11/2020 on a limited basis with masks, social distancing, and small classes to meet the needs of individuals who are not able to complete their pre-service training online. These needs included individuals with literacy, technology, or language barriers. From July through December 2020, a total of 31 in-person training cohorts/classes were held, with a total of 264 individuals completing. In-person training was again suspended in mid-December 2020 due to an increase in COVID-19 infections.

The Guiding Principles online training format remains the primary format used by potential resource parents to meet their pre-service training requirement. Feedback is still positive and families report that the training is interactive and useful. From July through December 2020 – 1,621 prospective resource parents enrolled in online training:

- 1160 individuals completed the training;
- 442 individuals withdrew from the training; and
- 438 individuals continued their participation in online trainings.

The number of completions, withdrawals, and pending completions exceeds the number of enrollees due to carryover from earlier reporting periods.

CWS requested additional information on the reasons for withdrawal from online training. The following reasons were captured for the 373 individuals who withdrew from training between July and December 2020, regardless of enrollment date:

- for 117 individuals, the trainer was never able to establish contact or contact ceased;
- for 81 individuals, the children were either returned home or were moved from the resource home due to other reasons;
- 51 individuals closed their home or withdrew their application to become a foster or adoptive home;
- 19 individuals lacked internet availability or had issues with technology;
- 54 individuals had a variety of circumstances, such as health issues (including contracting COVID-19), moving, or working out-of-state; and
- 51 individuals transferred to live training.

Oklahoma, a pilot site for the National Training and Development Curriculum (NTDC) for Foster and Adoptive Parents, sponsored by the Administration for Children and Families Children's Bureau, is currently in year three of a five-year grant. In January 2020, after the NTDC curriculum finalization by the pilot's lead agencies and completion of the trainer's guide, the implementation lead and another national trainer came to Oklahoma to train the NTDC curriculum in a Train the Trainer (TTT) course. NRCYS staff, the OKDHS state champions, and 10 NRCYS contracted trainers attended the five-day program to prepare for training of foster and adoptive parents. These individuals also attended virtual follow-up trainings to the TTT course that were hosted by NTDC and helped with trainer readiness for the pilot's initiation. NRCYS staff and their contracted trainers worked since January 2020 on preparation to begin the pilot in Canadian, Cleveland, Lincoln, Logan, Oklahoma, Payne, and Pottawatomie Counties. The pilot was delayed due to the COVID-19 pandemic; however, NTDC trainings did begin in August 2020, and the pilot will run from August 2020 through September 2022. The plan is to offer at least one NTDC pre-service training each month in the designated pilot counties. To-date, five NTDC trainings were offered and completed. Concurrently, OKDHS, through NRCYS, continues to train the state's Guiding Principles for Oklahoma kinship, foster, and adoptive families curriculum in the rest of the state. The state champions, along with NRCYS staff, currently have monthly conference calls with the NTDC national implementation and evaluation leads to discuss pilot progress.

The plan was to begin December 2020, using the Guiding Principles trainings conducted in Tulsa County, as the NTDC pilot's comparison group. Training was held in November 2020 with staff in Tulsa and contiguous counties on the project and how to engage families in the evaluation process. Since trainings were canceled in December 2020 due to the holidays and the ongoing COVID-19 pandemic, this process began in January 2021. NTDC is collecting the data from the NTDC pilot area and the comparison area. At the end of the pilot, NTDC will provide the evaluation data to CWS to allow for informed decision-making regarding pre-service training.

The NRCYS Resource Family Training and Support program offers resource families a variety of virtual trainings to meet their annual in-service training requirement on topics of relevance to the families and children in care. During this reporting period, four webinars were provided. The topics were Working with LGBTQI Youth, Hope for All Families, Fostering Positive Connections with Birth Families, and Education and Foster Care. All webinars are recorded and posted on the NRCYS website for ongoing access to this information. All resource parents are informed of the website during training and from their foster care workers as the families complete their in-service training. Additionally, NRCYS is providing expanded training options from a collaboration involving all the OKDHS-funded programs called Build Capacity to Support Children, Youth, and Families. The trainings provided under this program are all currently virtual, available to all CWS resource parents, and included offerings in the first six months of this SFY, such as a presentation titled, Don't Panic! They're Our Kids! Children with Problematic Sexual Behavior. This training will be offered again in the third quarter of SFY 21.

The use of exit surveys with foster families ended in June 2020 as FC&A transitioned to only annual survey gathering to analyze why foster families choose to stay; more quickly identify trends that need to be further assessed and/or corrected; and to have a more consistent sample size. **SFY 20 Foster Parent Exit Survey Analysis** was completed that highlighted the most significant concerns families noted. Opportunities for CW system improvements include:

- provide a positive customer service experience for foster parents;
- improve communication between caseworkers;
- provide all information known about a child at the time of placement;
- inform and educate foster parents about the court system, as well as the processes and decisions the court makes; and
- streamline the paperwork required to be a foster parent.

CWS made, and continues to make, communication improvements through its various programs to provide a better customer service experience for resource parents. A recent change is monthly meetings between the program teams for FC&A, Permanency Planning, and Child Protective Services to assess ways to improve the communication and positive information flow between the programs. CWS continues to emphasize the value of communication among specialists prior to completing monthly contacts with the child and resource family. To ensure foster parents are provided all information known about a child at the time of the placement, a new placement process centered on the Child Placement Interview between the child or youth's CW specialist and the placement line will be implemented. The placement line completes the request and emails a PDF-formatted copy to the respective Regional Placement Team where the child or youth's case is assigned. This document will be provided to the foster parent interested in placement and include the child or youth's needs, behaviors in context of their recent actions and what led to them, diagnoses, developmental narrative, medical history, school performance, and placement history. The anticipated regional roll out dates are:

- Region 3 – 2/1/2021
- Region 2 – 2/8/2021
- Region 1 – 2/16/2021
- Region 4 – 2/23/2021
- Region 5 – 3/8/2021

To address resource parent court concerns, Form 04AF055E, **Resource Parent Report to the Court**, was developed and released for use in November 2020. **CWS Numbered Memo 20-13, Resource Parent Report to the Court** was sent to CW staff on 12/3/2020. The form received positive feedback from families, CW staff, and the courts. FC&A programs continually reviews the requirements for initial and ongoing approval of a foster parent to identify ways to improve the process. The implementation of online applications and documents through the OK Benefits website has helped streamline the application and assessment process for many prospective families.

As previously reported, through collaboration with the OU Center for Public Management (CPM), FC&A programs staff developed an annual survey. The survey's themes center around burnout, congruency between CWS values and the family's values, satisfaction, support, training, and communication. Each quarter, one-fourth of the current, approved foster parent population will receive the annual survey electronically from OU CPM. The types of foster care included are traditional, supported, kinship (relative and non-relative), therapeutic, contracted, and ITFC. The survey was designed as a high-level view of all foster care experiences, rather than resource specific experiences. Data will also be used to measure the impact of changes in practice, policy, and training. Eventually, the use of predictive analytics will allow analysts to identify patterns, make predictions, and establish causation and correlation about why foster families no longer provide services. Annual reports will be created by OU CPM and distributed by FC&A program staff.

For the period covering July through December 2020, a summary of key questions from the annual survey follows. Of the 418 individuals who participated, 71 percent were with CWS and 29 percent with an RFP agency. The length of time as a foster parent for this sample group showed:

- 43.5 percent were a resource parent for less than two years;
- 43 percent for longer than two years up through seven years; and
- 13.5 percent reaching greater than eight years as a foster parent.

Additionally, when asked how much longer they plans to be a foster parent, a combined 71.3 percent noted "for as long as I am able" and "for at least a year" with 61.3 percent of those answers being "as long as they are able". When comparing the overall data for the six-month period to the initial period of July through September 2020, a slight positive growth is already showing with an increase of 2 percent in being foster parents greater than eight years and an increase of 2 percent of respondents saying they plan to remain a foster parent "for as long as they are able".

The survey includes questions that focus on retention, support, and communication. The data will be monitored quarterly, semi-annually, and annually to help guide new strategies CWS utilizes in ongoing efforts to better serve and support resource families. A sample of the questions with responses are as follows.

To what degree do you feel that you receive the recognition you deserve:

- 29.1 percent responded with "a lot"
- 42.8 percent responded with "some"
- 16.5 percent noted "only a little"
- 11.6 percent indicated "not at all"

In the past year did you receive adequate support for your role as a foster parent:

- 31.4 percent responded "extremely adequate"
- 42 percent responded "somewhat adequate"
- 10.6 percent were neutral at "neither adequate nor inadequate"
- 10.9 percent responded "somewhat inadequate"
- 5.1 percent responded "extremely inadequate"

When I need to communicate information or ask a question, I am able to reach the person that can help me:

- 40 percent noted "strongly agree"

- 37.6 percent noted "somewhat agree"
- 21 percent noted "neither agree nor disagree" or "somewhat disagree"
- 1.4 percent noted "strongly disagree"

The information that I receive from OKDHS, or my agency, about children or potential placements, such as medical, behavioral, developmental, and educational needs is accurate.

- 23.6 percent marked "strongly agree"
- 36.5 percent marked "somewhat agree"
- 16.7 percent were neutral with "neither agree nor disagree"
- 15.3 percent marked "somewhat disagree"
- 7.9 percent marked "strongly disagree"

Would you recommend fostering with OKDHS (or agency) to a friend:

- 82.2 percent responded with "yes"
- 17.8 percent responded with "no"

As of this report, only six months of annual survey data was collected; thus, the baseline continues to be developed and will be finalized at the end of SFY 21. The first two quarters have not shown any major immediate concerning trends partly due to a small number of months in the sample size; however, each quarter will continue to be assessed. Based on trends, FC&A will evaluate current practices and make recommendations to increase foster family satisfaction and retention.

