

Statewide Assessment Instrument

Section I – General Information

New York State Office of Children and Family Services	
New York State Office of Children and Family Services	
Period Under Review	
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TABLE OF CONTENTS

SECTION I	5
Introduction.....	6
<i>Agency Structure:</i>	6
<i>Case Volume:</i>	7
<i>Cross Systems Collaborations:</i>	9
<i>Key Initiatives Associated with Prior CFSR PIP Strategies:</i>	12
SECTION II	25
Safety and Permanency Data	25
SECTION III	43
Safety Outcome 1:	44
Safety Outcome 2:	51
Permanency Outcome 1:.....	58
Permanency Outcome 2:.....	80
Well-Being Outcome 1:.....	96
Well-Being Outcome 2:.....	107
Well-Being Outcome 3:.....	111
SECTION IV	119
Statewide Information System.....	120
Case Review System.....	123
Quality Assurance System	135
Staff and Provider Training	143
Service Array and Resource Development.....	153
Agency Responsiveness to the Community.....	158
Foster and Adoptive Home Licensing, Approval, and Recruitment.....	167
SECTION V	177
State Assessment of Strengths and Needs	178
Appendix A	
Focus Groups, Surveys, Existing Documents	
Appendix B	
Acronym Key	

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SECTION I

General Information

Introduction

New York State Office of Children and Family Services Agency Description

Agency Structure:

The New York State Office of Children and Family Services (OCFS) is dedicated in its mission to:

“...serve New York’s public by promoting the well-being and safety of our children, families and communities. We will achieve results by setting and enforcing policies, building partnerships, and funding and providing quality services.”

During OCFS Commissioner Carrión’s recent budget testimony to the Legislature titled “*Testimony On Agency Priorities and Budget Requests*,” she stated that, “We have much strength and talent at OCFS, yet need to redouble our efforts on behalf of the children of New York State, so they may be able to take advantage of meaningful opportunities that will help them achieve better outcomes in life and reach their full potential. Our children and youth deserve no less from us.”

This Child and Family Services Review (CFSR) provides NYS with an opportunity to examine its policies and practices and the impact they have on the safety, permanency and well-being of the children, youth, and families in New York. OCFS looks forward to continuing our efforts to engage child welfare stakeholders across the state in the CFSR process and, most importantly, in redoubling efforts to improve outcomes for children and families.

OCFS was created on January 8, 1998 by merging programs of the former State Division for Youth and the former State Department of Social Services. The agency provides a system of family support, juvenile justice, and child welfare services with a funding level of approximately \$3.7 billion for programs that support the safety, permanency, and well-being of children and adults. OCFS is responsible for programs and services involving foster care; adoption and adoption assistance; child protective services, including operating the Statewide Central Register for Child Abuse and Maltreatment (SCR); preventive services for children and families; services for pregnant adolescents; child care and referral programs; and protective programs for vulnerable adults. Additionally, the agency is responsible for the state's juvenile justice programs, administering and managing 30 residential facilities, six community-based group homes, eight day-placement centers, and two reception center programs for juvenile delinquents and juvenile offenders placed in the custody of OCFS by family and criminal courts. OCFS also coordinates, in part, the state government response to the needs of Native Americans and their children on reservations and in communities.

The NYS child welfare system is state supervised and locally administered through 57 local county social service districts (LDSS or local districts), the St. Regis Mohawk Tribe, and the New York City (NYC) Administration for Children’s Services (ACS). ACS serves all five NYC boroughs – Manhattan, Bronx, Brooklyn, Queens, and Staten Island.

Within OCFS, the Division of Child Welfare and Community Services (OCFS/CWCS) is the statewide oversight entity for the locally administered child welfare system. OCFS/CWCS provides direct oversight of local districts and licensed voluntary agencies through a regional office structure. OCFS/CWCS provides oversight and support through each of the six regions in the state - Albany, Buffalo, NYC, Rochester, Syracuse, and Yonkers.

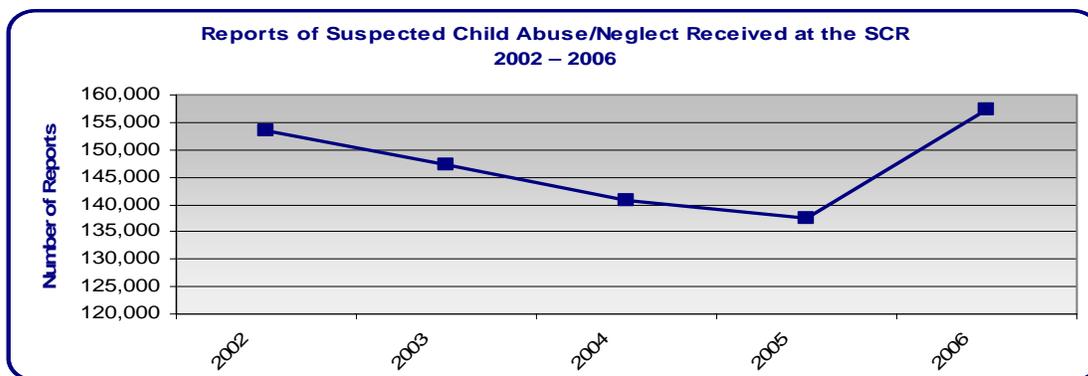
Case Volume:

As the third most populous state behind California and Texas, NYS has a large population that is extremely diverse. Approximately 19 million people currently reside in the State, with about 4.5 million residents under the age of 18. New York is a state that attracts a large immigrant population through the gateway city of NYC. In fact, NYS has the largest Dominican and Jamaican-American populations in the country. Over 159 languages, including tribal languages, are spoken in NYS. In addition to the ethnic diversity, the geographic diversity of NYS is quite vast. The State’s 54,475 square miles vary from the bustling metropolis of NYC to the remote mountains of the Adirondack State Park. Local social service districts, therefore, serve a wide range and size of populations; for example, the population of NYC is roughly 8.2 million people, while the population of rural Hamilton County is only 5,379. The vast range of diversity results in a wide range of child welfare service needs and resources across the State.

In addition to the challenges faced in addressing a diverse population, challenges related to the volume of child welfare cases within NYS have been cited repeatedly in focus groups and practice papers. The three charts below indicate the volume of child protective services (CPS) reports, the opening of preventive services cases, and the progress of children through foster care.

Child Protective Volume Trends:

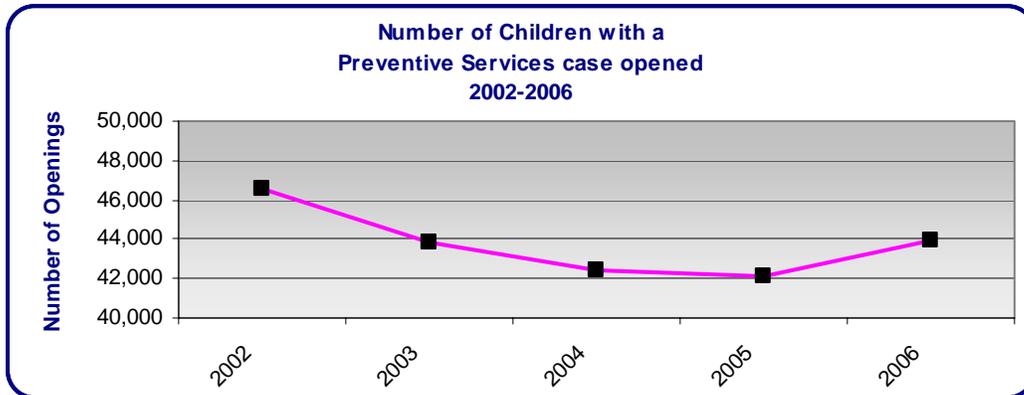
Within the past several years, NYS received between 137,586 and 157,407 reports of suspected child abuse or neglect annually. The large spike in 2006 (a 14% increase), due in large part to tragic, high-profile child fatalities, has created an impact in many child welfare domains, and is explained throughout this report. (Complete 2007 data is not yet available.)



Data Source: 2006 NYS Monitoring and Analysis Profiles (MAPS)

Preventive Volume Trends:

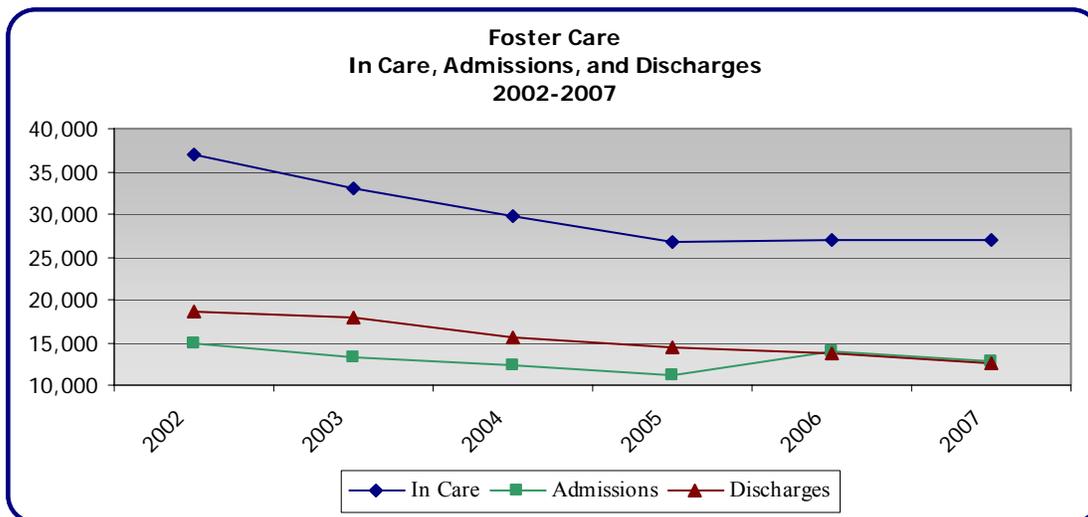
As the number of CPS reports increase and in-home service plans are implemented, the number of cases open for preventive services also increase. Data indicates that 43,943 children received Preventive Services in calendar year 2006.



Data Source: 2006 NYS Monitoring and Analysis Profiles (MAPS)

Foster Care Volume Trends:

The number of children in foster care declined each year for more than a decade. In 2006, NYS saw the first increase in the number of children placed in foster care in more than a decade. The graph below illustrates an increase in foster care admissions during 2006 that was 24.2% above admissions in the previous year. In 2007, the number of admissions declined, but the number of children in care at the end of 2007 was still 12.7% above the number of children in care at the end of 2005.



Data Source: CCRS as of 1/24/08

The volume of caseloads in NYS not only impacts the child welfare field, but also the work done in family court. According to the Preliminary Report of the Chief Administrative Judge, "... annual filings in New York City Family Court approached 700,000 in 2007, with a resulting two (2) million appearances a year on Family Court calendars."¹ The Family Court in NYC held nearly 29,000 Permanency Hearings during 2006; family courts outside NYC held almost 18,000 Permanency Hearings. Filings in abuse and neglect cases in NYC Family Courts more than doubled during 2006. Original filings in NYC increased from just over 5,000 in 2005 to over 12,300 in 2006, an increase of 147%.² The challenges created by the high volume of child welfare/family court cases and its impact on outcomes for children and families, are discussed throughout this document, and are expressed, below, in an excerpt from a November 2007 article in the New York Law Journal, written by a Brooklyn Family Court Judge, "Child welfare professionals in New York City agree that the [NYC] child welfare system is in a crisis."³

This article offers the following explanations, "In 2006, two developments led to a significant reversal of a decade of system-wide progress. First, the New York State Legislature enacted Article 10-A of the Family Court Act (the "Permanency Law"). Second, as a result of a sudden increase in child homicides, the Administration for Children's Services more than doubled its filings of abuse and neglect cases. The 2006 reversal undermined best practices child protective courts, problem-solving courts that had contributed to the decade of system-wide progress."⁴

According to the Preliminary Report of the Chief Administrative Judge, "Despite these developments, there has been virtually no increase in the number of Family Court Judges." In her February 2007 State of the Judiciary message, Chief Judge Judith S. Kaye stated that NYS is "desperately short of judicial resources" and requested that the Legislature create 39 new judgeships "essential to meet the critically important needs of New York's families and children. There are 153 judges assigned to the Family Courts statewide: 47 judges in NYC and 106 in the courts outside of NYC."⁵

The challenges created by the high volume of child welfare/family court cases, and its impact on outcomes for children and families is discussed in the relevant Items throughout this document.

Cross Systems Collaborations:

OCFS Commissioner Carrión stated in her article in the OCFS newsletter titled, "Strengthening Partnerships", that "...we have been diligently working to create partnerships with advocacy groups, community programs, and our sister state agencies working together to find common ground with our stakeholders and the community...the needs of our children and families call for a broader approach that includes the intervention of other state agencies."⁶

In December 2007, a meeting of state agency commissioners serving children was held to discuss the need for cross system collaborations for children with service needs that involve

¹ Preliminary Report of the Chief Administrative Judge, Pursuant to Chapter 626 of the Laws of 2007, Dec. 2007: 1.