In the summer of 2020, FC&A programs staff determined the original messaging about retention calls to homes that requested closure needed updating. In September 2020, the changes were explained during the FC&A supervisor meeting held via Zoom and were followed by an email that same day. The retention responsibility is now focused on the CW specialists and the culmination of their interaction and knowledge of the resource families. The CW specialist reviews the family's history and then staffs his or her thoughts with their supervisor. The CW specialist then contacts the family and completes retention efforts. After retention efforts when the family still wishes to close, the supervisor contacts the family to thank them for providing care for children in OKDHS custody; inquires about their experience working with OKDHS; and asks for suggestions the resource family might have.

CWS continues to use both the YI023 – Open Resource report and the YI035 – Closed Resource report to monitor retention contacts. For the months of July through December 2020, per the YI023 – Open Resource report, two homes received retention contacts and remained open. Per the YI035 – Closed Resource report, 30 homes received a retention contact and eventually closed. While this is only a slight increase from the last reporting period, communication to staff about the change to retention contacts occurred at the end of September 2020, which means the impact of the changes will not be clear until the next reporting period. Proactive efforts will be made by FC&A program staff and a reminder will be shared with the field about the shift of the retention contact responsibility to the specialist level, as well as additional clarification on what a retention contact is, how it is entered, and when it is to be used. The target date for these reminders is February 2021.

Midway through 2020, CWS appointed a FC&A specialist to monitor social media sites under the acting title of social media liaison. This position's purpose is to improve customer service and retention of foster families by addressing concerns/questions quickly and working to improve communication overall. In September 2020, this specialist began work on the reporting format using a sample monthly report. In November 2020, the efforts made on finalizing the report format were interrupted due to the specialist accepting a promotion opportunity within OKDHS. The new FC&A specialist, assigned as the social media liaison, has resumed efforts of the previous liaisons work. The monthly report is now on-schedule to be completed by the end of April 2021.

COVID-19 Response

In late August 2020, a letter was sent to resource families as well as FC&A staff regarding an in-home childcare option that became available through the Child Care Development Block grant. By including foster families as essential workers, this option, Kith Care, allowed families to use a relative to provide in-home child care for child(ren) in OKDHS custody placed in their home. The program's requirements were provided in the letter, as well as on the Kith Care website. This program was originally approved until 12/31/2020, but then extended until 2/28/2021. As of 1/11/2021, 272 foster family applications were received for Kith Care and 232 were approved. The manner of processing the applications did not differentiate between the various types of foster homes. In addition, 174 OKDHS employees were approved for this service.

CWS Recruitment staff continues work to approve homes in the required 60-calendar day time period despite the ongoing COVID-19 pandemic that delayed obtaining medical exams, behavioral health references/records, and out-of-state records. Additional consideration is given to families who may be experiencing illness in their homes, as well as those who are teachers or first responders who may need additional time to complete the approval process.

To assist CWS and RFP agency staff in addressing some of the uncertainty regarding children returning to school in the midst of the COVID-19 pandemic, return to school guidance was provided to CW field staff and agency partners in August 2020. Additionally, CWS and RFP agency staff were asked to have meaningful conversations with their families about school plans for all foster children, child care arrangements, and alternate plans if school plans changed due to the COVID-19 pandemic. All staff held these conversations with their families and provided information about their families' plans to FC&A programs and their CWS RFP liaison.

Several agency partners articulated that the COVID-19 pandemic impacted their recruitment and certification processes. Efforts to mitigate some of these challenges are ongoing. Beginning in the fall of 2020, a noticeable increase in the number of COVID-19-related issues were reported during pipeline calls with agency partners. The reported challenges include, but are not limited to, applicants testing positive for COVID-19; applicants having to quarantine because of an exposure; changes in an applicant's work schedule; changing finances due to the pandemic; and schools going virtual due to COVID-19. All of these challenges had some effect on families' ability and willingness to progress through the certification process.

A regularly scheduled meeting with agency partners to answer questions and provide updates on the COVID-19 pandemic was implemented in March 2020. These calls are held bi-weekly and all agencies are invited to participate. The COVID-19 updates and questions decreased as everyone became adjusted to the new normal; however, the calls will continue in 2021. To further assist agencies during the pandemic, a number of actions were taken. Digital signature capabilities were added to numerous forms. Beginning in August 2020, agencies were allowed to transition from monthly in-home face-to-face visits with foster families to quarterly face-to-face in-home visits. Caseworker visits that are not completed in-home are to be completed via a face-to-face virtual platform.

Resource Family Assessment (RFA) training, which is required before RFP agency staff can write home studies or annual updates, was unavailable since the COVID-19 pandemic began due to the training's length and depth of content. To alleviate some of the potential delays in certification of new families that this might have caused, a training waiver was implemented. To obtain the waiver, an agency director is required to send a request for each staff member who needs a waiver explaining why the waiver needs to be granted. The request is reviewed and approved or denied by the RFP field administrator. When granted a waiver, the agency staff are trained by an experienced trainer within their agency who has completed RFA training. The trainer is asked to follow the training waiver guide that was created and provided to all agency partners. Anyone granted a waiver is required to attend RFA training when it becomes available. As of January 2021, 17 waivers were granted. FC&A programs plans to offer virtual RFA training in March 2021 for those individuals given a waiver. RFP agency staff will be able to attend virtual training from March 2021 forward without the need for a waiver.

Additionally, Resource Family Training (RFT) Training of Trainer was unavailable since the COVID-19 pandemic began. Because agency partners train their own families, this caused some challenges. Most supported resource family applicants choose to complete RFT training online, which requires session review calls be completed at designated points in the training. Instructions for completion of these calls are covered in this training. To assist in resolving this potential barrier, NRCYS created a training focused specifically on how to guide families through online RFT training. Two sessions specifically for supported agencies were offered in September 2020 and one session was offered in December 2020.

CWS continues to utilize pre-service training waivers and fingerprint exceptions for kinship resource approval in limited instances. Approval for pre-service training waivers was given on 4/28/2020 for individuals who experienced barriers due to English literacy and technology requirements. Between 5/4/2020 and 12/30/2020, pre-service training waivers were granted to 28 families. As of 12/30/2020, 16 of those families completed training, 10 are at varying stages in the training, and two closed their resource without completion. Approval for Stafford Act fingerprint exceptions was given on 3/13/2020 for individuals who are part of a vulnerable population or access to a fingerprint location is over an hour away from their residence. Between 3/13/2020 and 12/30/2020, Stafford Act fingerprint exceptions were granted to 11 individuals. As of 12/30/2020, five individuals completed fingerprints, three individuals are pending fingerprint printing, and three individuals closed their resource without completion.

Conclusion

Through the dedication and work of staff, in conjunction with the implemented Core Strategies, the number of new recruited homes opened is continuing to strengthen how CWS meets the needs of children in OKDHS custody. The global COVID-19 pandemic created many new and unique hurdles to interacting with the public and recruitment efforts. That impact was felt heavily by CWS Recruitment and RFPs starting in March 2020; CWS and RFPs found a way to finish SFY 20 with the recruitment of 832 new homes. For the first half of SFY 21, the COVID-19 pandemic continued to impact people's lives, finances, family health, and social interactions as the number of active cases increased and limited the level of access and interaction. However, CWS and the RFPs recruited 348 homes through the end of December 2020 and continues to work diligently to reach the SFY 21 goal of 880 new homes. CWS continued to improve the approval process and made the process and forms more accessible and available, as evidenced by 60 percent of applications coming from the OK Benefits portal in November 2020, when Phase 2 went live. This success led to the new CCWIS working to leverage technology to better meet families where they are and allow them more control over their part of the process. The challenges during this reporting period have grown with the COVID-19 pandemic, but CWS' evolution continues as work is focused on retention of foster families through improved customer service; providing quality homes for children in care; increasing the access levels families have to processes; and strengthening the bonds with RFP agencies and community partners.

2.3: New Therapeutic Foster Care Homes

Operational Question

How many new Therapeutic Foster Care (TFC) homes were opened in State Fiscal Year (SFY) 21?

Data Source and Definitions

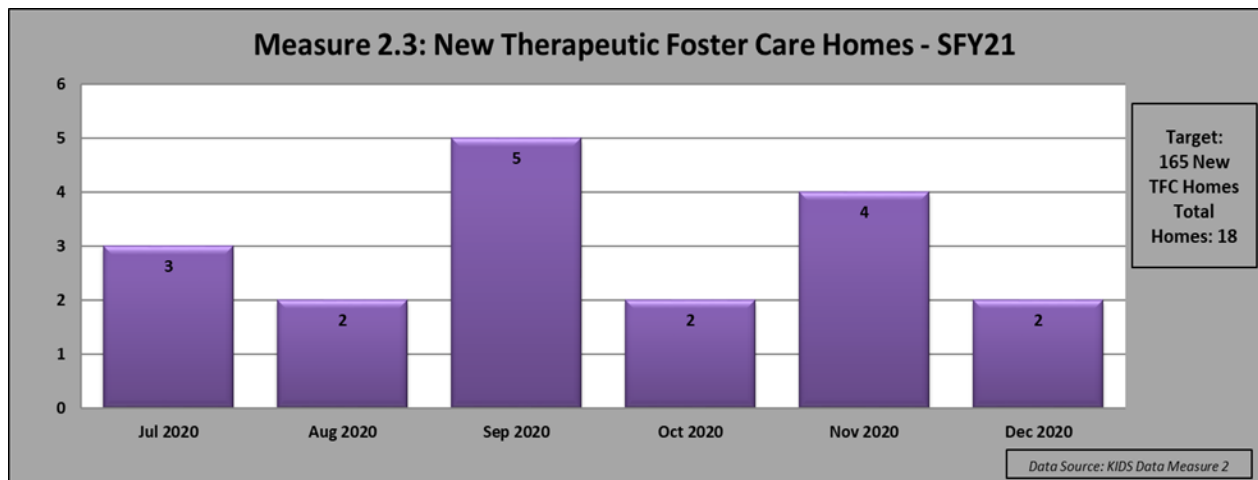
Total count of new TFC homes includes all new TFC homes by month that were opened using the agreed upon criteria.