² Ibid.

³ Hamill, Bryanne, Hon. "A Crisis in Family Court." New York Law Journal. 15 Nov. 2007.

⁴ Ibid.

⁵ Preliminary Report of the Chief Administrative Judge. 2.

⁶ "Strengthening Partnerships: *Message from the Commissioner.*" Newsletter, OCFS Family. Autumn 2007: 1.

more than one service delivery system. Commissioners from the following agencies attended: OCFS, the Office of Mental Health (OMH), the Office of Mental Retardation and Developmental Disabilities (OMRDD), the Office of Alcohol and Substance Abuse Services (OASAS), the Department of Health (DOH), the Division of Probation and Correctional Alternatives (DPCA), the State Education Department (SED), and the Commission on Quality of Care and Advocacy for Persons with Disabilities (CQCAPD). The Commissioners agreed to meet quarterly to continue the discussion and to develop and implement joint solutions to improve the lives of children, youth and families.

Examples of collaborations with sister state agencies include:

Commissioners from the NYS Office of Temporary and Disability Assistance (OTDA) and OCFS have established operational work teams to address serious issues related to child care and child support, child-only Temporary Assistance for Needy Families (TANF) caseloads, limited English proficiency services, adult protective services, and fatherhood initiatives.

OASAS is working in collaboration with OCFS to align the delivery of drug and alcohol services for OCFS' juvenile justice facilities and aftercare services, as well as for local districts that need access to drug and alcohol treatment services to support family functioning, such as a co-location project described elsewhere in the Statewide Assessment.

OCFS, along with OMRDD and OMH are working jointly to reduce the use of physical restraints in child care settings, as well as to improve service delivery to cross-systems children who need support from multiple systems.

OCFS has been working collaboratively with SED to develop bed capacity within NYS to prevent placement of children with high service needs in out-of-state residential facilities and when appropriate, return children currently in out-of-state residential programs to services that are delivered close to home within NYS.

For the past few years, OCFS has worked closely with the NYS Office for the Prevention of Domestic Violence (OPDV) in several areas, particularly in the area of training. OPDV delivers the required two-day training on domestic violence to every CPS caseworker in NYS outside of NYC, which does the training itself. OCFS is also collaborating with OPDV in the planning of regional forums on working with fathers.

OCFS, OMH, OMRDD, and DOH continue to work to provide comprehensive services to children with cross-systems needs. Most recently, this work resulted in the federally approved OCFS Bridges to Health Home and Community Based Medicaid Services Waiver (B2H) for children in foster care. This waiver program serves children with serious emotional disturbance, developmental disabilities, and medical fragility. The program will serve 3,305 children at one time and is being implemented incrementally over a three-year period. All children in this program will receive health care integration services and up to 13 additional services that are supplemental to the services they already receive in foster care.

In addition to the B2H Waiver, OMH and OCFS work together to provide over 300 OMH Home and Community Based Waiver slots that are dedicated to provision of waiver services to children in the child welfare system through the use of state and local preventive funding and federal Medicaid funding. Both agencies provide resources and are key members of the Coordinated Children's Services Initiative (CCSI), a multi-agency family initiative that focuses on maintaining children with cross-systems needs in their homes and communities.

Since the 2001 CFSR, significant progress has been made in strengthening collaboration between the child welfare system and the courts including the NYS Office of Court Administration:

Permanent Judicial Commission on Justice for Children (Commission): The Commission is chaired by Chief Judge Judith S. Kaye. In addition to OCFS Commissioner Carrión, other members include judges, lawyers, advocates, physicians, legislators, and state and local officials.

NYS Child Welfare Court Improvement Project (CIP) began in 1994 and was administered from its inception through the Fall of 2006 by the Commission. In 2006, the increased focus on court operational issues prompted the transition of the administration of the project to the Office of Court Administration's Division of Court Operations. The CIP continues to operate with the support, advice, and counsel of the Commission.⁷

Adoption Now Workgroup is a joint initiative between the courts, OCFS, NYC ACS and local districts. The Adoption Now Workgroup was formed in 2002 to help expedite adoptions for the State's children who are available for adoption through NYS' foster care system. This Workgroup has disseminated tangible projects designed to inform practice, such as a best practice timeline for children with a goal of adoption, the Freed Child Permanency Hearing Best Practices paper and supporting video, and the Adoption Attorney Guide. Additional efforts of the Workgroup, such as the Adoption Panels, are discussed in Item 9: Adoption.

The Statewide Permanency Planning Team (SPPT), convened by OCFS in 2003, is comprised of representatives of the Unified Court System, NYS Executive Branch agencies (OMRDD, DOH, OASAS, SED, OMH, DPCA, and OCFS), local government entities, institutions, and individuals who represent children and parents. This Team is discussed in more detail later in this Section I of this document.

The Seneca Nation Peacemaker Courts Collaboration began in 2005 and includes judges and court personnel from the 8th Judicial District, the Seneca Nation of Indians and the Peacemaker Court judges. This collaboration provides a forum to discuss practices and procedures and provides a welcome point of contact for issues including the implementation of the Indian Child Welfare Act (ICWA), and the development of a tribal Court Appointed Special Advocates (CASA) program.

⁷ "CIP: A Strong Past; A Secure Future." Bulletin. NYS Child Welfare Court Improvement Project Best Practices Bulletin. Autumn 2007: 1.

Key Initiatives Associated with Prior CFSR PIP Strategies:

OCFS, with widespread input from stakeholders across the State, developed an ambitious child welfare outcome improvement agenda in 2002, from which the federal CFSR Program Improvement Plan (PIP) was developed. The State plan originally included 12 strategies with a 13th strategy added to focus specifically on strengthening adoption outcomes. OCFS selected strategies that were viewed as those most likely to have an impact on the issues contributing to performance deficiencies, those that related most directly to the outcomes and review areas found not to be in substantial conformity with the federal standards, and those that could be accomplished within the constraints of time and resources.

In a county administered state like New York, improvements in practice and outcomes take place at the local/county level. OCFS' leadership role is to provide support, technical assistance, and supervision to local districts and voluntary agencies. The intent was to identify strategies that local social services districts and private voluntary agencies could choose to implement to improve outcomes for children and families in their care. Local districts and agencies could also select a strategy that was not on OCFS' list as long as it was likely to contribute significantly to improved outcomes of safety, permanency, and well-being. No local district was expected to implement all 13 strategies, but rather work with its OCFS Regional Office to develop its own local program improvement plan that focused on a continuous quality improvement agenda.

The strategies included in NYS' child welfare outcome improvement plan, from which NYS' federal PIP was developed, are listed below, along with some of the program and practice improvements related to each strategy since the 2001 CFSR. The initiatives are also referenced in the applicable Statewide Assessment Items throughout this document.

Strategy 1: Support for Strength-Based, Family-Focused Practice (Family Engagement)

OCFS has committed to supporting and enhancing case practice in the area of family engagement, based on the principle that a family who is involved in assessing its needs and developing its own plan is most likely to achieve child welfare outcomes of safety and permanency. The Family Engagement Strategy is targeted at capacity-building at the local level, including: addressing basic underlying beliefs and principles of family engagement as an effective casework practice; developing the caseworkers' and supervisors' knowledge base and family engagement skills; and enhancing organizational culture and infrastructure necessary to support family engagement. The elements of the Strategy include:

- The dissemination of OCFS practice guidelines, including:
 - 2004 INF 04 – Family Visiting for Children in Out of Home Care
 - 2004 LCM 04 – Implementation of Family Meetings
 - 2005 INF 05 – Locating Absent Fathers and Extended Family
 - 2007 ADM 09 – Access to Federal Parent Locator Service – State Parent Locator Service – Additional Financial Information in Child Welfare Cases for Purposes of Permanency
- In 2005, OCFS disseminated “seed money” to encourage the development or expansion of family meetings at social service agencies. Twenty-three counties were provided with \$10,000, \$20,000, or \$40,000 one-time funding, and the funds were used in various ways.

ACS, for example, paid for parent advocates to attend family meetings; other local districts used the fund to reduce logistical barriers.

- OCFS has contracted with the Center for the Development of Human Services (CDHS) in Buffalo, NY to outstation one Family Engagement Specialist (FES) in each Regional Office of OCFS/CWCS. Each FES is trained to develop capacity, enhance organizational culture, and promote and support sustainability of family engagement practices with the local district or voluntary agency child welfare staff.
- OCFS supported the development of “toolkits” for family engagement practice. “Toolkits” include an interactive experiential set of exercises which the FES conducts with small groups of frontline caseworkers and their supervisors. The exercises are designed for caseworkers to have an opportunity to understand their own values and beliefs about families, and to practice using engagement skills. Toolkits are being developed around the following aspects of family engagement:
 - Family decision making meetings, where parents, children (if age and developmentally appropriate), and relevant extended family, come to the table to plan for the child’s safety, permanency, and well being. (Toolkits or family decision making meetings have been implemented in 20 local districts statewide: ACS, Albany, Cattaraugus, Chenango, Chemung, Clinton, Columbia, Cortland, Erie, Lewis, Monroe, Nassau, Ontario, Orange, Steuben, Suffolk, Tioga, Tompkins, Washington, and Westchester and one voluntary agency in the upstate area.)
 - Working effectively with fathers, who too frequently have been “invisible” to the child welfare planning process, yet are an essential resource to their child. (Locating and Engaging Fathers toolkits or training have been implemented in seven local districts: ACS, Chautauqua, Ontario, Orange, Steuben, Wayne, and Westchester and four voluntary agencies, all within the NYC Regional Office catchment area.)
 - Visiting with children in placement, where an individualized visitation plan is part of the case plan to support the child’s permanency goal. The family visiting toolkit is under development.
 - Concurrent planning, where caseworkers and parents work together to identify and work concurrently with an alternate permanent resource in the event the children are not able to return home. Concurrent planning toolkits or training have been implemented in 20 local districts: Cayuga, Chautauqua, Cortland, Dutchess, Fulton, Madison, Nassau, Onondaga, Orange, Otsego, Putnam, Saratoga, St. Lawrence, Steuben, Suffolk, Sullivan, Tioga, Ulster, Warren, and Washington; and three voluntary agencies, two within the NYC Regional Office and one in the Syracuse Regional Office catchment area,.

In the summer of 2006, OCFS conducted an initial assessment of the FES. The assessment was based on self-reporting by caseworkers and supervisors, and found that the respondents who worked with a FES, made use of family meetings, visitation, working with absent fathers, and concurrent planning more effectively. Respondents reported that more work is needed in working with absent fathers. Additional assessments are planned to include input from parents and youth.

Strategy 2: Concurrent Planning Implementation

The core of this PIP strategy is to encourage and engage local districts and voluntary agencies to engage in case level planning efforts to safely return a child home while concurrently developing an alternative plan, should a child be unable to return home. Concurrent planning is an integral component of child centered, family focused practice.

This PIP strategy worked in collaboration with Strategy 1. Additional key accomplishments associated with this PIP strategy to encourage local implementation of concurrent planning include the distribution of:

- An informational letter as part of the Adoption and Safe Families Act (ASFA) implementation
- Changes to Uniform Case Record requirements (CONNECTIONS)
- Readiness Assessment Instrument
- Case Review Practice Assessment Tool
- Training curriculums: NEW- Family Preservation and Reunification; Revised
- Common Core and MAPS/GPS; Supervisory Video and Guide

Strategy 3: Safety and Well-Being of Children in Residential Care

The Safety and Well Being Strategy Workgroup, comprised of representatives from local districts, state, and voluntary agency staff, developed a series of initiatives designed to address a number of areas that are impacting on safety and well being for children and families who are served in residential care. The areas addressed included: a lack of clear understanding and agreement on the appropriate use and contribution of residential care within the larger continuum of services; an emphasis on use of controlling and/or coercive technique; a lack of knowledge of information coming from trauma research; a need to develop more trauma sensitive therapeutic environments; and workforce challenges, among others. From this group, a number of different initiatives/products have been developed including the following:

- The dissemination of 2006-OCFS-INF-09 titled, "Residential Care: 2006 and Beyond". This informational letter (INF) described an alternate vision of what residential care could and should become along with identifying a number of action areas that need to be addressed in order to move forward with this alternate vision. It was used as the starting point for numerous local and regional discussions related to a number of the topics addressed in the paper including: role and contribution of particular residential care programs within a particular local continuum of services, criteria for appropriate use of residential care, recommended areas for measuring outcomes achieved for children served in residential care, and role clarification around achieving successful transitions from residential care. OCFS is currently co-facilitating, along with OMH and SED, a "Building Bridges" series of discussions with a large group of representative stakeholders that began with many of the action items identified in the INF.
- Teleconference on Trauma and Trauma Sensitive Environments. OCFS, with the assistance of members of the Strategy 3 Workgroup, developed two statewide teleconferences that provided an introduction to trauma and trauma research related to children and youth in residential care.
- OCFS Automated Restraint Tracking System (ARTS): The Automated Restraint Tracking System (ARTS), which went live mid-2007, is a unique web-based system that will allow the OCFS/Division of Juvenile Justice and Opportunities for Youth (OCFS/DJJOY) and

voluntary agencies to regularly collect and analyze restraint data so that they can identify any trends in improper use, work to improve their methods of behavior management, and reduce the use of physical restraint. Voluntary agencies, OCFS/DJJOY and OCFS/CWCS staff collaborated extensively to develop data items that would accurately capture restraint practice.

- **Sanctuary: A Model of Organizational Change:** The Sanctuary Model of residential care represents a trauma-informed method for creating or changing organizational culture to provide a community where healing from psychological and social traumatic experience can be addressed. Beginning in 2006, OCFS funded five voluntary agencies (Glove House, St. Catherine's, Astor Home, Jewish Child Care Association, and MercyFirst) and two OCFS/DJJOY facilities (Annsville and Brentwood) to participate in training at the Sanctuary Leadership Development Institute. In 2008, four additional DJJOY facilities will participate in the Sanctuary Model: Tryon Girls, Tryon Boys, Lansing and Industry. Five new voluntary agencies, yet to be determined, are also expected to participate.

Strategy 4: Permanency Options

Child Permanency Mediation Projects: The Child Permanency Mediation Project is an alternative form of dispute resolution used in the permanency phase of child abuse or neglect proceedings. Mediation provides a forum where parents, family members, social service agencies, youth (with the support and counsel of their attorneys), and other interested parties can explore options and find a mutually acceptable solution that will facilitate a child's return to his or her family or expedite his or her placement in an adoptive home or other permanent home. It enables those participating in child abuse and neglect proceedings to focus on problem resolution, treatment, education and prevention and thereby avoid prolonged, contentious legal proceedings that can extend a child's stay in foster care. The Court Improvement Project (CIP) partners with OCFS to collaboratively support permanency mediation pilot projects in NYC. The Unified Court System's (UCS) Office of Alternative Dispute Resolution and Court Improvement Programs also funds permanency mediation projects in Albany, Chemung, Erie, Niagara, and Oneida counties. In addition, UCS supported community mediation programs may provide services in an occasional child welfare related matter even when they don't have a formal permanency mediation program.

Strategy 5: Adolescent Services and Outcomes

OCFS established the Adolescent Strategy Workgroup which includes representatives from local districts, voluntary agencies, Adolescent Services Resource Networks, Youth in Progress, and other state agencies serving youth. The Adolescent Strategy Workgroup has developed the following resources to strengthen services to adolescents and improve their achievement of permanency:

- Adolescent Services and Outcomes Practice Guidance Paper, April 2007
- An orientation to the framework for practice entitled: Adolescents: New Policies, Practices, and Youth Voice
- Regulatory amendments renaming the goal of "Independent Living" to "Discharge to Another Planned Living Arrangement with a Permanency Resource"
- Proposed regulations on Adolescent Services for Foster Care Youth
- A method to assess adolescent safety, permanency, services and outcomes through the use of a monitoring tool, guidelines, and youth interview protocol

- Partnership with Youth In Progress, the foster care youth leadership advisory group. This partnership has resulted in the development of the following resources:
 - Handbook For Youth In Foster Care and accompanying video
 - An Informational Letter (06-OCFS-INF-10) called, “Meeting the Clothing Needs of Foster Youth 12 Through 20 Years in Out of Home Placement.” This release updates 89 ADM-14 issued in 1989 and includes an updated clothing inventory list. An accompanying video highlighting the issues was also produced.
 - Contributed to the development of an Informational Letter (07-OCFS-INF-04), “Keeping Siblings Connected: A White Paper on Siblings in Foster Care and Adoptive Placements in New York State”
 - Video on misperceptions of foster youth to dispel myths of foster care youth
- Education and Training Vouchers Program: The ETV program helps youth aging out of foster care make the transition to self-sufficiency and receive the education, training, and services necessary to obtain employment. OCFS continues to contract with the Orphan Foundation of America to administer and serve as NYS’ fiscal agent for the ETV program. Eligible youth may receive up to \$5,000 per year in federal funds to attend a post-secondary education or vocational training program. OCFS has assisted with providing computers and other education-related needs. During FFY 2006-2007, 810 youth received ETV vouchers and 33 districts participated in the program.

Strategy 6: Development and Piloting of a Differentiated Protective Services Response to Allegations of Child Maltreatment

Family Assessment/Differential Response: While it took longer than OCFS anticipated for enacting legislation to be passed, Chapter 452 of the Laws of 2007 authorizes OCFS to develop a family assessment approach to responding to some CPS reports. Six districts (Albany, Chautauqua, Erie, Onondaga, Tompkins, and Westchester) are actively considering developing the program. Differential response will be applied to low and moderate risk cases with no immediate safety concerns. Families in the differential response program will be engaged in timely services without being subjected to the CPS investigative process and determination decision. The goal of this alternate track is to engage families in a way that will enhance their willingness to participate in services that may prevent future maltreatment.

Strategy 7: Workforce Development: Staff Recruitment, Retention and Development

OCFS has established and continues to support the New York State Social Work Education Consortium (NYSWEC) as a primary means of addressing the longer range workforce issues facing public child welfare. The NYSWEC represents a partnership between OCFS and all of the state's graduate and undergraduate social work programs to stabilize and professionalize the public child welfare workforce. Under this initiative NYS has:

- Expanded the availability of graduate social work education to current child welfare staff employed by local social services districts and ACS.
- Conducted extensive research on the reasons for caseworker turnover and studied the differences between high turnover and low turnover counties.
- Applied for and received a five-year Children's Bureau grant to develop strategies for reducing turnover in several pilot districts.
- Initiated an experimental NYS Child Welfare Scholarship Program to provide one-year scholarships to BSW students in their senior year in exchange for a commitment to work

in public child welfare for at least two years. The first cohort of 25 students began study in September of 2007 and will graduate in May of 2008. This group and two subsequent groups will be carefully studied to determine how new staff with undergraduate social work education compare to other new caseworkers without social work training.

Strategy 8: Workload Management Support (Supervision)

The supervision strategy group, made up of local district managers and supervisors and OCFS staff, worked to determine the strengths and needs of the current state of child welfare supervision. The group developed a white paper on the state of supervision and made recommendations to OCFS on the steps it could take in concert with local districts to address the needs. The key recommendations were to provide more support to supervisors and more opportunities for professional development. These recommendations translated into the development of "A Supervisor's Guide to Practice", which was made available to supervisors to assist them in assessing and promoting the casework practice skills of their staff; special skill clinics for supervisors; and increased opportunities for interested supervisors to pursue an MSW degree with fiscal support.

The Teaming Model Initiative grew out of two NYS PIP Strategies: Workforce Development and Strengthening Supervision. This award-winning model was developed by the Massachusetts Department of Social Services to address the conditions related to workforce retention by restructuring individualized casework to that of a team approach. Six districts (Clinton, Chautauqua, Nassau, Schenectady, Tompkins, and Westchester) are piloting the initiative. There are plans to expand the pilot to several more teams beginning in 2008. In order to evaluate the model's success in NYS, OCFS has contracted with the Social Work Education Consortium at the University at Albany School of Social Welfare to complete a three-year evaluation of the project. The aim of this evaluation is to assess if the Teaming Model improves: (1) staff job satisfaction, efficacy, and decision making; (2) client satisfaction; and (3) efficiency for service delivery, e.g., reduce recidivism and reduce length of service episode. Evaluation results are not yet available.

Strategy 9: Improving the Statewide Information Systems

During the PIP timeframe, CONNECTIONS Build 18 was implemented. This enhancement provided for the creation of a single electronic case record and supported the collection and recording of child protective services, preventive services, foster care and adoption services information (the Foster and Adoptive Homefinding and the Investigation and Case Management components).

In March 2007, OCFS implemented Build 18.9 in CONNECTIONS. Included in Build 18.9 were discrete modules that supported the documentation of currently required health and education information for children served through the child welfare system; the incorporation of the Permanency Hearing Report (PHR), the Notice of Permanency Hearing and the Statement to the Court of the Permanency Hearing Report and Notice Sent; as well as additional functional improvements that provide ease of use for workers and aid in system responsiveness.

In 2008-2009, OCFS will continue a transformation of the CONNECTIONS system with the goal of improving navigation, reporting, and ease of documentation for caseworkers, its primary front-end users.

Also, during the PIP timeframe, development continued and reporting capabilities were enhanced for the OCFS Data Warehouse. This effort has made this key tool, used by state, local district, and agency staff, a well-established source of pre-defined and ad hoc reports.

Strategy 10: Tribal Consultation

Since 2003, NYS' Indian Nations have participated in formal, on-going Tribal Consultation meetings sponsored by OCFS three times a year. The Tribal representatives have used this opportunity to provide OCFS with feedback on the Indian Child Welfare Act (ICWA) training initiatives, as follows:

- Tribal representatives actively participated in the planning and filming of an ICWA DVD training tool entitled: "ICWA-What Caseworkers Need to Know." The DVD was premiered in late 2006 and won an International Videographers Award in 2007. The DVD features Tribal Chiefs, Clan mothers, Tribal Program Directors, ICWA Caseworkers, and a prominent Tribal Judge. All parties volunteered in the making of the OCFS training tool. Tribal representatives were hired as consultants to "roll-out" the DVD as a training tool in 16 regional training sessions across NYS in 2007.
- Tribal Nation representatives also participated in the planning of the Statewide Indian Child Welfare conference held in November 2006. Over 200 tribal, local district and judicial staff participated in the event.
- Tribal, local district, and voluntary agency staff continue to participate in the quarterly meetings of the Native American Family Services Commission which is a networking group and collaboration of tribal stakeholders across NYS in both urban and reservation settings.

Strategy 11: Improve Relationships and Interface Between the Family Court and the Child Welfare System

A Statewide Permanency Planning Team (SPPT): This team was established in 2003 and continues to meet quarterly. Senior staff from OCFS, the Office of Court Administration, family court and administrative judges, parents' attorneys, law guardians, and local districts are among the members of the Team. The mission of the Team is to "foster the achievement of improved outcomes in safety, permanency, and well-being for children through improved communication, relationship building, and cooperation among the agencies and courts that impact them. The Team will identify and address issues affecting children and families in the child welfare and juvenile justice systems, explore mechanisms for joint planning and data sharing, and exchange ideas about practice, policy, and the law." Key accomplishments of this Team include: a partnership in supporting passage of the Permanency Legislation in 2005, collaborative training of court and child welfare staff regarding Title IV-E requirements, and a data share initiative. (The data share initiative is described in Section IV: Agency Responsiveness to the Community/Data Collection and Analysis Projects.)

Sharing Success Training Conferences: Five annual Sharing Success Training conferences have been held, and a sixth is planned for Fall 2008. These two-day conferences bring together teams

of child welfare and court personnel from most districts in the State to strengthen their collaborations and hear from national experts on a variety of relevant topics.

Court Appointed Special Advocates Assistance Program: The Court Appointed Special Advocates Assistance Program (CASA) is based on the premise that a single individual can provide the court with vital information essential in making timely and informed decisions and can help to facilitate the child's safety and permanence. The CASA program is now in all five NYC boroughs and 31 districts outside NYC. Meetings have been conducted with the Seneca Nation Tribe to launch the state's first Tribal CASA program.

Child Welfare Best Practices in Family Courts: Pilot "Model Courts" were created in NYC, Erie and Oneida Counties. These courts implemented a team approach led by a Judge and supported by a Court Attorney and Court Attorney Referee. Operating under written protocols, this pilot increases the frequency of post-dispositional court appearances and mediation to promote communication between and among system professionals and litigants, and integrates CASA services to facilitate court access to timely and accurate information.

Family Treatment Court: Family Treatment Court (FTC) is designed to serve individuals who have a neglect case against them with additional allegations of alcohol or substance abuse. The Family Treatment Court's case management unit has the ability to quickly identify and link addicted parents charged with neglect to appropriate drug treatment programs. Through frequent court appearances, FTC monitors compliance, responds to progress and/or problems through graduated sanctions/rewards; it also facilitates cooperation and communication among agencies involved in the reunification process, and ultimately seeks to speed the entire court process, enabling the children to return more swiftly to recovered parents or achieve other permanent homes.