Trends

Reporting Period	Population	Result	
SFY 21 Baseline		109 TFC homes open as of 7/1/2020	
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	
7/1/2019 – 12/31/2019	All new TFC homes opened in the first half of SFY 20	34 TFC Homes	63 Total TFC Homes opened in SFY 20
1/1/2020 – 6/30/2020	All new TFC homes opened in the second half of SFY 20	31 TFC Homes	
7/1/2020 – 12/31/2020	All new TFC homes opened in the first half of SFY 21	18 TFC Homes	18 Total TFC Homes opened in SFY 21 (Year-to-Date)
Target		165 New TFC homes opened by 6/30/2021	

Section 3, Table 2.3-1



Section 3, Graph 2.3-1

Data Commentary

As of 12/31/2020, Child Welfare Services (CWS) opened 18 TFC homes that were counted as new according to Pinnacle Plan criteria. Of these 18 therapeutic homes, 16 homes were opened as TFC and two homes opened as Intensive

Treatment Family Care (ITFC). The target for new homes by the end of state fiscal year SFY 21 is 165. As of 7/1/2020, 109 TFC homes were open statewide. During the first half of SFY 21, 19 TFC homes opened and 22 TFC homes closed, leaving 106 homes open as of 12/31/2020, for a net loss of three homes.

Reporting Period Progress

CWS continues to build a robust continuum of care (COC) through ongoing efforts to improve and expand the utilization of TFC and ITFC. TFC programs staff continued to develop partnerships with agency providers focused on recruitment and retention of foster families skilled and ready to provide care to children with additional emotional, behavioral health and developmental needs.

Oklahoma Human Services (OKDHS), in coordination with agency partners, continued its focus on increasing the capacity of both the TFC and ITFC programs to serve children with behavioral health needs in a family-like setting. Effective 9/14/2020, agencies were able to request a six-month authorization for TFC. In ongoing efforts to streamline operations between TFC/ITFC and supported agencies, the TFC/ITFC programs merged into the Resource Family Partnerships (RFP) unit in December 2020.

One new agency joined the TFC/ITFC team of providers effective 10/1/2020. Another agency began pursuing a TFC/ITFC contract in the second quarter of SFY 21 with a tentative plan for their contract to begin in early 2021. Efforts are ongoing to assist an additional agency in obtaining a TFC/ITFC contract. One agency informed OKDHS that they are ending their contracts for TFC and ITFC effective 1/31/2021, and another agency is ending its TFC/ITFC contract effective mid-January 2021.

TFC and ITFC Waiting Lists

Prior reports noted that the certificate of need (CON) was valid for 90-calendar days; however, the CON is only valid for 45-calendar days. Previously when the CON was expiring, TFC program staff would end date the child or youth's line of authorization. This process was modified and since October 2020, TFC programs has not end dated the child or youth's line of authorization when the CON expired at 45-calendar days. Instead, TFC programs staff communicated with the child welfare (CW) specialist at set intervals to discuss if the child or youth still meets criteria for this level of care. When the child or youth still meets criteria at the 45-calendar day mark, the CW specialist updates the application with the current information and assesses if the child still qualifies, and if so, TFC programs continues the line of authorization. When the child or youth no longer meets criteria for the level of care, the line of authorization will be closed. In December 2020, TFC programs implemented a process to check in with the CW specialist after the original "sounds like" determination is given for the child. This process supports ongoing efforts to monitor the waitlist. Further discussions will be held with the KIDS division to set up email notification reminders that will automatically be sent to the CW specialist at designated intervals for when a child(ren) or youth is still on the waiting list. This email will serve as prompter to remind the CW specialist to communicate with TFC programs.

Applications continue to be received for TFC/ITFC, and in August 2020, the cover sheet was revised. The revision was implemented on 11/2/2020 in order to provide the CW specialist reasoning for the decision made for the, "does not sound like" determination. All "does not sound like" decisions are forwarded to the COC program to be assessed for Enhanced Foster Care (EFC) services and supports.

OKDHS had one request for the first level reconsideration process and no requests for the second level since starting the new process in August 2020. When further insight is needed in regards to TFC or ITFC, TFC program staff continue to collaborate with the Oklahoma Health Care Authority (OHCA).

QUALITY SERVICES WITHIN THE TFC PROGRAM

Treatment Team Meetings

Efforts are ongoing to permit TFC/ITFC program staff to attend treatment team meetings along with the agency partners and the CW specialist assigned to the child or youth. This would allow for increased collaboration between the CW

specialist, programs staff, and agency partners and create an environment to further discuss progress made towards the child or youth's permanency goal. Other items addressed are next steps for successful discharge from TFC/ITFC and what steps are taken to secure a lower level of placement that is still a family-like setting. TFC programs will be addressing different ways to promote conversation focused on permanency planning efforts for children placed in TFC and ITFC homes.

Mental Health Consultations

TFC programs continues to maintain a follow-up process on mental health consultations for all children that have a "sounds like" determination and are on the waiting list or receive a "does not sound like" determination. Both types of determinations are referred to regional mental health consultants (MHCs) for consultation with the CW specialist. TFC program staff coordinates the MHC referrals by emailing the CW specialist and the regional MHC after a child receives one of these determinations. This information is forwarded to COC Programs for further assessment for EFC. After a referral is sent, the MHC is responsible for contacting the CW specialist and scheduling a consultation through an Outlook calendar invitation within two-business days. After the consultation is complete, the MHC emails to the TFC program staff and the CW specialist a detailed summary of the consultation that outlines recommended services and supports. The TFC program staff enters this summary into a KIDS Contact.

Recruitment Efforts

Building capacity in both TFC and ITFC is a primary focus with agency partners. The SFY 21 overall recruitment goal for both programs is set at 165 homes. With the exception of the new agency, whose contract did not go in effect until 10/1/2020, each agency was tasked with recruiting 23 TFC families and 10 ITFC families. The SFY 21 TFC and ITFC recruitment goals for the new agency are still being determined.

The RFP field administrator, field manager, and program field representatives (PFRs) reviewed the proposed SFY 21 recruitment plans for all agencies and provided feedback. For agencies who needed additional support in developing their recruitment plans, extra meetings and/or conversations were held to assist them further. The recruitment plans for all six agencies were approved in November 2020; however, the agencies were actively making recruitment efforts while the plans were being assessed. First quarter recruitment plan updates were received in November 2020 and the second quarter recruitment plan updates are currently in progress and due in January 2021.

From July 2020 through December 2020, TFC/ITFC agencies recruited 16 new TFC homes, which is 13.9 percent of the overall goal of 115. One agency reached at least 30.4 percent of their goal. The remaining four agencies reached between 0 percent and 17.4 percent of their goals. Partner agencies recruited two new ITFC homes, which is 4 percent of their goal. Two agencies reached at least 10 percent of their goal. The remaining four agencies reached 0 percent of their goals.

Several actions were designed and implemented to assist agencies that have fallen behind in their recruitment progress. Each month the homes that were opened by these agencies are reviewed by PFRs. Programs staff meets internally to discuss recruitment efforts of the agency partners. Beginning in October and November 2020, Recruitment Progress Collaboration (RPC) meetings were held with agencies who were struggling to make the necessary progress towards their recruitment goals. For agencies that hold supported and TFC/ITFC contracts, their RPC meetings were combined in an effort to streamline the support provided. These meetings continue and are attended by PFRs and applicable agency staff. Each identified agency has their own individual meeting where progress towards their recruitment goals, ongoing recruitment efforts, and any barriers are discussed. PFRs provide feedback and offer suggestions and/or ideas when appropriate. RPC meetings will continue until the end of the SFY or until the agency is back on track with its recruitment progress.

Child and Adolescent Needs and Strengths (CANS) Assessment

In July 2020, the Praed Foundation provided an initial CANS algorithm and an Oklahoma CANS training manual. The CW Clinical Team and program leads reviewed the algorithm to assess usability and effectiveness in determining the

appropriate level of need. The initial algorithm was cross-referenced with a population of children placed in congregate care to inform ongoing utilization. Revisions to the algorithm were needed to ensure the tool's utility. EFC criteria was not included in the initial algorithm; therefore, an EFC determination is also being added to the algorithm.

CWS will utilize CANS to support the determination of the right level of foster care to meet the child's unique needs. CANS will be administered to children in EFC, TFC, ITFC, and congregate care. The CANS will be re-administered every six months as long as the child or youth remains in the above-listed levels of care. To align these efforts with those of the Family First Prevention Services Act, a third party assessor will complete the CANS on this population. OKDHS is currently developing a contract proposal with the University of Oklahoma to hire bachelor- and master-level clinicians for CANS administration.

The CANS will be documented within the child or youth's case in KIDS. Each CANS item will be rated by the clinician completing the CANS and entered into KIDS, along with the level of care recommendation. The clinician will also complete a narrative report to summarize the CANS outcome and document the service array recommendations. The narrative report will be uploaded in the KIDS case. The assigned specialists will utilize the information to support treatment planning and ongoing service array. Additionally, CWS Programs will use the information to inform ongoing needs analysis of children experiencing foster care.

Members of the OKDHS Clinical Team are working closely with the Praed Foundation to finalize the algorithm. At this time, OKDHS is prioritizing the third-party assessor contract and the CANS algorithm. When the contract is approved, the hiring process for 10 clinicians will occur. Once clinicians are hired, CANS utilization will begin. Another cross-reference assessment will happen when the revised algorithm is provided to CWS to ensure its usability and effectiveness. These pieces must be in place by 10/1/2021, for the implementation of the Family First Qualified Residential Treatment Programs (QRTP) placement processes.

COC Update

The 2019 needs analysis completed on the cohort of children with complex needs supported the development of key strategies to address themes discovered through the analysis. The analysis confirmed that significant practice, process, and programmatic changes were necessary to build a CW system which timely and systematically assesses the therapeutic needs of children in care and ensures those needs are met, when appropriate, in a family-based setting. CWS continues to develop the infrastructure needed to enhance the CW system in order to meet the complex needs of children. The eight COC workgroups are actively pursuing these goals. The steering committee last met in October 2020 and planned to meet in January 2021. This meeting was postponed after implementation of the new child placement process and developments within EFC. The COC steering committee will reconvene in March 2021.