As of February 2007, there was at least one operational or actively planning FTC in almost every county in NYS. Currently, there are 171 operational and an additional 25 FTCs being planned across the state involving 7,324 active participants. Since the FTC's inception, 17,449 participants have successfully completed the program.

While NYS has not conducted a formal evaluation of the FTC model, the NPC Research Group conducted a national study in March 2007 that included Suffolk County, NY. This national study was funded by Substance Abuse and Mental Health Services Administration (SAMHSA) and the U.S. Department of Health and Human Services (HHS). Results showed that participants were more likely to enter treatment, enter treatment more quickly, and complete treatment. Children of participants spent fewer days in out of home placements and were more likely to be reunified with their parents.

Strategy 12: Improve Cross-systems Collaboration and Increase Service Array

Bridges to Health: The Bridges to Health (B2H), a Home and Community-Based Medicaid Waiver program, begun on January 1, 2008, will provide expanded and enhanced services to at least 3,305 foster children with disabilities, including children in OCFS custody. The B2H waivers are unique in several ways:

- The child may be served with all involved caregivers: biological family, foster family, adoptive family
- The three B2H waivers will be administered as one program to serve children with serious emotional disturbances, developmental disabilities, or medical fragility
- The services can follow the child after discharge from foster care. Foster children served by the Medicaid waiver will continue to be eligible for these services after they leave foster care, until age 21, as long as they meet waiver eligibility requirements. This enhances successful reunifications and placements, since the waiver services can follow the child home, or into adoption and adulthood.

B2H services include: Health Care Integration, Planned Respite, Skill Building, Day Habilitation, Family/Caregiver Supports and Services, Prevocational Services, Intensive In-Home Supports and Services, Supported Employment, Special Needs Community Advocacy and Support, Immediate Crisis Response Services, Crisis Avoidance, Management and Training Crisis Respite, Adaptive and Assistive Equipment, and Accessibility Modifications.

Child Welfare-Substance Abuse Collocation Project: The Child Welfare-Substance Abuse Collocation Project is a demonstration project sponsored by OCFS and OASAS that involves the co-location of Credentialed Alcoholism and Substance Abuse Counselors (CASACs) with child welfare staff. The collocation model emphasizes early identification of chemical dependency problems in CPS cases, facilitating access to treatment and prevention services, enhancing linkages with support services in the community, increasing engagement and retention in treatment, and improving service planning and coordination between chemical dependency service providers and child welfare workers. Nine districts have been selected to participate in this demonstration project: Erie, Genesee, Livingston, Onondaga, Fulton, St. Lawrence, Westchester, Dutchess and Orange. OCFS is partnering with the University at Albany to conduct a randomized control trial; results are not yet available.

Child Protective Services (CPS)/Domestic Violence (DV) Collaboration Projects: The CPS/DV collaboration projects outstation a DV advocate from a local non-for-profit DV agency in the local CPS office to participate in joint home visits, joint safety planning and interventions, consultation, case conferencing, cross-training and protocol, and team development. OCFS currently supports 13 CPS/DV projects in 5 regions: one in the Rochester region, three in the Albany region, three in the Syracuse region, four in the Yonkers region, and 2 in the Buffalo region.

In-Depth Technical Assistance (IDTA): In 2006, NYS was awarded an In-Depth Technical Assistance (IDTA) opportunity from the National Center on Substance Abuse and Child Welfare (NCSACW) following a joint application by OCFS, OASAS and OCA. The purpose of this work is to enhance collaboration to improve outcomes for families with substance abuse issues involved in the family court and child welfare system. The results of this work include a soon-to-be published set of documents that will provide a framework and guidance for districts to increase local collaboration between systems, and the development and identification of cross-systems training opportunities to increase the understanding by workers in each of the systems of each other's work.

Strategy 13: Strengthening Adoption Services

Adoption Now Workgroup: In 2004, OCFS established an Adoption Now Workgroup in recognition of the difficult challenge of finding adoptive homes or other permanent resources for foster children with the goal of adoption, given the over-representation of older youth, many of whom have cross-systems needs. The members included representatives from OCFS, local districts, voluntary agencies, foster and adoptive parent support groups, adoptive parents, family court, CIP, OMH, and specialized recruitment agencies.

The primary focus of the group is to improve, enhance and expedite permanency for freed children through adoption or another permanent resource. The successes of the group to date, include:

- *Cross System Collaboration* that facilitated the generation of a MOU which provides for the identification on a bi-annual basis of all OCFS youth in the OMH system. This effort fostered a new look at children served by the two systems and initiated cross-system training and meetings for administrators, program directors, supervisors, caseworkers and adoption attorneys.
- *Adoption Competency Training* brought together a range of experts in the field of adoption which led to the development of a university course in Adoption Competency in partnership with the School of Social Work at Hunter College.
- *Post Adoption Services* proposal for a statewide system of on-going services to support families and on-going work with OCFS, local districts and voluntary agencies on ways to fund post adoption services.
- *Policy changes* in statute and regulations to increase services to adopted children and their families were recommended by the group. Several of these legislation and regulations were passed and/or implemented in 2006 and 2007.

Adoption Panel Reviews: One of the major initiatives of the Adoption Now Workgroup was the formation of Adoption Panel Reviews in all regions of NYS. Adoption Panels identify child specific barriers to the timely adoption of foster children. The Panels are multidisciplinary teams that include OCFS regional adoption specialists, local court staff, and local district and contract agency staff that provide services to foster children.

The Adoption Panels have been very successful in getting workers from different disciplines to work together to find solutions and help to expedite the adoption of freed children. They have also provided a wealth of information to OCFS on systemic barriers to adoption.

Additional Key Initiatives since the 2001 CFSR:

Multi-Disciplinary Teams (MDTs)/Child Advocacy Centers (CACs): OCFS has expanded its funding and support for MDTs/CACs to centralize and increase access to necessary services for child victims and non-offending family members. CACs are designed to facilitate stakeholders working together to protect and keep children safe, while minimizing the intrusiveness of an investigation. CACs enhance the ability of MDTs to investigate, prosecute and manage cases of child abuse and neglect, particularly physical abuse, sexual abuse and other violence directed at children. MDTs are comprised of various professionals essential to an investigation including child welfare, medical, and law enforcement staff.

NYS Kinship Caregiver Program/NYS Kinship Navigator Program: Developed in 2006, the NYS Kinship Caregiver program is a statewide network of 14 programs including the NYS Kinship Navigator Program that supports kinship placement and promotes household stability and permanency for those families. A range of services including counselling, respite, case management, legal information, housing assistance, parenting skills and caregiver support groups is provided. The NYS Kinship Navigator Program assists kinship caregivers throughout the State to gain access to kinship-related information or referral services through a toll-free phone line and web site.

Home Visiting Programs Healthy Families New York (HFNY): HFNY is a comprehensive prevention program that supports families with young children through regular visiting in the home. HFNY currently operates 39 programs serving 41 high need areas of the state. HFNY offers home-based services to expectant families and new parents, beginning at the prenatal stage or shortly after the birth of the child. Families are screened and assessed to identify risk factors and stressors, and participants are offered long-term in-home supportive services until the child is in school or Head Start. The services are easily accessible to isolated at-risk families and are respectful of cultural and community diversity.

OCFS' Bureau of Evaluation and Research, in collaboration with the Center for Human Services Research at SUNY Albany, is engaged in an evaluation of HFNY, using a randomized trial. In year two of the evaluation, parents reported engaging in more appropriate limit setting. Parents also reported committing, on average, one third fewer instances of severe physical abuse in the child's second year of life. The HFNY program was also found to be effective in reducing the use of abusive and neglectful parenting practices among young, first-time mothers who entered the study prior to their child's birth, and for women who showed signs of depression and lacked a sense of mastery. HFNY resulted in significant improvements in access to a primary care provider and health insurance at age two. Children in the treatment group were reported by their mothers to have fewer somatic complaints. Currently, HFNY is analyzing data collected in year three, and collecting data for a seven year follow-up with families in the study.

ACS Improved Outcomes for Children: Introduced in 2006, Improved Outcomes for Children (IOC) is NYC's "strategy for strengthening foster care and preventive services to enhance children's safety and stability and expedite their progress toward permanency." Based on nationwide best practice, IOC includes:

- Family Team Conferences where families are directly involved in the decisions that affect them;
- Clearer lines of accountability so that decisions about families and children can be made more efficiently and effectively;
- Foster Care Financing that supports a flexible family-based system of care that promotes safety, stability, and permanency;
- Targeted Technical Assistance to preventive and foster care provider agencies;
- Performance Monitoring and Measurement that emphasizes continuous quality improvement and accountability on the part of preventive and foster care provider agencies.

Contract agencies are primarily responsible for providing direct preventive and foster care services. Since mid-2007, five preventive agencies and nine foster care agencies have been involved in a pilot of IOC. IOC is still in a pilot phase (agencies in Phase I began implementation in fall 2007). ACS is working with the Chapin Hall Center for Children on an evaluation of the impact of IOC on the families being served by the agencies participating in Phase I.



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SECTION II

Safety and Permanency Data

New York Child and Family Services Review Data Profile: September 24, 2007

CHILD SAFETY PROFILE	Fiscal Year 2005ab						Fiscal Year 2006ab						12-Month Period Ending 03/31/2007					
	Reports	%	Duplic. Childn. ²	%	Unique Childn. ²	%	Reports	%	Duplic. Childn. ²	%	Unique Childn. ²	%	Reports	%	Duplic. Childn. ²	%	Unique Childn. ²	%
I. Total CA/N Reports Disposed¹	140,214		236,897		188,180		150,796		253,436		202,391		160,050		267,676		213,754	
II. Disposition of CA/N Reports³																		
Substantiated & Indicated	42,728	30.5	70,878	29.9	60,111	31.9	48,583	32.2	80,077	31.6	68,174	33.7	52,728	32.9	86,374	32.3	73,546	34.4
Unsubstantiated	97,486	69.5	163,384	69.0	125,864	66.9	102,213	67.8	170,178	67.1	131,490	65.0	107,322	67.1	177,710	66.4	137,179	64.2
Other			2,635	1.1	2,205	1.2			3,181	1.3	2,727	1.3			3,592	1.3	3,029	1.4
III. Child Cases Opened for Post-Investigation Services⁴			A						A						A			
IV. Child Victims Entering Care Based on CA/N Report⁵			A						A						A			
V. Child Victim Fatalities resulting from Maltreatment⁶					75	0.1					73	0.1					90	0.1
STATEWIDE AGGREGATE DATA USED TO DETERMINE SUBSTANTIAL CONFORMITY																		
VI. Absence of Maltreatment Recurrence⁷ [Standard: 94.6% or more]					27,376 of 31,343	87.3					31,859 of 36,930	86.3					31,981 of 36,073	88.7
VII. Absence of Child Abuse and/or Neglect in Foster Care⁸ (12 months) [standard 99.68% or more]					43,600 ^B of 44,084	98.90					41,716 of 42,256	98.72					42,073 of 42,645	98.66

Additional Safety Measures For Information Only (no standards are associated with these):

Fiscal Year 2005ab

Fiscal Year 2006ab

12-Month Period Ending 03/31/2007

The Permanency Data for the 12-month period ending March 31, 2007 was based on the annual file created on 6/22/2007. All CFSR Round One safety Results are on page 2; Permanency Round one results are on page 15.

New York Child and Family Services Review Data Profile: September 24, 2007

	Hours	Unique Childn. ²	%	Hours	Unique Childn. ²	%	Hours	Unique Childn. ²	%
VIII. Median Time to Investigation in Hours (Child File) ⁹	<24			<24			<24		
IX. Mean Time to Investigation in Hours (Child File) ¹⁰	6.0			5.8			6.0		
X. Mean Time to Investigation in Hours (Agency File) ¹¹	C			C			C		
XI. Children Maltreated by Parents While in Foster Care. ¹²			D			D			D

CFSR Round One Safety Measures to Determine Substantial Conformity (Used primarily by States completing Round One Program Improvement Plans, but States may also review them to compare to prior performance)

	Fiscal Year 2005ab						Fiscal Year 2006ab						12-Month Period Ending 03/31/2007					
	Reports	%	Duplic. Childn. ²	%	Unique Childn. ²	%	Reports	%	Duplic. Childn. ²	%	Unique Childn. ²	%	Reports	%	Duplic. Childn. ²	%	Unique Childn. ²	%
XII. Recurrence of Maltreatment ¹³ [Standard: 6.1% or less]					3,967 of						5,071 of						4,092 of	
					31,343	12.7					36,930	13.7					36,073	11.3
XIII. Incidence of Child Abuse and/or Neglect in Foster Care ¹⁴ (9 months) [standard 0.57% or less]					370 ^B of	0.92					411 of	1.05					384 of	0.97
					40,261						39,082						39,392	

New York Child and Family Services Review Data Profile: September 24, 2007

NCANDS data completeness information for the CFSR

Description of Data Tests	Fiscal Year 2005ab	Fiscal Year 2006ab	12-Month Period Ending 03/31/2007
Percent of duplicate victims in the submission [At least 1% of victims should be associated with multiple reports (same CHID). If not, the State would appear to have frequently entered different IDs for the same victim. This affects maltreatment recurrence]	13.9	13.7	13.7
Percent of victims with perpetrator reported [File must have at least 75% to reasonably calculate maltreatment in foster care]*	100	100	100
Percent of perpetrators with relationship to victim reported [File must have at least 75%]*	91.6	92.3	92.7
Percent of records with investigation start date reported [Needed to compute mean and median time to investigation]	100	100	100
Average time to investigation in the Agency file [PART measure]	Not reported	Not reported	n/a
Percent of records with AFCARS ID reported in the Child File [Needed to calculate maltreatment in foster care by the parents; also, all Child File records should now have an AFCARS ID to allow ACF to link the NCANDS data with AFCARS. This is now an all-purpose unique child identifier and a child does not have to be in foster care to have this ID]	Not reported	Not reported	Not reported

* States should strive to reach 100% in order to have full confidence in the Absence of Maltreatment in Foster Care Measure.