Finance Streams and Contracts

This workgroup remains committed to ensuring the appropriate finance streams are available and that all contracts are assessed and updated to meet COC goals and objectives. Over the past several months, this workgroup was involved in discussions around funding and contracts, including the Institutions for Mental Disease Medicaid Waiver and Managed Care Contracts. Currently the group is supporting the process of securing the CANS third-party assessor contracts. Additionally, this group is also involved in restructuring the current Difficulty of Care rate, which will utilize the CANS results to support determination of the supplemental rate amount that a resource family can receive.

Communications and Stakeholders

This workgroup's primary focus is ensuring that internal and external voices are represented within the development of the COC and that all COC aspects are effectively and consistently communicated both internally and externally. This workgroup worked closely with the EFC and Placement Request and Screening workgroups to support internal and external communication of ongoing EFC requirements and of the new child placement request process. It was decided that the Communications workgroup would primarily focus on communication with external partners. The workgroup collaborated with the OKDHS External Communications and Media Relations administrator about the best way to communicate with external providers and identify online platforms that could support ongoing external communication

effectively. Currently, the workgroup is prioritizing external communication regarding the revised child placement process.

Capacity Building and Service Array

This workgroup is committed to understanding and expanding the current service array within all parts of Oklahoma and supporting the ongoing program improvement of congregate care and TFC programs. A service mapping survey was provided to all behavioral health clinicians in Oklahoma to better understand the variety of evidence-based treatment modalities in Oklahoma. Information collected from the survey was used to identify service arrays and accessibility across the state. A Resource Parent Guide was developed by the Clinical Team to support resource parents be informed consumers of therapeutic interventions. The workgroup worked closely with the Building Bridges Initiative to engage group home providers regarding programming improvements and with families. In 2020, the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) administered a survey to consumers of mobile crisis intervention. Overall, the survey's data indicated that consumers reported mobile crisis to be an effective and helpful service. A focus group was completed with internal CW specialists and supervisors to better understand how to improve and enhance the utilization of the mobile crisis response service.

Key trends.

- Training needs to be updated; feedback indicated it had been three years since the last training;
- Many thought the service was helpful; however, often times it was too little, too late, and families were wanting a youth to be moved as opposed to stabilizing them;
- There were variabilities in responses with thoughts that when law enforcement responded it escalated care;
- OHCA noted that it is no longer a 24/7 entity to call to find a bed; since the mobile crisis team often knows the players, calling mobile crisis for this help is appropriate;
- Additional communication is needed when mobile crisis is called to a youth in OKDHS custody that it gets relayed to the MHC; and
- CW staff and families should have the mobile crisis number on hand, such as a refrigerator magnet or card.

This information informed discussions with ODMHSAS. A webinar about the service will be developed and uploaded to the Clinical Team's webpage. Focused discussions with ODMHSAS will continue to occur regarding the access to and utilization of mobile crisis response to ensure the service has the intended outcome.

Placement Request and Screening

This workgroup focused on developing a unified placement request for all levels of care and CANS implementation efforts. **New Placement Process Overview Training** was deployed for the new Child Placement Interview and Regional Placement Teams process. All Child Protective Services (CPS), Family-Centered Services, and Permanency Planning (PP) staff were required to take the training. A **Placement Process Quick Reference Guide** was also provided to staff. The new placement process, utilizing the new placement request, will roll out in the regions as listed:

- Region 3 – 2/1/2021
- Region 2 – 2/8/2021
- Region 1 – 2/16/2021
- Region 4 – 2/23/2021
- Region 5 – 3/8/2021

This process change will result in better placement stability, increased well-being, and identification of the best-fit placement level. Additionally, this process provides an increased support for the CW specialist. Initial feedback about the process is positive, suggesting that the streamlining of multiple placement request processes into one and the quality of a child placement interview process supports gathering quality information about the child's strengths and needs and results in a better placement match.

EFC

This workgroup's goal is to embed EFC in the placement continuum and use the enhanced supports and services before a child is impacted by placement instability. The most recent update is provided in the EFC section.

Continuous Quality Improvement (CQI)

This workgroup's primary goal is to ensure that all processes created are streamlined including a clear assessment and evaluation process. The group worked closely with the Annie E. Casey Foundation in November – December 2020 to begin developing a matrix that identifies how Child and Family Services Review outcomes, the Pinnacle Plan core strategies, and the COC align. This matrix will be utilized to ensure collaboration of efforts in working towards common goals. Additionally, the CQI unit supported verification tool development for use during the EFC verification process. The CQI programs team will also support EFC case reviews.

Specialized Foster Care (SFC)

Ongoing meetings occurred between CWS and Developmental Disabilities Services (DDS) leadership teams to develop a plan for transitioning SFC families to CWS. Issues related to financial reimbursement delayed the program's transfer. A plan is currently under consideration to support SFC families through EFC and additional specialized services.

EFC

The EFC program began in December 2019 and has expanded significantly. As of 1/29/2021, 260 children were served in the EFC program. Seventeen additional children were served through EFC and successfully achieved permanency. A total of 76 children received EFC services, but exited due to transitioning to higher levels of treatment, foster care, or other reasons. COC Programs staff reviews these cases periodically to ensure the child or youth's needs are met with the appropriate level of services and supports. Efforts to target children or youth at-risk of placement instability include utilization of the Placement Stability Move Report and the four or more Elevated Child Behavioral Health Screeners Reports to communicate with primary specialists about the utilization of EFC services and supports occur monthly.

Over the last several months, CoC programs has prioritized the development of the ***Enhanced Foster Care (EFC) Program Description***. The description outlines EFC criteria, service and support array, and roles and responsibilities of the treatment team. It also provides a side-by-side comparison of the EFC/TFC/ITFC programs. COC programs has utilized this description to develop the ***Enhanced Foster Care Service & Support Plan, Enhanced Foster Care Monthly Meeting, and Enhanced Foster Care Assessment Addendum***.

From December through February 2021, COC Programs staff completed meetings with leadership teams in every region to discuss the EFC program description and how to utilize the services and supports to stabilize placements and promote permanency. A focus of the discussions included CPS referrals to ensure that services are put in place in the first placement. In January 2021, the COC program administrator trained Foster Care and Adoptions (FC&A) leadership teams and received feedback regarding the EFC Service and Support Plan and roles and responsibilities of FC&A and PP staff. Many supervisors shared stories of success, reporting that they have seen firsthand how EFC adds an elevated level of support and services and stabilized placements for children and youth with challenging behaviors.

An EFC webinar was developed and will deploy to CW staff in February 2021. Primary CW specialists responsible for children and families who receive EFC services and supports will be required to take the training first before deployment to all staff. The EFC Service and Support Plan is to be updated for each EFC case by mid-March 2021. Monthly meetings will begin in February 2021 and completion tracking will begin March 2021. Additionally, resource parents who receive EFC will be required to take 12 hours of Pressley Ridge training. The first set of families will begin training the week of 2/15/2021. Additional training dates will be developed for the month of April 2021 and an ongoing schedule throughout the calendar year will be completed.

The COC Programs team is working diligently to complete the EFC verification tool. COC Programs will utilize the tool to support the ongoing CQI/Quality Assurance process and will utilize the outcomes to inform program improvement

processes. COC Programs continues close collaboration with ODMHSAS to ensure that initial consultations are occurring timely and that providers are expediting service initiation. OKDHS continues ongoing discussions with ODMHSAS regarding a qualitative review process of the individualized service array for children receiving EFC. COC Programs continues to build capacity with private providers to increase the pool of providers offering EFC services and supports.

The COC Programs team will begin recruitment efforts of EFC homes in February 2021 through the ongoing Foster Care Recruitment team efforts and the utilization of the Foster Care Association of Oklahoma's (FCAO) social media page. FCAO has committed to support the EFC program. The COC program administrator will provide information to the members of the social media page regarding the program and the need for EFC homes.

Multidisciplinary Team (MDT)

The MDT process shifted from a statewide team to regional teams from June – September 2020. Additionally, three PFRs were hired to focus on the facilitation, follow-up, and data analysis of the regional MDTs. An additional position was recently approved and one additional PFR will be hired to support this process. Each regional MDT is composed of program leads from PP, Specialized Placements and Partnership Unit (SPPU), FC&A, COC Programs, the Clinical Team, Community Partnerships, DDS, Education, Tribes, RFP directors, TFC agencies, and other key external partners.

Regions 4 and 5 implemented the regional MDT process in June 2020, Regions 1 and 2 implemented in August 2020, and Region 3 implemented in September 2020. By October 2020, all regional MDTs were fully functioning. Regional field analysts filled in as MDT facilitator until the hiring of MDT PFRs was completed. Because the regional field analysts used the statewide MDT tracking process, inconsistent data collection problems arose when applying the process to regional data collection. In January 2021, a meeting was held with KIDS to develop a more sophisticated tracking mechanism for the population size and to begin tracking trends. This report is expected to be ready by March 2021. The following data represents the number of children and youth staffed through the regional MDT process.

- Region 1: 81 children staffed since 9/1/2020
- Region 2: 102 children staffed since 8/1/2020
- Region 3: 61 children staffed since 9/1/2020
- Region 4: 129 children staffed since 8/1/2020
- Region 5: 69 children staffed since 9/1/2020

The regional MDTs focused on children and youth who experience a shelter placement by staffing the children and youth within a week of initial placement and then in ongoing intervals until the child or youth exits. Many successes occurred with staffing this population through the MDT process, as the specialist has a regional team supporting them in identifying service array, the most appropriate level of care, and PP efforts. Additionally, this team of individuals works closely together to streamline efforts for the child or youth by identifying actionable items for completion to support the child or youth's placement, permanency, and well-being goals. The regional MDTs also staffed children and youth in congregate care settings, residential hospital settings, children with specialized needs, such as DDS, and requests made by the regional leadership.