FOOTNOTES TO DATA ELEMENTS IN CHILD SAFETY PROFILE

Each maltreatment allegation reported to NCANDS is associated with a disposition or finding that is used to derive the counts provided in this safety profile. The safety profile uses three categories. The various terms that are used in NCANDS reporting have been collapsed into these three groups.

Disposition Category	Safety Profile Disposition	NCANDS Maltreatment Level Codes Included
A	Substantiated or Indicated (Maltreatment Victim)	“Substantiated,” “Indicated,” and “Alternative Response Disposition Victim”
B	Unsubstantiated	“Unsubstantiated” and “Unsubstantiated Due to Intentionally False Reporting”
C	Other	“Closed-No Finding,” “Alternative Response Disposition – Not a Victim,” “Other,” “No Alleged Maltreatment,” and “Unknown or Missing”

Alternative Response was added starting with the 2000 data year. The two categories of Unsubstantiated were added starting with the 2000 data year. In earlier years there was only the category of Unsubstantiated. The disposition of “No alleged maltreatment” was added for FYY 2003. It primarily refers to children who receive an investigation or assessment because there is an allegation concerning a sibling or other child in the household, but not themselves, AND whom are not found to be a victim of maltreatment. It applies as a Maltreatment Disposition Level but not as a Report Disposition code because the Report Disposition cannot have this value (there must have been a child who was found to be one of the other values.)

New York Child and Family Services Review Data Profile: September 24, 2007

Starting with FFY 2003, the data year is the fiscal year.

Starting with FFY2004, the maltreatment levels for each child are used consistently to categorize children. While report dispositions are based on the field of report disposition in NCANDS, the dispositions for duplicate children and unique children are based on the maltreatment levels associated with each child. A child victim has at least one maltreatment level that is coded “substantiated,” “indicated,” or “alternative response victim.” A child classified as unsubstantiated has no maltreatment levels that are considered to be victim levels and at least one maltreatment level that is coded “unsubstantiated” or “unsubstantiated due to intentionally false reporting.” A child classified as “other” has no maltreatment levels that are considered to be victim levels and none that are considered to be unsubstantiated levels. If a child has no maltreatments in the record, and report has a victim disposition, the child is assigned to “other” disposition. If a child has no maltreatments in the record and the report has either an unsubstantiated disposition or an “other” disposition, the child is counted as having the same disposition as the report disposition.

1. The data element, “Total CA/N Reports Disposed,” is based on the reports received in the State that received a disposition in the reporting period under review. The number shown may include reports received during a previous year that received a disposition in the reporting year. Counts based on “reports,” “duplicated counts of children,” and “unique counts of children” are provided.
2. The duplicated count of children (report-child pairs) counts a child each time that (s)he was reported. The unique count of children counts a child only once during the reporting period, regardless of how many times the child was reported.
3. For the column labeled “Reports,” the data element, “Disposition of CA/N Reports,” is based on upon the highest disposition of any child who was the subject of an investigation in a particular report. For example, if a report investigated two children, and one child is found to be neglected and the other child found not to be maltreated, the report disposition will be substantiated (Group A). The disposition for each child is based on the specific finding related to the maltreatment(s). In other words, of the two children above, one is a victim and is counted under “substantiated” (Group A) and the other is not a victim and is counted under “unsubstantiated” (Group B). In determining the unique counts of children, the highest finding is given priority. If a child is found to be a victim in one report (Group A), but not a victim in a second report (Group B), the unique count of children includes the child only as a victim (Group A). The category of “other” (Group C) includes children whose report may have been “closed without a finding,” children for whom the allegation disposition is “unknown,” and other dispositions that a State is unable to code as substantiated, indicated, alternative response victim, or unsubstantiated.
4. The data element, “Child Cases Opened for Services,” is based on the number of victims (Group A) during the reporting period under review. “Opened for Services” refers to post-investigative services. The duplicated number counts each time a victim’s report is linked to on-going services; the unique number counts a victim only once regardless of the number of times services are linked to reports of substantiated maltreatment.
5. The data element, “Children Entering Care Based on CA/N Report,” is based on the number of victims (Group A) during the reporting period under review. The duplicated number counts each time a victim’s report is linked to a foster care removal date. The unique number counts a victim only once regardless of the number of removals that may be reported.

The Permanency Data for the 12-month period ending March 31, 2007 was based on the annual file created on 6/22/2007. All CFSR Round One safety Results are on page 2; Permanency Round one results are on page 15.

New York Child and Family Services Review Data Profile: September 24, 2007

6. The data element “Child Fatalities” counts the number of children reported to NCANDS as having died as a result of child abuse and/or neglect. Depending upon State practice, this number may count only those children for whom a case record has been opened either prior to or after the death, or may include a number of children whose deaths have been investigated as possibly related to child maltreatment. For example, some States include neglected-related deaths such as those caused by motor vehicle or boating accidents, house fires or access to firearms, under certain circumstances. The percentage is based on a count of unique victims of maltreatment for the reporting period.
7. The data element “Absence of Recurrence of Maltreatment” is defined as follows: Of all children who were victims of substantiated or indicated maltreatment allegation during the first 6 months of the reporting period, what percent were not victims of another substantiated or indicated maltreatment allegation within a 6-month period. This data element is used to determine the State’s substantial conformity with Safety Outcome #1.
8. The data element “Absence of Child Abuse/or Neglect in Foster Care” is defined as follows: Of all children in foster care during the reporting period, what percent were not victims of substantiated or indicated maltreatment by foster parent or facility staff member. This data element is used to determine the State’s substantial conformity with Safety Outcome #2. A child is counted as not having been maltreated in foster care if the perpetrator of the maltreatment was not identified as a foster parent or residential facility staff. Counts of children not maltreated in foster care are derived by subtracting NCANDS count of children maltreated by foster care providers from AFCARS count of children placed in foster care. The observation period for this measure is 12 months. The number of children not found to be maltreated in foster care and the percentage of all children in foster care are provided
9. Median Time to Investigation in hours is computed from the Child File records using the Report Date and the Investigation Start Date (currently reported in the Child File in mmddyyyy format). The result is converted to hours by multiplying by 24.
10. Mean Time to investigation in hours is computed from the Child File records using the Report Date and the Investigation Start Date (currently reported in the Child File in mmddyyyy format). The result is converted to hours by multiplying by 24. Zero days difference (both dates are on the same day) is reported as “under 24 hours”, one day difference (investigation date is the next day after report date) is reported as “at least 24 hours, but less than 48 hours”, two days difference is reported as “at least 48 hours, but less than 72 hours”, etc.
11. Average response time in hours between maltreatment report and investigation is available through State NCANDS Agency or SDC File aggregate data. "Response time" is defined as the time from the receipt of a report to the time of the initial investigation or assessment. Note that many States calculate the initial investigation date as the first date of contact with the alleged victim, when this is appropriate, or with another person who can provide information essential to the disposition of the investigation or assessment.
12. The data element, “Children Maltreated by Parents while in Foster Care” is defined as follows: Of all children placed in foster care during the reporting period, what percent were victims of substantiated or indicated maltreatment by parent. This data element requires matching NCANDS and AFCARS records by AFCARS IDs. Only unique NCANDS children with substantiated or indicated maltreatments and perpetrator relationship “Parent” are selected for this match. NCANDS report date must fall within the removal period found in the matching AFCARS record.

New York Child and Family Services Review Data Profile: September 24, 2007

13. The data element, “Recurrence of Maltreatment,” is defined as follows: Of all children associated with a “substantiated” or “indicated” finding of maltreatment during the first six months of the reporting period, what percentage had another “substantiated” or “indicated” finding of maltreatment within a 6-month period. The number of victims during the first six-month period and the number of these victims who were recurrent victims within six months are provided. This data element was used to determine the State’s substantial conformity with Safety Outcome #1 for CFSR Round One.

14. The data element, “Incidence of Child Abuse and/or Neglect in Foster Care,” is defined as follows: Of all children who were served in foster care during the reporting period, what percentage were found to be victims of “substantiated” or “indicated” maltreatment. A child is counted as having been maltreated in foster care if the perpetrator of the maltreatment was identified as a foster parent or residential facility staff. Counts of children maltreated in foster care are derived from NCANDS, while counts of children placed in foster care are derived from AFCARS. The observation period for these measures is January-September because this is the reporting period that was jointly addressed by both NCANDS and AFCARS at the time when NCANDS reporting period was a calendar year. The number of children found to be maltreated in foster care and the percentage of all children in foster care are provided. This data element was used to determine the State’s substantial conformity with Safety Outcome #2 for CFSR Round One.

Additional Footnotes

- A. Data elements for NCANDS services fields are not supported completely by the NY application at this time.

- B. For the FFY2005 submission, NY has corrected the mapping to DCDC code 05 “Group Home or Residential Facility Staff.” This resulted in an increase in residential facility perpetrators compared to the FFY2004 data.

- C. NY does not report on time to investigation in the Agency File.

- D. NY does not report AFCARS IDs in the Child File.

New York Child and Family Services Review Data Profile: September 24, 2007

POINT-IN-TIME PERMANENCY PROFILE	Federal FY 2005ab		Federal FY 2006ab		12-Month Period Ending 03/31/2007	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
I. Foster Care Population Flow						
Children in foster care on first day of year ¹	33,847		29,892		30,059	
Admissions during year	10,237		12,364		12,586	
Discharges during year	13,513		12,124		12,074	
Children discharging from FC in 7 days or less (These cases are excluded from length of stay calculations in the composite measures)	660	4.9% of discharges	740	6.1% of discharges	657	5.4% of discharges
Children in care on last day of year	30,634		30,203		30,612	
Net change during year	-3,213		311		553	
II. Placement Types for Children in Care						
Pre-Adoptive Homes	2,252	7.4	2,194	7.3	2,100	6.9
Foster Family Homes (Relative)	4,821	15.7	5,089	16.8	5,495	18.0
Foster Family Homes (Non-Relative)	13,499	44.1	13,520	44.8	13,692	44.7
Group Homes	1,910	6.2	1,666	5.5	1,708	5.6
Institutions	4,884	15.9	4,634	15.3	4,791	15.7
Supervised Independent Living	0	0.0	0	0.0	0	0.0
Runaway	1,088	3.6	954	3.2	837	2.7
Trial Home Visit	2,180	7.1	2,146	7.1	1,987	6.5
Missing Placement Information	0	0.0	0	0.0	2	0.0
Not Applicable (Placement in subsequent year)	0	0.0	0	0.0	0	0.0
III. Permanency Goals for Children in Care						
Reunification	14,980	48.9	16,520	54.7	16,498	53.9
Live with Other Relatives	248	0.8	702	2.3	734	2.4
Adoption	9,196	30.0	8,051	26.7	7,581	24.8
Long Term Foster Care	0	0.0	0	0.0	0	0.0
Emancipation	3,981	13.0	3,485	11.5	3,427	11.2
Guardianship*	790	2.6	918	3.0	1,084	3.5
Case Plan Goal Not Established	987	3.2	379	1.3	1,111	3.6
Missing Goal Information	452	1.5	148	0.5	177	0.6

*New York State Note: NYS does not have a guardianship permanency planning goal. These numbers appear to reflect data entry errors.