Data collection continues to be critical and the new sophisticated MDT report currently in development will support tracking outcomes and trends for MDT staffed children and youth. The populations for MDT staffing will continue to be children experiencing a shelter placement, children and youth placed in a QRTP beginning at four months, and children or youth receiving residential treatment beginning at 90-calendar days. This population of children and youth were identified after a detailed review of shelter admissions indicated that these placement types resulted in a higher likelihood of experiencing a shelter stay. As an effort to streamline strategies and staffings, youth identified in the 6.4 cohort will also be staffed through the MDT process.

IMPACT OF COVID-19 PANDEMIC

TFC/ITFC Program

The COVID-19 pandemic presented new challenges in TFC and ITFC service delivery. TFC and ITFC providers began using telehealth to provide their individual and family counseling appointments, facilitate treatment team meetings, and to complete Pressley Ridge training. OHCA continually reviews the use of telehealth dependent upon the COVID-19 pandemic. Approval to continue to use telehealth was extended until December 2020. Providers were allowed to conduct their Resource Family Assessments a little differently as well. Providers were required to physically visit the home in-person at least one time, and then other activities, such as family interviews were allowed to be completed virtually. Pressley Ridge training courses were offered virtually, which allowed participants to learn in their own homes without the required travel. Virtual access also allowed families to participate in trainings with other agencies that they may not have otherwise had the opportunity to attend. Feedback from providers was positive about virtual services overall. Discussion took place about allowing some of these virtual platforms to continue when the COVID-19 pandemic is resolved; those determinations will be decided at a later date. TFC and ITFC providers were resilient in adjusting to this new way of providing quality services.

In July 2020, agency partners participated in the recruitment collaboration meeting facilitated by CWS recruitment. Recruitment during the COVID-19 pandemic was one of the topics covered during this meeting and agency partners were active participants during these discussions.

Regularly scheduled meetings with agency partners to answer questions and provide updates on the COVID-19 pandemic began in March 2020. These calls are held bi-weekly and all agencies are invited to participate. The COVID-19 pandemic updates and questions decreased as everyone became more adjusted to the new normal; however, the calls are continuing in SFY 21.

In an effort to further assist agencies during the COVID-19 pandemic, a number of actions were taken. Digital signature capabilities were added to a numerous forms. Beginning in August 2020, agencies were allowed to transition from monthly in-home face-to-face visits with foster families to quarterly face-to-face in-home visits. Caseworker visits that are not completed in-home are competed via a face-to-face virtual platform.

To assist agencies in addressing some of the uncertainty regarding children returning to school in the midst of the COVID-19 pandemic, return to school guidance was provided to agency partners in August 2020. Additionally, agencies were asked to have meaningful conversations with their families about school plans for all children and youth in OKDHS custody, childcare arrangements, and potential back-up plans when school plans change. All agencies held these conversations with their families and provided information about their families' plans to programs staff.

EFC

The service array provided through EFC primarily transitioned from in-home services to telehealth. Most certified community behavioral health center providers are now offering an in-person option that occurs in the providers office. Telehealth continues to complicate efforts surrounding crisis intervention as clinicians are not responding in-person for crisis intervention, in most cases. The lack of in-person response directly impacts the service array and placement stability that children and youth receive through EFC. CWS works closely with ODMHSAS and other private and specialized providers to create innovative solutions to these challenges, as a one-size-fits-all approach is not an option. The statewide mobile crisis intervention hotline is utilized when the provider is unable to provide 24-hour crisis intervention.

Telehealth also presented challenges and opportunities for services. Some children have such complex needs that telehealth is not a viable service. ODMHSAS partnered with CWS in many situations to identify programs that made exceptions and allowed clinicians to complete in-home services, but this still posed challenges as the service array was not always consistent. Additionally, EFC placements in rural Oklahoma benefited from the availability of telehealth services through virtual platforms.

Referrals for services are still a challenge currently, as many providers are trying to navigate how the COVID-19 pandemic impacted their specific system. Children and families who receive EFC reported a delay in service initiation due to the limited availability of providers at this time. Some of these issues are a result of miscommunication, but it is evident that collaboration of multiple providers during a pandemic presents its own set of challenges that are difficult to navigate. These challenges, in some cases, caused significant delays in services and ultimately contributed to placement instability.

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, Oklahoma Human Services (OKDHS) began using the YI768C 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.

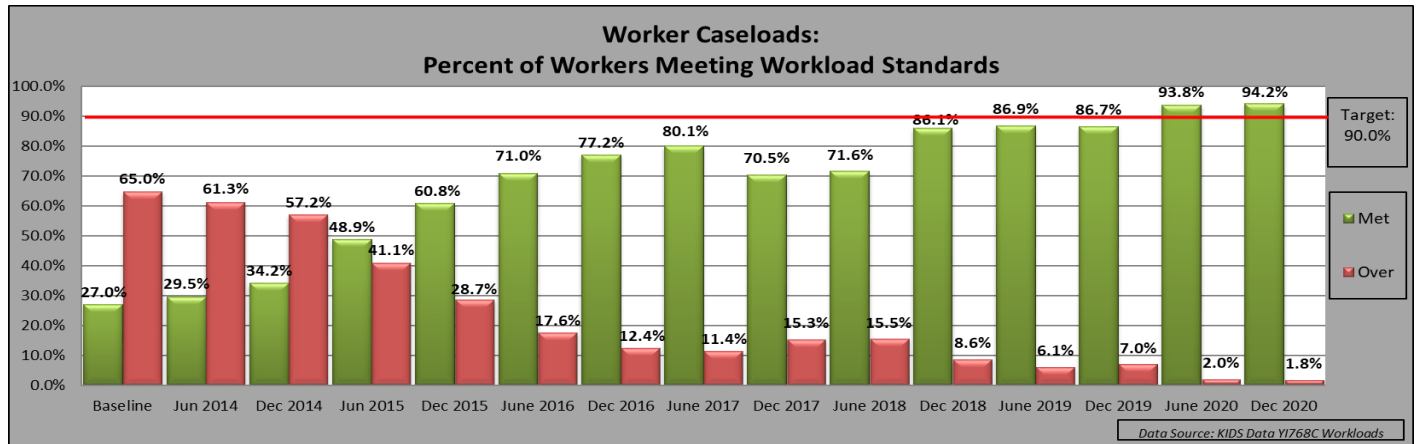
Trends

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%
7/1/2019 – 9/30/2019	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1150 Workers	1486 Workers	77.4%
10/1/2019 – 12/31/2019	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1314 Workers	1516 Workers	86.7%
1/1/2020 – 3/31/2020	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1411 Workers	1572 Workers	89.8%

4/1/2020 – 6/30/2020	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1473 Workers	1570 Workers	93.8%
7/1/2020 – 9/30/2020	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1392 Workers	1560 Workers	89.2%
10/1/2020 – 12/31/2020	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1433 Workers	1522 Workers	94.2%
Target				90.0%

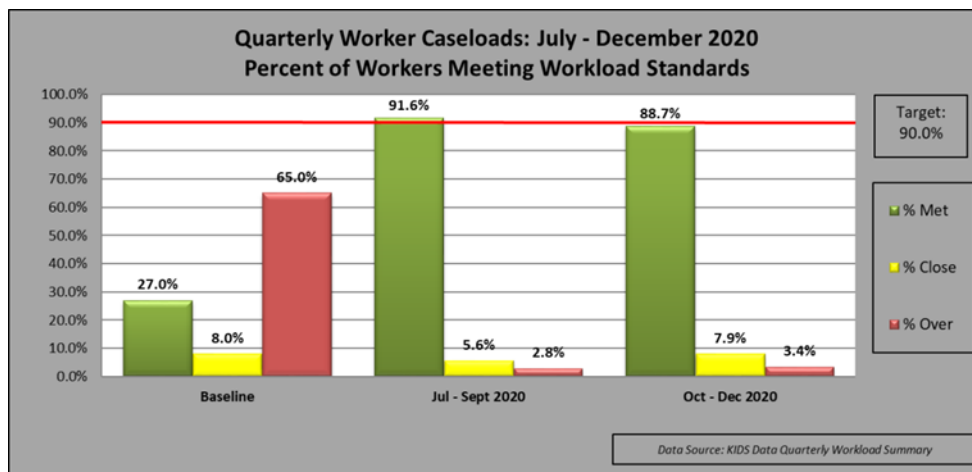
Section 3, Table 7.1-1



Section 3, Graph 7.1-1

Data Commentary

A one-day snapshot of the workload data is represented in Section 3, Graph 7.1-1. As of 12/31/2020, using the point-in-time Y1768C Workload data report, the percentage of CW workers meeting the standard is 94.2 percent, with 4.1 percent close, and 1.8 percent over the standard. Of the 1,522 workers, 1,433 workers were meeting workload standards, 62 workers were close, and 27 workers were over the standard. This is the second consecutive reporting period where the target of 90.0 percent was achieved.



Section 3, Graph 7.1-2

Quarterly Workload Standards Report				
October 1, 2020 - December 31, 2020				
Worker Type	Worker Days	% Met	% Close	% Over
ADOPTION SPECIALIST	4943	98.7%	1.1%	.1%
RESOURCE FAMILY SPECIALIST	18729	91.5%	6.7%	1.8%
COMPREHENSIVE	4967	87.9%	10.5%	1.6%
PERMANENCY PLANNING	57178	90.6%	6.1%	3.3%
PREVENTIVE/VOLUNTARY	6862	93.7%	5.6%	.8%
INVESTIGATION	41569	81.0%	13.1%	5.9%
RECRUITMENT	3689	100.0%	.0%	.0%
ADOPTION TRANSITION SPECIALIST ATU	3985	100.0%	.0%	.0%
TOTAL	141922	88.7%	7.9%	3.4%
<i>Data Source: Quarterly Workload Summary, Run Date 1/7/21</i>				

Section 3, Table 7.1-2

Data Commentary

In addition to the point-in-time reporting of workloads, a snapshot of each worker's workload is captured for each day during the quarter. The total days during the quarter that each worker met, were close, or was 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 also counts the number of days workers met, were close, or over workload standards, whereas the YI768C report is reporting on the number of workers. For the quarter of 10/1/2020 through 12/31/2020, there were a total of 141,922 worker days. Of those days, workers met workload standards 88.7 percent of the worker days, workers were close to workload standards 7.9 percent of the worker days, and workers were over workload standards 3.4 percent of the worker days.