New York Child and Family Services Review Data Profile: September 24, 2007

POINT-IN-TIME PERMANENCY PROFILE	Federal FY 2005ab		Federal FY 2006ab		12-Month Period Ending 03/31/2007	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
IV. Number of Placement Settings in Current Episode						
One	10,576	34.5	11,084	36.7	11,758	38.4
Two	7,423	24.2	7,078	23.4	7,069	23.1
Three	4,415	14.4	4,207	13.9	4,042	13.2
Four	2,755	9.0	2,533	8.4	2,503	8.2
Five	1,778	5.8	1,657	5.5	1,564	5.1
Six or more	3,687	12.0	3,601	11.9	3,676	12.0
Missing placement settings	0	0.0	43	0.1	0	0.0
V. Number of Removal Episodes						
One	22,363	73.0	22,109	73.2	22,645	74.0
Two	6,411	20.9	6,236	20.6	6,182	20.2
Three	1,425	4.7	1,385	4.6	1,371	4.5
Four	341	1.1	343	1.1	326	1.1
Five	70	0.2	66	0.2	64	0.2
Six or more	24	0.1	21	0.1	24	0.1
Missing removal episodes	0	0.0	43	0.1	0	0.0
VI. Number of children in care 17 of the most recent 22 months² (percent based on cases with sufficient information for computation)	11,356	58.0	10,060	52.5	9,767	50.4
VII. Median Length of Stay in Foster Care (of children in care on last day of FY)	28.8		25.1		22.4	
VIII. Length of Time to Achieve Perm. Goal						
	# of Children Discharged	Median Months to Discharge	# of Children Discharged	Median Months to Discharge	# of Children Discharged	Median Months to Discharge
Reunification	8,123	12.2	7,266	10.9	7,334	10.2
Adoption	3,222	52.9	2,532	49.9	2,414	50.0
Guardianship	0	--	0	--	0	--
Other	2,006	48.0	2,036	49.1	2,108	54.0
Missing Discharge Reason (footnote 3, page 16)	83	12.7	205	14.0	166	14.9
Total discharges (excluding those w/ problematic dates)	13,434	23.3	12,039	19.9	12,022	19.2
Dates are problematic (footnote 4, page 16)	79	N/A	85	N/A	52	N/A

The Permanency Data for the 12-month period ending March 31, 2007 was based on the annual file created on 6/22/2007. All CFSR Round One safety Results are on page 2; Permanency Round one results are on page 15.

New York Child and Family Services Review Data Profile: September 24, 2007

Statewide Aggregate Data Used in Determining Substantial Conformity: Composites 1 through 4			
	Federal FY 2005ab	Federal FY 2006ab	12-Month Period Ending 03/31/2007
IX. Permanency Composite 1: Timeliness and Permanency of Reunification [standard: 122.6 or higher].	State Score = 80.5	State Score = 90.8	State Score = 96.3
Scaled Scores for this composite incorporate two components			
National Ranking of State Composite Scores (see footnote A on page 12 for details)	1 of 47	5 of 47	7 of 47
Component A: Timeliness of Reunification			
The timeliness component is composed of three timeliness individual measures.			
Measure C1 - 1: Exits to reunification in less than 12 months: Of all children discharged from foster care to reunification in the year shown, who had been in foster care for 8 days or longer, what percent was reunified in less than 12 months from the date of the latest removal from home? (Includes trial home visit adjustment) [national median = 69.9%, 75th percentile = 75.2%]	46.3%	51.8%	55.3%
Measure C1 - 2: Exits to reunification, median stay: Of all children discharged from foster care (FC) to reunification in the year shown, who had been in FC for 8 days or longer, what was the median length of stay (in months) from the date of the latest removal from home until the date of discharge to reunification? (This includes trial home visit adjustment) [national median = 6.5 months, 25th Percentile = 5.4 months (lower score is preferable in this measure^B)]	Median = 13.2 months	Median = 11.8 months	Median = 10.9 months
Measure C1 - 3: Entry cohort reunification in < 12 months: Of all children entering foster care (FC) for the first time in the 6 month period just prior to the year shown, and who remained in FC for 8 days or longer, what percent was discharged from FC to reunification in less than 12 months from the date of the latest removal from home? (Includes trial home visit adjustment) [national median = 39.4%, 75th Percentile = 48.4%]	35.9%	35.7%	33.9%
Component B: Permanency of Reunification The permanency component has one measure.			
Measure C1 - 4: Re-entries to foster care in less than 12 months: Of all children discharged from foster care (FC) to reunification in the 12-month period prior to the year shown, what percent re-entered FC in less than 12 months from the date of discharge? [national median = 15.0%, 25th Percentile = 9.9% (lower score is preferable in this measure)]	12.5%	12.1%	13.4%

New York Child and Family Services Review Data Profile: September 24, 2007

	Federal FY 2005ab	Federal FY 2006ab	12-Month Period Ending 03/31/2007
X. Permanency Composite 2: Timeliness of Adoptions [standard: 106.4 or higher]. Scaled Scores for this composite incorporate three components.	State Score = 57.5	State Score = 56.7	State Score = 57.8
National Ranking of State Composite Scores (see footnote A on page 12 for details)	3 of 47	3 of 47	3 of 47
Component A: Timeliness of Adoptions of Children Discharged From Foster Care. There are two individual measures of this component. See below.			
Measure C2 - 1: Exits to adoption in less than 24 months: Of all children who were discharged from foster care to a finalized adoption in the year shown, what percent was discharged in less than 24 months from the date of the latest removal from home? [national median = 26.8%, 75th Percentile = 36.6%]	7.9%	9.3%	10.4%
Measure C2 - 2: Exits to adoption, median length of stay: Of all children who were discharged from foster care (FC) to a finalized adoption in the year shown, what was the median length of stay in FC (in months) from the date of latest removal from home to the date of discharge to adoption? [national median = 32.4 months, 25th Percentile = 27.3 months (lower score is preferable in this measure)]	Median = 52.7 months	Median = 49.8 months	Median = 49.7 months
Component B: Progress Toward Adoption for Children in Foster Care for 17 Months or Longer. There are two individual measures. See below.			
Measure C2 - 3: Children in care 17+ months, adopted by the end of the year: Of all children in foster care (FC) on the first day of the year shown who were in FC for 17 continuous months or longer (and who, by the last day of the year shown, were not discharged from FC with a discharge reason of live with relative, reunify, or guardianship), what percent was discharged from FC to a finalized adoption by the last day of the year shown? [national median = 20.2%, 75th Percentile = 22.7%]	17.9%	16.0%	15.8%
Measure C2 - 4: Children in care 17+ months achieving legal freedom within 6 months: Of all children in foster care (FC) on the first day of the year shown who were in FC for 17 continuous months or longer, and were not legally free for adoption prior to that day, what percent became legally free for adoption during the first 6 months of the year shown? Legally free means that there was a parental rights termination date reported to AFCARS for both mother and father. This calculation excludes children who, by the end of the first 6 months of the year shown had discharged from FC to "reunification," "live with relative," or "guardianship." [national median = 8.8%, 75th Percentile = 10.9%]	10.2%	9.6%	10.7%
Component C: Progress Toward Adoption of Children Who Are Legally Free for Adoption. There is one measure for this component. See below.			
Measure C2 - 5: Legally free children adopted in less than 12 months: Of all children who became legally free for adoption in the 12 month period prior to the year shown (i.e., there was a parental rights termination date reported to AFCARS for both mother and father), what percent was discharged from foster care to a finalized adoption in less than 12 months of becoming legally free? [national median = 45.8%, 75th Percentile = 53.7%]	44.0%	40.1%	41.2%

New York Child and Family Services Review Data Profile: September 24, 2007

	Federal FY 2005ab	Federal FY 2006ab	12-Month Period Ending 03/31/2007
XI. Permanency Composite 3: Permanency for Children and Youth in Foster Care for Long Periods of Time [standard: 121.7 or higher]. Scaled Scores for this composite incorporate two components	State Score = 112.1	State Score = 108.7	State Score = 110.8
National Ranking of State Composite Scores (see footnote A on page 12 for details)	19 of 51	16 of 51	19 of 51
Component A: Achieving permanency for Children in Foster Care for Long Periods of Time. This component has two measures.			
Measure C3 - 1: Exits to permanency prior to 18th birthday for children in care for 24 + months. Of all children in foster care for 24 months or longer on the first day of the year shown, what percent was discharged to a permanent home prior to their 18th birthday and by the end of the fiscal year? A permanent home is defined as having a discharge reason of adoption, guardianship, or reunification (including living with relative). [national median 25.0%, 75th Percentile = 29.1%]	26.7%	24.0%	23.3%
Measure C3 - 2: Exits to permanency for children with TPR: Of all children who were discharged from foster care in the year shown, and who were legally free for adoption at the time of discharge (i.e., there was a parental rights termination date reported to AFCARS for both mother and father), what percent was discharged to a permanent home prior to their 18th birthday? A permanent home is defined as having a discharge reason of adoption, guardianship, or reunification (including living with relative) [national median 96.8%, 75th Percentile = 98.0%]	96.7%	96.3%	95.8%
Component B: Growing up in foster care. This component has one measure.			
Measure C3 - 3: Children Emancipated Who Were in Foster Care for 3 Years or More. Of all children who, during the year shown, either (1) were discharged from foster care prior to age 18 with a discharge reason of emancipation, or (2) reached their 18 th birthday while in foster care, what percent were in foster care for 3 years or longer? [national median 47.8%, 25th Percentile = 37.5% (lower score is preferable)]	55.0%	55.5%	52.6%

New York Child and Family Services Review Data Profile: September 24, 2007

	Federal FY 2005ab	Federal FY 2006ab	12-Month Period Ending 03/31/2007
XII. Permanency Composite 4: Placement Stability [national standard: 101.5 or higher]. Scaled scored for this composite incorporates no components but three individual measures (below)	State Score = 109.2	State Score = 107.5	State Score = 108.1
National Ranking of State Composite Scores (see footnote A on page 12 for details)	43 of 51	42 of 51	42 of 51
Measure C4 - 1) Two or fewer placement settings for children in care for less than 12 months. Of all children served in foster care (FC) during the 12 month target period who were in FC for at least 8 days but less than 12 months, what percent had two or fewer placement settings? [national median = 83.3%, 75 th Percentile = 86.0%]	90.0%	89.2%	90.4%
Measure C4 - 2) Two or fewer placement settings for children in care for 12 to 24 months. Of all children served in foster care (FC) during the 12 month target period who were in FC for at least 12 months but less than 24 months, what percent had two or fewer placement settings? [national median = 59.9%, 75 th Percentile = 65.4%]	72.9%	72.6%	72.4%
Measure C4 - 3) Two or fewer placement settings for children in care for 24+ months. Of all children served in foster care (FC) during the 12 month target period who were in FC for at least 24 months, what percent had two or fewer placement settings? [national median = 33.9%, 75 th Percentile = 41.8%]	46.1%	43.8%	43.2%

Special Footnotes for Composite Measures:

- A. These National Rankings show your State's performance on the Composites compared to the performance of all the other States that were included in the 2004 data. The 2004 data were used for establishing the rankings because that is the year used in calculating the National Standards.**
- B. In most cases, a high score is preferable on the individual measures. In these cases, you will see the 75th percentile listed to indicate that this would be considered a good score. However, in a few instances, a low score is good (shows desirable performance), such as re-entry to foster care. In these cases, the 25th percentile is displayed because that is the target direction for which States will want to strive. Of course, in actual calculation of the total composite scores, these "lower are preferable" scores on the individual measures are reversed so that they can be combined with all the individual scores that are scored in a positive direction, where higher scores are preferable.**

New York Child and Family Services Review Data Profile: September 24, 2007

PERMANENCY PROFILE <i>FIRST-TIME ENTRY COHORT GROUP</i>	Federal FY 2005ab		Federal FY 2006ab		12-Month Period Ending 03/31/2007	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
I. Number of children entering care for the first time in cohort group (% = 1 st time entry of all entering within first 6 months)	4,035	74.6	4,918	77.1	5,187	76.5
II. Most Recent Placement Types						
Pre-Adoptive Homes	14	0.3	25	0.5	6	0.1
Foster Family Homes (Relative)	514	12.7	895	18.2	1,035	20.0
Foster Family Homes (Non-Relative)	1,981	49.1	2,521	51.3	2,595	50.0
Group Homes	319	7.9	326	6.6	327	6.3
Institutions	976	24.2	873	17.8	965	18.6
Supervised Independent Living	0	0.0	0	0.0	0	0.0
Runaway	74	1.8	77	1.6	73	1.4
Trial Home Visit	157	3.9	201	4.1	186	3.6
Missing Placement Information	0	0.0	0	0.0	0	0.0
Not Applicable (Placement in subsequent yr)	0	0.0	0	0.0	0	0.0
III. Most Recent Permanency Goal						
Reunification	2,711	67.2	3,892	79.1	4,123	79.5
Live with Other Relatives	20	0.5	128	2.6	156	3.0
Adoption	79	2.0	135	2.7	84	1.6
Long-Term Foster Care	0	0.0	0	0.0	0	0.0
Emancipation	51	1.3	63	1.3	57	1.1
Guardianship	51	1.3	169	3.4	176	3.4
Case Plan Goal Not Established	892	22.1	415	8.4	499	9.6
Missing Goal Information	231	5.7	116	2.4	92	1.8
IV. Number of Placement Settings in Current Episode						
One	2,656	65.8	3,148	64.0	3,369	65.0
Two	944	23.4	1,171	23.8	1,210	23.3
Three	297	7.4	409	8.3	410	7.9
Four	101	2.5	128	2.6	130	2.5
Five	26	0.6	48	1.0	40	0.8
Six or more	11	0.3	14	0.3	28	0.5
Missing placement settings	0	0.0	0	0.0	0	0.0

The Permanency Data for the 12-month period ending March 31, 2007 was based on the annual file created on 6/22/2007. All CFSR Round One safety Results are on page 2; Permanency Round one results are on page 15.

New York Child and Family Services Review Data Profile: September 24, 2007

Note: These are CFSR Round One permanency measures. They are intended to be used primarily by States completing Round One Program Improvement Plans, but could also be useful to States in CFSR Round Two in comparing their current performance to that of prior years:

	Federal FY 2005ab		Federal FY 2006ab		12-Month Period Ending 03/31/2007	
	# of Children	% of Children	# of Children	% of Children	# of Children	% of Children
IX. Of all children who were reunified with their parents or caretakers at the time of discharge from foster care, what percentage was reunified in less than 12 months from the time of the latest removal for home? (4.1) [Standard: 76.2% or more]	4,002	49.2	4,010	55.1	4,240	57.7
X. Of all children who exited care to a finalized adoption, what percentage exited care in less than 24 months from the time of the latest removal from home? (5.1) [Standard: 32.0% or more]	254	7.9	234	9.2	250	10.4
XI. Of all children served who have been in foster care less than 12 months from the time of the latest removal from home, what percentage have had no more than two placement settings? (6.1) [Standard: 86.7% or more]	10,984	90.6	12,505	88.8	13,185	90.8
XII. Of all children who entered care during the year, what percentage re-entered foster care within 12 months of a prior foster care episode? (4.2) [Standard: 8.6% or less]	1,114	10.9 (74.8% new entry)	1,214	9.8 (76.3% new entry)	1,163	9.2 (77.0% new entry)

New York Child and Family Services Review Data Profile: September 24, 2007

FOOTNOTES TO DATA ELEMENTS IN THE PERMANENCY PROFILE

¹The FY 05, FY 06 , and 07 counts of children in care at the start of the year exclude 209 , 241 , and 253 children, respectively. They were excluded to avoid counting them twice. That is, although they were actually in care on the first day, they also qualify as new entries because they left and re-entered again at some point during the same reporting period. To avoid counting them as both "in care on the first day" and "entries," the Children's Bureau selects only the most recent record. That means they get counted as "entries," not "in care on the first day."

²We designated the indicator, *17 of the most recent 22 months*, rather than the statutory time frame for initiating termination of parental rights proceedings at *15 of the most 22 months*, since the AFCARS system cannot determine the *date the child is considered to have entered foster care* as defined in the regulation. We used the outside date for determining the *date the child is considered to have entered foster care*, which is 60 days from the actual removal date.

³This count only includes case records missing a discharge reason, but which have calculable lengths of stay. Records missing a discharge reason and with non-calculable lengths of stay are included in the cell "Dates are Problematic".

⁴The dates of removal and exit needed to calculate length of stay are problematic. Such problems include: 1) missing data, 2) faulty data (chronologically impossible), 3) a child was in care less than 1 day (length of stay = 0) so the child should not have been reported in foster care file, or 4) child's length of stay would equal 21 years or more. These cases are marked N/A = Not Applicable because no length of stay can legitimately be calculated.

⁵This First-Time Entry Cohort median length of stay was 15.8 in FY 05. This includes 15 children who entered and exited on the same day (who had a zero length of stay). If 15 were excluded from the calculation, the median length of stay would be slightly higher at 15.9.

⁶This First-Time Entry Cohort median length of stay was 10.9 in FY 06. This includes 14 children who entered and exited on the same day (who had a zero length of stay). If these children were excluded from the calculation, the median length of stay would still be 10.9.

⁷This First-Time Entry Cohort median length of stay is Not Yet Determinable for 07. This includes 11 children who entered and exited on the same day (they had a zero length of stay). If these children were excluded, the median length of stay would still be Not Yet Determinable. The designation, Not Yet Determinable occurs when a true length of stay for the cohort cannot be calculated because fewer than 50% of the children have exited.



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SECTION III

Narrative Assessment of Child and Family Outcomes

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

Item 1: Timeliness of initiating investigations of reports of child maltreatment.

How effective is the agency in responding to incoming reports of child maltreatment in a timely manner?

Policy Description:

All Child Protective Services (CPS) investigations of new or subsequent reports must be initiated within 24 hours of the receipt of the report of allegation(s) of child abuse or maltreatment. The initial contact must be sufficient to assess whether any child is in immediate danger of serious harm. The appropriate local district investigates in-home and foster home cases and must determine within 60 days whether the report is indicated or unfounded based on the “some credible evidence” standard. Within the 60 days, caseworkers must see all children named in the report and must assess the safety of all children, as well as the risk of future abuse and maltreatment. Reports alleging child abuse or maltreatment in group homes and congregate care facilities are investigated by OCFS or, in some instances, the NYS Commission on Quality of Care and Advocacy for Persons with Disabilities.

2001 CFSR Summary:

In the 2001 CFSR, this item was identified as a strength in the onsite review, because the investigation for all 12 of the cases that were reported during the review period began within 24 hours. It was noted that face-to-face contact occurred within the required timeframes. Stakeholders stated that strong collaboration had been developed with law enforcement agencies to conduct joint investigations of serious physical abuse and sexual abuse cases and that improvement had occurred in the timeliness of initiating reports and in making face-to-face contacts.

Measures of Effectiveness:

Eighty-five percent of all calls to the Statewide Central Register of Child Abuse and Maltreatment (SCR) are responded to (answered) within one minute.

According to the federal measure, “mean time to investigation”, NYS performed well. In the 2005 federal fiscal year, NYS’ mean time to investigation was 5.8 hours. In the 12-month period ending 3/31/2007, the mean time to investigation was 6.0 hours, well within NYS’ 24-hour requirement. According to a report published by ACS, over the last five years, ACS met the requirement of initiating investigations within 24 hours in about 96% of the cases each year.

A report on local districts’ performance on achieving contact within 24 hours is available from the Data Warehouse and is used by local districts and the Regional Offices to review timeliness. OCFS uses a case review process to assess the quality of that first assessment of safety within the 24 hour period. In the last three years (2005 – 2007), according to NYS’ Ongoing Monitoring and Assessment (OMA) tool that is used to sample CPS case practice in upstate districts, the

median percentage of cases with an adequate assessment of immediate danger within 24 hours of receiving a child protective report, ranged from 80% to 87%.

Factors Affecting Performance:

NYS requires that an investigation of alleged child abuse and maltreatment be initiated within 24 hours of receipt of the report. The assessment does not necessarily have to be based on a face-to-face contact; however, an adequate assessment of safety must be completed within 24 hours by collecting sufficient information to make that assessment. The policy is clearly stated and adhered to as the minimum standard across the state. Some local districts opt to impose a more rigorous policy.

In 2006, state legislation created a legal mechanism for CPS to seek court assistance when CPS is denied access to allegedly abused or maltreated children or to such children's homes during a CPS investigation and prior to the filing of a family court petition. OCFS amended its regulations to require assessment of the need to seek such a court order when denied access to a child, the child cannot be located, or the worker is not permitted to enter the home. 07-OCFS-ADM-07 provides detailed instructions to CPS staff about how to obtain such a court order, including during hours when a court is not in session. OCFS worked very intensely and collaboratively with the Office of Court Administration (OCA) to develop a statewide process so that access to such court orders could be obtained 24 hours a day.

Caseload size is often cited as a key factor affecting CPS practice. The NYS Legislature directed OCFS to contract with a national child welfare expert to review and recommend manageable workloads for child protective services, foster care, and preventive services that would allow sufficient time for each worker to meet all requirements and allow for comprehensive assessment of services for children and families. OCFS contracted with Walter R. McDonald and Associates (WRMA) to complete the study by December 1, 2006. WRMA has national experience in human services research and evaluation and has completed workload studies for other states.

The study included a review of state and federal laws and regulations regarding NYS' child welfare delivery system, interviews with local districts, the collection of staffing data from the local districts and voluntary agencies that participated in the study, and a two-week time study. The time study was a daily recording of workers' time and activities between September 11, 2006 and September 29, 2006.

A total of 11 local districts, including ACS, and 42 voluntary authorized agencies participated. A list of the participating districts and agencies can be found in the WRMA Report Overview. Over 2,000 caseworkers, case planners, case managers, and supervisors who carry a caseload were involved in the time study.

The report identified the need for performance improvement in child welfare in NYS and reports, "reducing caseloads will be an important step towards achieving, within required timeframes, the safety, permanency and well-being of all children and their families." Further recommendations included an increase in the infrastructure (such as increased management, training, and supervision) to support additional staff.

In an effort to reduce caseloads, NYS offered funding (\$9.7 million in 2007-2008, and \$5 million in 2006-2007) to local districts to reduce CPS caseloads. As a result of this funding, and local resources, approximately 392 CPS caseworkers are being hired. OCFS continues to work with local districts to provide data that informs both the district and OCFS of the number of CPS caseworkers who have large caseloads. Although the percent of CPS caseworkers with more than 20 open cases fluctuates, the overall decline within a 12-month period (January 2007 to January 2008) is 7% (from 339 to 316).



Item 2: Repeat maltreatment.

How effective is the agency in reducing the recurrence of maltreatment of children?

Policy Description:

NYS Social Services Law does not differentiate between initial and subsequent reports of child maltreatment in any of its CPS investigative or service standards. A determination must be made within 60 days of the receipt of the report; appropriate safety interventions, including in-home and foster care interventions, must occur to keep children safe; and, services may be provided to reduce the risk of future maltreatment. Sometimes, local districts may have to get a family court order to mandate safety interventions and risk reduction services. A research-based Risk Assessment Profile (RAP) is completed by CPS to assess future risk and to assist in determining whether to keep a case open for the provision of services after the determination of the report, whether there is a need to reassess a family's progress toward reducing the risk to children, and whether an open child protective case may appropriately be closed. Certain subsequent reports that occur while a report is under investigation may be consolidated within an open, on-going investigation. According to the administrative directive (03-ADM-OCFS-01) that introduced the possibility of consolidating reports, "In order to provide more accurate data on the rate of repeat maltreatment, to avoid duplication of effort on the part of CPS staff and to support strength-based child welfare practice and the engagement of families, the workgroup recommended that social services districts be allowed to consolidate subsequent investigations into open on-going investigations, when appropriate based on case circumstances." Many, but not all, local districts use the consolidation option.

2001 CFSR Summary:

In the 2001 CFSR, this item was rated as an area needing improvement based on the national standard data in the Statewide Assessment. NYS' recurrence rate was 13.47% in 1999 and the national standard was 6.1%. NYS attributed the high rate, in part, to the acceptance of subsequent reports during an open, on-going investigation unlike many states that consolidate all such subsequent reports into the on-going investigation. In the onsite review, the repeat maltreatment item was rated as a strength, because reviewers determined that during the period under review, there were no repeat substantiated reports of abuse or neglect for the 42 cases

reviewed. However, reviewers also noted that there were cases with a significant number of multiple reports of maltreatment during the life of the case, especially in chronic neglect cases. The final report also noted that in some instances, insufficient documentation of, and focus on, family history, as well as an inadequate case history was provided to contract agencies and service providers.

Measures of Effectiveness:

The federal measure of the absence of maltreatment recurrence is defined as, “Of all children who were victims of a substantiated or indicated maltreatment allegation during the first six months of the reporting period, what percent were not victims of another substantiated or indicated maltreatment allegation within a six month period.” NYS did not meet the federally established national standard of 94.6% or more. For the federal fiscal year (FFY) 2005, NYS’ performance was at 87.3%. In FFY 2006, NYS’ performance declined slightly to 86.3%. In the 12-month period ending March 31, 2007, NYS’ performance improved to 88.7%.

Absence of Recurrence of Maltreatment of Children within 6 months				
6 Month Cohort	6 Month follow-up end dates	NYC	ROS	Statewide
1/2001-6/2001	12/31/2001	81.9%	82.0%	85.0%
1/2002-6/2002	12/31/2002	91.1%	82.8%	86.3%
10/2002-3/2003	9/30/2003	88.9%	83.6%	85.7%
4/2003-9/2003	3/31/2004	89.3%	83.9%	85.9%
10/2003-3/2004	9/30/2004	87.8%	84.8%	86.0%
4/2004-9/2004	3/31/2005	90.4%	85.3%	87.1%
10/2004-3/2005	9/30/2005	89.5%	86.1%	87.3%
4/2005-9/2005	3/31/2006	90.3%	86.8%	88.0%
10/2005-3/2006	9/30/2006	87.6%	85.2%	86.3%
4/2006-9/2006	3/31/2007	90.7%	87.0%	88.7%

Data Source: OCFS Data Warehouse, using the NCANDS data.