Reporting Period Progress

CASELOADS

Leadership Oversight of Caseloads

Child Welfare Services (CWS) leadership continues to utilize the Workload Trends Report and the Workload Dashboard, which updates daily, to track workload trends. The Workload Trends Report is provided to CWS leadership once a week. The report is the focus point of the CWS Executive Team's weekly workload calls. Each deputy director communicates with his or her leadership teams weekly to discuss local progress and identify barriers. The Workloads Trends Report has a variety of data to assist in workload management. District-specific data includes capacity percentage; compliance percentage; number of employees in the met, close, and over workload categories; total work percentage; eligible work percentage; number of staff not eligible to carry work; number of staff that will promote to the next graduated standard, 50 percent to 75 percent or 75 percent to 100 percent, each month and eligible to carry cases; number of staff over 150 percent, 175 percent, and 200 percent; and eligible workloads leaving the agency due to employee separations.

While CWS met and exceeded the caseload standard statewide during this reporting period, focused efforts continued on targeted districts that were not meeting caseload standards. The consistent districts with the focused efforts were Districts 20A, 20B, 21A, 23A, and 25. Other districts moved in and out of the focused efforts. On 8/28/2020, the CWS KIDS team completed an extensive workload analysis for Region 2 as the majority of the districts not meeting caseload standards are in this region. On 9/8/2020, the workload analysis was presented and discussed with the Region 2 district directors. The analysis focused on workload capacity, number of positions assigned to each district, future capacity, CPS closure rates, permanency rates, CPS rotation assignments, and how CPS secondary assignments are utilized. CWS leadership identified 52 supervisors and six district directors in Region 2 who needed to complete workload training. The KIDS team provided training sessions for these identified supervisors and district directors in September and October 2020. In late August 2020, a weekly workload call was established for any district in Region 2 with less than 80 percent meeting the specialist caseload standard. The district director for each district is a required participant and the calls are

led by Region 2 deputy director and assistant CWS director for Field Operations. In December 2020, in addition to the weekly Monday workload call, when a district's gap is greater than 20 percent between workload capacity and workload compliance, the district director is now required to send the deputy director a daily email update the following Tuesday through Friday listing concrete steps to close this gap.

During this reporting period, the following strategies are some of the efforts implemented to support the focused districts.

District 20A – Carter County – Region 2

- Two vacant positions were identified in other districts with greater capacity and were moved to Carter County to increase future capacity and assist with turnover. In February 2021, one additional vacant position was transferred to Carter County.
- CPS teaming was utilized, which consists of the District 20A CPS specialist completing and documenting the field interviews and then transferring the case to a CPS specialist elsewhere in the state with workload capacity to complete non-field work, such as collateral interviews and report completion. This process does not apply when a case requires intervention.
- On 10/1/2020, a PP and CPS Overtime Plan was approved with an end date of 3/31/2021. The plans provide retention efforts for the current specialists, aimed at increasing CPS closure completion, reducing CPS past due assignments, and improving workload compliance.
- For PP workloads, District 20A is attempting to maintain specialist continuity and not transfer PP cases to other districts. The geographical location of District 20A is a challenge for identifying neighboring districts with workload capacity to assist with PP workloads.

District 20B – Johnston, Marshall, Murray Counties – Region 2

- One vacant position was identified in another district with greater capacity and moved to District 20B to increase future capacity and assist with turnover.
- Eleven children were transferred to District 19 due to its capacity to assist District 20B with workloads.
- The primary assignment of six children was given to the Adoption Transition Unit (ATU) to decrease the workload in District 20B.

District 21A – Cleveland County – Region 2

- On 7/1/2020, a PP Overtime Plan was approved with an end date of 3/31/2021. This plan does not increase workload compliance, but it is a retention effort for the current PP specialists.
- On 10/2/2020, a CPS Overtime Plan was approved with an end date of 3/31/2021, aimed at increasing CPS closure completion, reducing CPS past due assignments, and improving workload compliance.
- The primary assignment of seven children was transferred to the ATU to decrease the workload in District 21A.
- In May 2020, 42 children in PP cases were transferred from District 21A to Oklahoma County. Effective 10/1/2020 until 11/14/2020, Oklahoma County was assigned all new PP cases from Cleveland County. This permitted specialist continuity in District 21A, while focusing on permanency exits to improve workload compliance. As a result, 33 children were assigned to Oklahoma County. In December 2020, 12 additional children were transferred from Cleveland County to Oklahoma County. Therefore, a total of 87 children were assigned to Oklahoma County from May through December 2020. In January 2021, seven additional children in PP cases were transferred from District 21A to Oklahoma County.
- During this reporting period, three vacant positions were identified in other districts with greater capacity and moved to Cleveland County to increase future capacity and assist with turnover. In February 2021, four additional vacant positions were transferred to Cleveland County.

District 23A – Lincoln County – Region 2

- Oklahoma County assisted by accepting assignment of every fourth CPS referral and then every third referral from 9/9/2020 – 10/13/2020, which resulted in approximately eight referrals. Beginning the week of 10/19/2020,

Oklahoma County was no longer available to assist and Pottawattamie County began accepting assignment of every fourth referral from Lincoln County.

- On 12/1/2020, a CPS Overtime Plan was approved with an end date of 3/31/2021, aimed at increasing CPS closure completion, reducing CPS past due assignments, and improving workload compliance.
- In January 2021, District 3 deployed a team of CPS specialists to Lincoln County and 16 CPS cases were completed.
- Oklahoma County was assigned 15 children from Lincoln County in April 2020 and 11 children in February 2021.

District 23B – Pottawatomie County – Region 2

- In late January into early February 2021, efforts to stabilize PP worker/caseload ratios in Pottawatomie County occurred. CPS cases involving 15 children and youth recently removed and placed in out-of-home care, normally transferred for assignment to Pottawatomie County PP specialists, were instead assigned to Foster Care and Adoption (FC&A) specialists in Pottawatomie and Lincoln counties. These FC&A specialists not only have the capacity for increased case assignments, they also have experience in carrying PP cases.
- In February 2021, one vacant position was transferred to Pottawatomie County.

District 25 – McIntosh/Okmulgee Counties – Region 4

- CPS teaming is utilized to assist with CPS workloads.
- On 11/2/2020, a CPS Overtime Plan was approved with an end date of 12/31/2020, aimed at increasing CPS closure completion, reducing CPS past due assignments, and improving workload compliance.
- Ten children were assigned to District 15 and five children to District 22 to assist with PP workloads. This total does not include past out-of-district assignments made to assist District 25.

During this reporting period, CPS Overtime Plans were also approved for the following districts.

- District 4B – Canadian County – Region 1
- District 7 – Oklahoma County – Region 3
- District 12 – Mayes/Rogers Counties – Region 5
- District 13 – Delaware/Ottawa/Craig Counties – Region 5
- District 14 – Tulsa County – Region 5
- District 15 – Muskogee County – Region 4
- District 24 – Creek County – Region 4
- District 27A – Cherokee/Wagoner Counties – Region 4

Net Gain/Stability

For the reporting period of July through December 2020, CWS experienced a net loss of 23 CW specialist II's, a net loss of two CW specialist III's, and a net gain of two CW specialist IV's. Of the 23 CW specialist II's, 14 were from Oklahoma County. It should be noted for the reporting period ending December 2019, Oklahoma County experienced a net gain of 47 CW specialist II's and filled all its vacancies. Oklahoma County experienced a higher number of CW specialist II exits in November and December 2020, 10 and 12 respectively, as compared to previous months during this review period. Previous CW specialist II exit totals were five in July 2020, seven in August 2020, 10 in September 2020, and four in October 2020. A larger number of exits in Oklahoma County during the last 60-calendar days of this reporting period resulted in less time to hire new employees and fill the vacancies; therefore, resulting in a net loss. Oklahoma County leadership will engage with Tulsa County leadership to compare hiring processes to determine where additional improvements and gains may be made.

CWS turnover since state fiscal year (SFY) 13 is outlined in Section 3, Table 7.1-3. Turnover is calculated by dividing the number of separations by the average number of employees. CW specialist I turnover for the first six months of SFY 21 is slightly higher when compared to the entirety of SFY 20; however, it has remained lower than all previous SFY's. CW specialist II and III turnover significantly decreased during SFY 20 and for the first six month of SFY 21 when compared to previous SFYs. The decreased turnover for CW specialist I, II, and III's is significant considering CWS and its employees

experienced a pandemic; developed and adapted to a sudden robust telework plan; and closed over 30 OKDHS buildings across the state. The overall turnover rate for CW specialist I – IV's significantly improved during SFY 20 and the first six months of SFY 21.

Stability measures turnover and office churn, with churn defined as promotions, transfers, and demotions that an office experiences. Stability is calculated by dividing the number of separations, promotions, transfers, and demotions by the average number of employees. For the first six months of SFY 21, the stability rate for all CW specialists I – IV was 90.8 percent with a turnover rate of 9.0 percent. In comparison, SFY 17 stability rate was 82.7 percent; SFY 18 was 77.8 percent; SFY 19 was 73.7 percent; and SFY 20 was 94.7 percent. While the first six months of SFY 21 experienced a 3.9 percent decrease in stability when compared to SFY 20, a marked increase in stability remains when compared to SFYs 17, 18, and 19.

CW specialist I turnover remains the highest, occurring during the first year of employment. This data further supports the Quality Improvement Center for Workforce Development (QIC-WD) project OKDHS implemented. QIC-WD is a competency-based selection intervention with a goal to consistently hire the right staff in the right places. QIC-WD is discussed further in a following section.

Child Welfare Specialist Turnover

Position	SFY	Average Number of Employees	July 1 - June 30
CW specialist I	2021 (July – Dec)	302	20.9% (July – Dec)
	2020	324	19.1%
	2019	259	37.5%
	2018	219	34.2%
	2017	281	24.6%
	2016	437	36.2%
	2015	412	38.3%
	2014	448	40.2%
	2013	204	53.4%
CW specialist II	2021 (July – Dec)	1,251	9.8% (July – Dec)
	2020	1,183	11.0%
	2019	1,130	29.2%
	2018	1,223	28.5%
	2017	1,280	20.9%
	2016	1,098	20.2%
	2015	837	18.6%
	2014	693	21.5%
	2013	334	26.6%
CW specialist III	2021 (July – Dec)	426	3.3% (July – Dec)
	2020	414	5.1%
	2019	368	14.9%
	2018	384	13.5%
	2017	406	10.3%
	2016	360	10.0%
	2015	287	7.3%
	2014	239	13.4%
	2013	109	18.3%
CW specialist IV	2021 (July – Dec)	387	3.4% (July – Dec)
	2020	423	2.1%
	2019	369	8.9%
	2018	378	9.3%
	2017	430	5.6%
	2016	412	5.8%
	2015	359	5.8%
	2014	295	6.4%
	2013	143	7.0%
CW specialist I - IV	2021 (July – Dec)	2,366	9.0% (July – Dec)
	2020	2,344	9.5%

	2019	2,126	24.2%
	2018	2,203	23.2%
	2017	2,396	16.8%
	2016	2,305	19.0%
	2015	1,894	18.8%
	2014	1,675	22.7%
	2013	790	28.9%

Section 3, Table 7.1-3

Date Source: Turnover Table HR092; Run Date: 1/14/21

Workload Reduction

To address if CW specialists meet the workload standard, a weekly report containing the workload details is sent to every district director, regional director, and the assistant CWS director for Field Operations. Each regional director or district director responds weekly with an explanation for any excessive workload and a plan to reduce it to the standard by a specified due date. Report monitoring includes assessing the progress made on each identified specialist and ensuring timely action occurs to prevent additional specialists from reaching a 200 percent workload. CWS is committed to lowering workloads from 200 percent to 175 percent, from 175 percent to 150 percent, and finally below 150 percent. Data collected on 10/4/2018 showed 40 specialists over 200 percent. On 11/8/2019, 34 specialists were over 150 percent of the standard, three were over 175 percent, and no specialist was over 200 percent. On 12/30/2020, a data snapshot showed 10 specialists over 150 percent of the standard and no specialist was over 175 percent. The significant decrease in the number of employees over 150 percent is evidence that CWS is self-correcting.

RECRUITMENT

QIC-WD

CWS experiences a workforce challenge of having too many staff with a workload that exceeds the standards for their program area due to turnover. Through a competency-based selection intervention, CWS hopes to begin consistently hiring the right staff in the right places, bringing parity to workload distribution.

To design the competency-based selection intervention, OKDHS conducted an in-depth job analysis to better define optimal performance and the characteristics required to perform the CW job well. The job analysis process includes interviews and surveys with the job experts – workers and supervisors themselves. This analysis guides the development of a tailored selection strategy for the CW workforce.

The intervention will consist of two parts, both enhancing and creating a more robust selection tool. First, the interview questions and scoring criteria will be standardized and targeted at identifying the skills and competencies an individual needs to bring with them to the job, in contrast to the skills and competencies that the individual will gain through training and on the job experience. There is also a typing, writing, and computer literacy attestation portion that goes along with the traditional interview. The second part involves testing and validating individual difference measures through assessments, such as the Hope Scale, Public Service Motivation Scale, and Watson-Glaser Critical Thinking Appraisal. If, and when, these measures are validated they will be incorporated into the hiring process to better inform the selecting officials. Additionally, QIC-WD recently received approval to conduct a sub-study in which they will review previous applicants' applications in order to see how screening criteria relates to who is interviewed and hired.

Since this project is being completed as a part of the QIC-WD work through the grant from the Children's Bureau the stated expected results are:

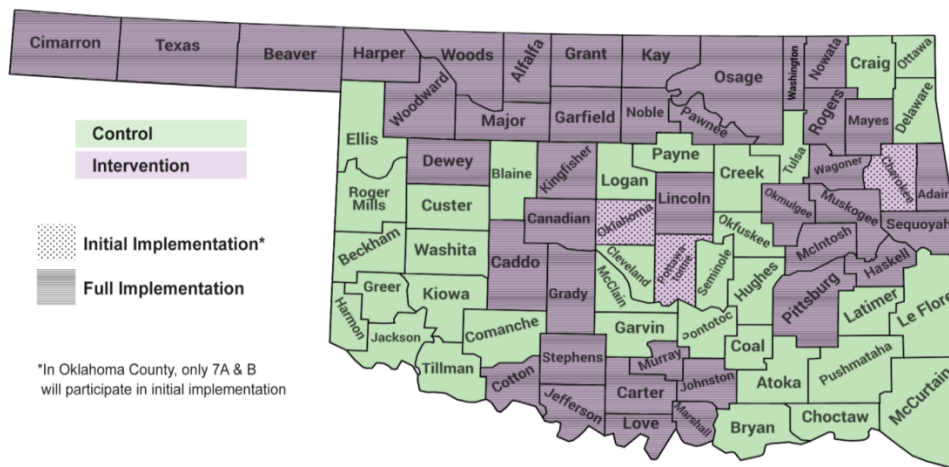
- traits and competencies that should be present at the time of hire for a job candidate to be successful in doing CW work;
- how competency-based and standardized selection procedures affect worker proficiency, confidence, job satisfaction, commitment to the agency, and intention to stay;
- how increasing the number of staff who are a better fit for their positions and more likely to stay could reduce stress on existing employees and agency-wide turnover; and

- how an increase in staff who are a better fit to CW work and a decrease in turnover can improve outcomes for children and families.

This project consists of a randomized control trial (RCT) and a control group to evaluate the intervention's results. Section 3, Graph 7.1-3 and Section 3, Graph 7.1-4 show the project's randomized areas and control groups, as well as the projected timeline.

The project changed some due to the COVID-19 pandemic that affected the implementation time frames. The team completed the Standardized Hiring Protocols training in March 2020 and the three initial implementation counties began utilizing the new process. The COVID-19 pandemic began to impact the project mid-March when the CW workforce moved to teleworking and in-person meetings were discontinued. The QIC-WD team, upon learning teleworking will be long-lasting, explored developing the intervention as a virtual and paperless process that can be used in different work arrangements. This virtual Standardized Hiring Protocols option allows for greater flexibility in hiring under different work conditions.

In the counties selected as intervention sites for full implementation, 177 staff completed training, 73 staff are currently enrolled, and 11 staff need to enroll in the training. All training will be completed by 2/3/2021. Following training, the counties implement the new interview protocol for hiring new CW specialist I and CW specialist II's for PP, CPS, FCS, and FC&A programs. Program analysts will be trained on coaching and observing fidelity to the structured hiring protocol by February 2021. After training, program analysts will participate in observation of interviews and coaching interview panel members for the next six months.

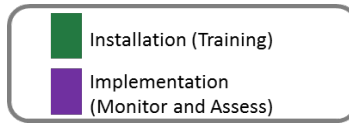


Section 3, Graph 7.1-3

Source: QIC-WD

	2020				2021		
	Q1	Q2	Q3	Q4	Q1	Q2	Q3
Validation Study							
Initial RCT Study Rollout	Control	Intervention	Control	Intervention			
Full RCT Study Rollout					Control	Intervention	Control

Note. Initial RCT Study Roll out includes Cherokee, Pottawatomie, & OKC 7A & B. Full RCT Study Roll out include the remaining intervention districts.



Section 3, Graph 7.1-4

Source: QIC-WD

Service First Model

In May 2020, OKDHS launched its Service First Model. To stay mission-focused in a changing world and prioritize customers and workforce over physical structures, some county OKDHS buildings will be closed under the Service First Model and employees will be assigned a new duty station. The offices are closing due to the reduced revenue from oil and gas and the economic downturn caused by the COVID-19 pandemic. Building upon the foundation of the agency's True North goals, this model will also fully integrate a robust telework policy. For counties with buildings closing, OKDHS will secure office locations with community partners and OKDHS employees will become embedded within those community partners. These new locations will be collaborative spaces that are shared by OKDHS employees. OKDHS buildings remaining open will also become shared collaborative spaces for all OKDHS employees. The community partner locations will be able to meet CWS' specific needs, such as a location for family time and family meetings. OKDHS believes partnership and community engagement are critical components of service delivery. Even when a building is closed, OKDHS will still be a presence in the community, committed to remaining accessible, and available for face-to-face interactions. With the Service First Model, OKDHS focuses on cutting the costs associated with a brick and mortar building; therefore, not resulting in cuts to services, programs, or employees' salaries and positions.

OKDHS recognizes the agency, its employees, and the world have undergone significant change in the past 12 months, and fear and anxiety are natural and valid reactions. Based on anecdotal feedback across the state, new resignation reasons for CWS employees include change fatigue, technology issues, not having the needed resources/tools, not wishing to work a majority of the time from home, and challenges balancing work/life while working from home. OKDHS remains committed to supporting the agency's workforce and being transparent as this model is implemented. OKDHS developed a vigorous communication plan to keep employees informed as plans are finalized. Examples of the communication include virtual town hall meetings with the agency director and/or the agency executive team, administrative broadcast emails, frequently asked questions, and a link for employees to submit their questions and ideas. OKDHS Innovation Services is supporting field staff by conducting virtual meetings with local county and district leadership to walk through each step in securing collaborative community partnerships before a building is closed. OKDHS is committed to making sure all the needs of the employees and customers are met.

On 9/1/2020, OKDHS launched a program, Kith Care, to assist working parents including frontline CW specialists and supervisors, who need help providing child care to young children. Kith Care allowed an employee to pay a relative to provide child care until 12/31/2020. On 12/11/2020, Kith Care was extended through 2/28/2021. The program was also offered to foster families statewide. As of 12/14/2020, 86 CWS employees are using Kith Care, which includes 77 workers, seven supervisors, one nurse, and one program field representative.

On 10/1/2020, OKDHS presented guidance and steps to *Safely Returning to Our Work Spaces* and the "new normal" for working in an OKDHS building or Service First Location. The guidance included steps to protect employee health due to COVID-19, as well as offering employees greater flexibility to work in an office setting to enhance in-person teamwork and collaboration; improving their emotional and mental well-being by interacting with one another in-person; providing opportunities for an in-person learning environment for new employees, supervisor to worker coaching, and support for new employees; and access to increased network speed for KIDS documentation. More specific to CWS, leadership held virtual listening sessions to allow employees the opportunity to ask questions, share their feelings and thoughts, and feel supported.

Telework and Flexible Scheduling

Based on the research findings and the telework survey, OKDHS remains committed to teleworking and flexible scheduling being the new workforce standard. Telework and flexible scheduling is an increasingly common way for public and private entities to lead their workforces. Working from home or alternate worksite arrangements supports OKDHS' Executive Leadership True North Support Strategy E3 about becoming an "Elite Employer" by improving work/life balance, cultivating talent, improving retention rates, and providing for the health and mental health needs of the OKDHS team. Telework also eliminates commute times, reduces overhead costs associated with physical workspaces, and in some cases, streamlines workflow by enabling work to be completed in the field. Telework means work performed outside of the employee's assigned duty station/office. The duties, obligations, and responsibilities of a teleworking employee are the same as if working at his or her assigned duty station and those for employees assigned to regular duty stations.

- Flexible scheduling has the potential to increase morale and worker productivity through greater employee control and autonomy over professional and personal time. Employees experience greater work/life balance when able to take control of their own work schedules and engage in more volunteer, educational, and professional development activities. OKDHS strives to be a family-friendly workplace where employees may have varying degrees of control over the beginning and ending of their workday while continuing to achieve CW goals.
- Compressed scheduling. New options were been introduced for employees with a desire to work an alternate workweek (AWW). Both of these options require the employee to create a permanent schedule and select the same AWW day or half day each week, and get supervisory approval for their scheduling.
 - AWW option A: Four 10-hour days. With this option, staff are not limited to a Monday or Friday day off, but may use any workday, Monday-Friday, for their AWW day off.
 - AWW option B: Four 9-hour days. With this option, staff choose a half-day, four hours, to be off during the workweek of Monday-Friday.
- Supervisory approval. Flexible and compressed scheduling allows employees, with supervisor approval, to set their core work hours. Certain job descriptions allow more or less flexible scheduling. Some job functions or assignments exist that prevent compressed scheduling from being an option based upon agency need.
- Supervisor flexibility. Supervisors are encouraged to be flexible with an employee's schedule, while ensuring the employee's core job duties are completed and service delivery to children and families is not impacted.

Virtual Resilience Groups

To provide emotional support to address secondary trauma and burnout, the CWS Clinical Team developed virtual resilience groups, with district directors and field managers first, in order to help them lead their teams, as well as test the curriculum. These six sessions were led by a clinician in July and August 2020. A variety of topics to promote resilience were discussed as well as the provision of a safe space for participants to bring forward common challenges and concerns. Effective 12/1/2020, the CWS Clinical Team began offering virtual mindfulness drop-in sessions twice a week. These sessions are voluntary and available for any CW staff that wishes to participate. The mindfulness sessions are meant to provide a safe, supported space to practice a variety of techniques to help alleviate stress. The intention is to provide a quiet space for reflection. Examples of the techniques include progressive muscle relaxation, guided imagery, a focus on the breath, and loving kindness meditation.

COVID-19 Vaccine for Employees

OKDHS partnered with the Oklahoma State Department of Health (OSDH) to recognize that many staff within CWS fit within a reasonable definition of a first responder, in that their duties include emergent encounters with clients where the environment is uncontrollable, or close contact cannot be avoided because social distancing greater than six feet or use of a virtual alternative isn't reliably possible. OSDH is making the vaccine available to OKDHS staff who meet this first responder description, with options.

- Local county health departments are hosting vaccine clinics all over the state. On 1/4/2021, OKDHS provided a letter template to CWS employees that is approved for their use to indicate first responder status.
- Indian Health Services/Tribal health systems received doses and many are operating robust local vaccine clinics for those who are eligible for Indian health services. Many are not requiring any kind of first responder designation.

- In January 2021, OKDHS partnered with OSDH to host three single-day vaccine clinics in Oklahoma City for CW staff designated as first responders. Future clinics are being explored.
- In February 2021, OKDHS partnered with OSDH to host a vaccine clinic in Oklahoma City for CW staff designated as first responders; employees and their family members who are 65 and older.

The vaccine is not required by OKDHS and each employee is encouraged to consider their own circumstances. OKDHS seeks to provide every opportunity for employees to be well and safe while performing critical social work. Employees are not required to take leave and may file a travel claim. Most, if not all, other OKDHS roles that do not meet the first responder description are considered essential, and additional opportunities to receive the vaccine will be made available as the vaccine roll out continues across the state.

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.

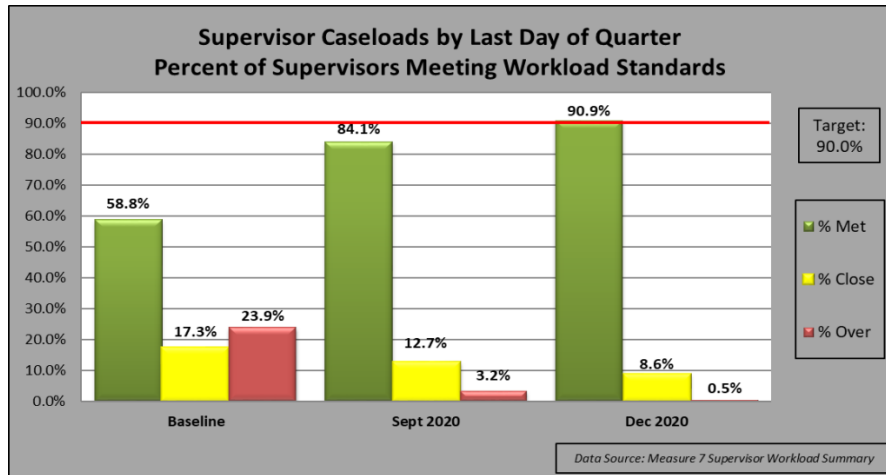
Trends

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%
7/1/2019 – 9/30/2019	All supervisors with a unit currently supervising caseload carrying workers	313 – Met	376 Units	83.2%
10/1/2019 – 12/31/2019	All supervisors with a unit currently supervising caseload carrying workers	265 – Met	378 Units	70.1%
1/1/2020 – 3/31/2020	All supervisors with a unit currently supervising caseload carrying workers	295 – Met	373 Units	79.1%

4/1/2020 – 6/30/2020	All supervisors with a unit currently supervising caseload carrying workers	341 – Met	383 Units	89.0%
7/1/2020 – 9/30/2020	All supervisors with a unit currently supervising caseload carrying workers	318 – Met	378 Units	84.1%
10/1/2020 – 12/31/2020	All supervisors with a unit currently supervising caseload carrying workers	348 – Met	383 Units	90.9%
Target				90.0%

Section 3, Table 7.1-3



Section 3, Graph 7.1-5

Data Commentary

For the current quarter, 383 supervisor units in total were counted which are comprised of 1,696 CW specialist I, II, and III's. This calculates to a statewide worker to supervisor ratio of 4.43. As of 12/31/2020, 348 supervisors met the workload standard, 33 supervisors were close to meeting the standard, and two 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. Thirty-seven supervisors had at least one assignment on his or her caseload. This is the first time since Pinnacle Plan reporting began that the target of 90 percent was met.

Reporting Period Progress

A supervisor caseload report, updated daily, is available to all Child Welfare Services (CWS) employees. Additionally, CWS continues to receive a more detailed supervisor caseload data report monthly. The data is reviewed near the beginning of each month by the CWS Executive Team. An explanation for why a supervisor is not meeting caseload standard must be provided to the deputy director and assistant CWS director for review, discussion, and direction. During this reporting period, adjustments were made to some supervisory units to more equally distribute the number of specialists assigned to each supervisor. Deputy directors are responsible to approve direct assignments made to a supervisor. Direct assignments are defined as assignments made to supervisors for the purpose of having the supervisor do the casework directly. This type of assignments is what CWS expects to reduce and eliminate. Due to these efforts, CWS demonstrated 99.5 percent of supervisors meeting or close to meeting the target, which provides more supervisors with greater opportunities to coach, support, and mentor the specialists assigned to them.

Conclusion

Since reform began, Oklahoma Human Services (OKDHS) has evolved into a self-correcting system and caseload management is one example of that system. The baseline data ending June 2013, showed 27 percent of workers meeting

caseload standards compared to the recent period ending December 2020 with 94.2 percent meeting. While caseload compliance ebbed and flowed over the reporting periods from 2013 – 2020, it is evident that OKDHS demonstrates substantial improvement in not only the metrics, but in identifying activities, efforts, and strategies resulting in enhanced caseload compliance. Furthermore, OKDHS self-corrected during times of increased work. Ending December 2017, OKDHS had 1,555 total caseload-carrying eligible staff that resulted in 70.5 percent meeting caseload standards. In comparison to the current reporting period ending December 2020, OKDHS had 33 fewer workers, but demonstrated a 23.7 percent increase of workers meeting standards. While the amount of work was greater in 2017, OKDHS efforts to support workers and quality casework through caseload management cannot go unnoticed. On the last day of the report period ending December 2020, for the first time OKDHS met the target of 90 percent for both worker and supervisor caseloads.