As the chart, above illustrates, NYS has shown a fairly steady performance improvement since 2001. NYC’s rate of recurrence of maltreatment tends to be better than the rest of the state, and fluctuates between approximately 82% and 91%.

Factors Affecting Performance:

There are many factors with potential impact on the repeat maltreatment measure, including CPS staffing (discussed in Item 1), consolidating investigations, the adequate assessment of risk factors, and the availability of services.

During the PIP, OCFS convened a workgroup that included local district staff to examine the factors that contributed to the rate of repeat maltreatment. In order to provide more accurate data on the rate of repeat maltreatment, to avoid duplication of effort on the part of CPS staff, to support strength-based child welfare practice, and the engagement of families, the workgroup recommended that local districts be allowed to consolidate subsequent investigations into open, on-going investigations, when appropriate, based on case circumstances. A supervisor must approve the consolidation in the same manner that all investigation conclusions are approved. In December 2003, consolidated investigations criteria was disseminated to all local districts and is available for review in Administrative Directive: 03-OCFS-ADM-01.

According to OCFS' Data Warehouse, during December 2007, approximately 1,158 cases were consolidated across the state. It was noted, in a CPS focus group, that the data maintenance requirements for consolidation are difficult for smaller local districts to manage. Several focus groups (including the Risk and Safety Strategy Workgroup) mentioned that practice variation and inconsistency of use of the option to consolidate duplicate reports impacts NYS' ability to measure the effectiveness of consolidation.

The CPS Risk Assessment Profile (RAP), implemented in 2003, is a research-based assessment profile designed to support caseworkers in gathering and classifying information into risk categories based on the probability of future abuse and maltreatment. The RAP is designed to predict those families that are most likely to experience a recurrence of maltreatment.

In NYS, the RAP was implemented statewide over a period of two years and was evaluated over several stages. When completed properly, the RAP has proven to be very successful in identifying high risk families that require more attention and services. Through the research and development of the RAP, OCFS was able to identify child and family characteristics that are associated with repeat maltreatment. Risk factors identified in the study include: prior history of child abuse or neglect, inadequate housing, financial problems, lack of supports, presence of domestic violence, alcohol or drug misuse, presence of parental mental health issues or disability, and unrealistic parental expectations of child, among others. In particular, lack of adequate housing, parental mental health issues, and parental drug misuse are strong predictors of repeat maltreatment. Approximately 61% of the primary caretakers with inadequate housing experienced a subsequent indicated report within 22 months of the focal report, compared to only 27% of caretakers that had adequate housing. Over half (53%) of the primary caretakers with serious mental health problems had a subsequent indicated report, versus only 26% of those without serious mental health problems. Almost half (48%) of the caretakers who misused drugs experienced a subsequent indicated report, compared to only 19% of the caretakers who had not misused drugs. Because of these findings, many of NYS' key pilot initiatives, such as the Child Welfare-Substance Abuse Collocation Project, were developed.

A 2005 RAP Implementation Study, conducted by OCFS consisted of an analysis of thousands of RAPs and reviews of a subset of associated case records. This study found that the accurate utilization of the RAP is not consistent across the state. The results were presented to the OCFS Risk and Safety Workgroup (which includes CPS supervisors from ACS, OCFS Regional Directors, and supervisors of CPS caseworkers in several districts). The purpose of the presentations was to raise awareness of the implementation problems, and, through feedback from the field, increase OCFS' understanding of the underlying conditions so solutions could be developed. As a result, OCFS is developing on-going training, support, and technical assistance to encourage caseworkers to correctly and consistently utilize the RAP.

In addition to the RAP Development and Implementation Studies, the OMA process reviews cases with repeat maltreatment to determine if there were any patterns in the determination or characteristics of a case with repeat maltreatment. The samples of repeat maltreatment that are examined through the OMA process are district-specific and provide the basis for some district-specific hypotheses regarding why repeat maltreatment occurs. In addition to family patterns of

chronic neglect or families that were not responsive to services, several themes do emerge that suggest organizational issues that may contribute to repeat maltreatment. Chief among these are: insufficient information gathered during the period of investigation to assess risk or repeat maltreatment, a focus on the allegation at the expense of risk factors, and a misapplication of the RAP.

NYS continues to provide un-capped 65% state reimbursement for the provision of preventive services, child protection, and aftercare services to vulnerable children and families. In state fiscal year 2006-2007, approximately \$381.6 million was provided to local districts through this funding stream. The state budget for state fiscal year 2007-2008 increased funding to \$465.6 million, and the Governor's proposed budget for 2008-2009 increases the amount to \$619.3 million. This 33% proposed increase, in a year when the state budget deficit is predicted to be over \$4 billion and belt-tightening is occurring at many levels, reflects a significant commitment to serving children and families. These funds provide an incentive for localities to provide preventive services that address the community's service needs, including services that prevent out-of-home placement.

Families who are investigated by CPS may be too traumatized to engage in taking steps to keep their children safe. NYS has undertaken initiatives to engage families in successfully understanding the needs of their children and participate in services planning to address those needs. The development of bringing families together to plan for their children has been supported through Quality Enhancement Funding and training of supervisors and caseworkers. Innovative service models, such as the Child Advocacy Centers, Multi-Disciplinary Teams, and family meetings, contribute to a more comprehensive, holistic assessment of the family and child's needs, as well as minimizing potential trauma the family might experience when interacting with the child welfare system. These approaches help to better engage the family in determining what services are needed while conducting an inclusive investigation.

Family Treatment Courts and Child Welfare-Substance Abuse Collocation projects appear to be especially helpful in engaging and serving families with substance abuse issues. Likewise, OCFS has programmatically and financially supported 13 local districts to co-locate a domestic violence service provider within CPS to better support families where domestic violence may be contributing to a reduction in child safety or an increase in the risk of future harm to a child. A formal evaluation of NYS Family Treatment Courts has not been conducted; however, a national evaluation was completed that included Suffolk County, NY. (For a discussion of this evaluation, see Section I, Key Initiatives.) OCFS, with its research partners at the University at Albany, is undertaking a randomized control trial of the Child Welfare Substance Abuse Collocation initiative in two of the nine sites, in order to determine its impacts on recurrence of child abuse and neglect, substance abuse, and out-of-home placement. As the random assignment has just begun, OCFS will not have results for about two years.

While these models and innovative pilots are showing promise, they are not widely implemented across NYS. The geographic scope of the Child Welfare Substance Abuse Collocation project, for example, has intentionally been limited to allow OCFS to adequately test its effectiveness in reducing recurrence of abuse and neglect, decreasing substance abuse, and averting out-of-home placements.

Legislation passed in NYS in 2007 allows for the piloting of a differentiated protective services response to reports of child abuse and maltreatment, and OCFS is in the process of developing guidance for implementation. The goal of this alternate response is to better engage families in need of supportive services without conducting or recording an investigation. It is designed to enhance the family's willingness to participate in services that may prevent future maltreatment. (For more information, refer to Section I, Key Initiatives.)



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

Item 3: Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care.

How effective is the agency in providing services, when appropriate, to prevent removal of children from their homes?

Policy Description:

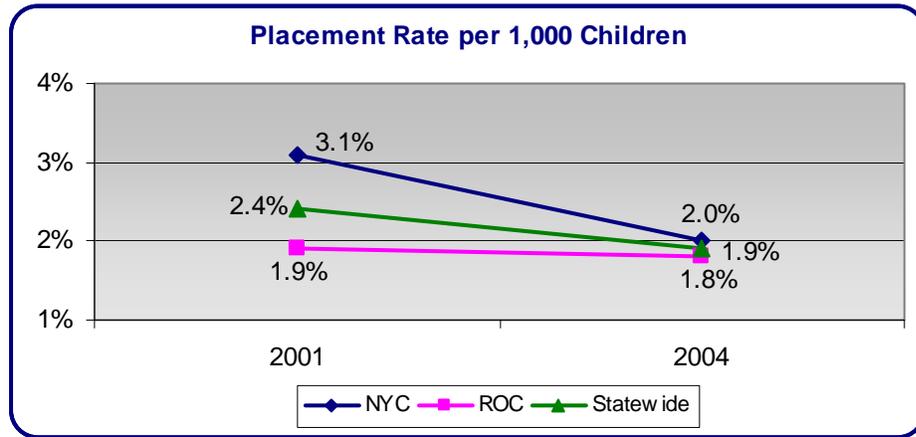
Local districts are required to provide or arrange for and coordinate services necessary to safeguard the child(ren)'s well-being and to preserve and stabilize family life whenever appropriate. Assessments of safety, risk and family functioning and service planning tools are used and documented in NYS' computerized case records. Local districts are required to provide appropriate interventions to protect children and services to reduce risk in order to prevent removal whenever possible as well as to prevent re-entry into foster care after discharge. These services are outlined in the State's Protective and Preventive Services Regulations and include day care, counseling and therapy for children and parents, day services for children, parent aide and training services, arranging for financial assistance, emergency shelter and housing services, transportation services, and emergency cash and goods.

Placement decisions in child protective cases are guided by the safety assessment and decision making protocol. Policy is clear that placement is a safety intervention only when nothing else can secure the child's safety in his or her home. Prior to placement, the local district is required to provide appropriate services to prevent the placement, except in certain situations specified in state or federal law. Policy requires the caseworker to document in the Uniform Case Record (UCR) what services were offered and why placement was the only appropriate alternative. This would include the local districts' required attempts to locate safe, alternative living arrangements with a relative or family friend, which would enable the child to avoid foster care.

2001 CFSR Summary:

During the 2001 CFSR onsite review, all 15 cases assessed on the item "services to family to protect children in home and prevent removal," were rated as a strength. Reviewers noted evidence of substance abuse and domestic violence services, educational advocacy, and an array of preventive services. The CFSR Final Report noted that contract agencies provided especially high quality preventive services and involvement of families in planning.

Measures of Effectiveness:



Data Source: Fall 2007 Data Packet

Between 2001 to 2004, the placement rate per 1,000 children decreased. This is especially evident in NYC where, in 2001, the placement rate per 1,000 children was 3.1%; this rate decreased to 2.0% in 2004. Statewide, the rate has decreased from 2.4% to 1.9% for the same period.

As illustrated in the chart below, the 2006 Monitoring and Analysis Profile (MAPS) (an OCFS annual report that details data on child protective, preventive services, foster care and adoption for NYC, upstate and statewide) cited that about 33% of preventive services cases were open with concurrent child protective services. These data show a positive trend in providing preventive services to families known to the child protective system in that the percentage of families that received both preventive and CPS services increased from 24% in 2004 to 33% in 2006, thereby supporting increased services to keep children safe and prevent removal of children from their homes.

Preventive Services		
	Prior Foster Care Services	Open with concurrent CPS services
2004	8.3%	24.0%
2005	6.5%	25.9%
2006	6.0%	33.0%

Data Source: NYS Monitoring and Analysis Profiles (MAPS)

Factors Affecting Performance:

The decline in NYS’ foster care population and rate of placement demonstrate successful performance in preventing removal of children from their homes. However, where caseloads are high, this is a barrier to providing needed services to families. As discussed in Item 1, the 2006 study conducted by WRMA⁸ indicated that there is not sufficient staff available to perform child

⁸ Walter R. McDonald and Associates, Inc. American Humane Association. “NYS Child Welfare Workload Study.” Nov. 2006.

protective, foster care and prevention work in an effective and timely manner in many parts of the state. In 2007, funds were made available to address CPS workload issues. The funds were used by local districts to lower caseworker-to-client ratios and to address timeliness of critical CPS safety assessments and report determinations. Although the percent of CPS caseworkers with more than 20 open cases fluctuates, the overall decline within a 12-month period (January 2007 to January 2008) is 7% (from 339 to 316).

As discussed in Section I, Key Initiatives, the pilot, “Teaming Model,” is a promising initiative that is designed to provide team decision-making support to caseworkers as they develop and implement family and child service plans.

Effective family engagement is also believed to positively impact better outcomes for children and families and NYS has developed many key initiatives designed to increase family engagement. However, the CPS gateway into preventive services often negatively impacts the development of the trust and communication relationship between the family and the local social service district. Legislation was passed in 2007, although not yet implemented, that allows for piloting of a differential response model (also known as dual track, or family assessment response) in NYS. Several local districts are working with OCFS to explore participation in a pilot, which, based on other states’ experiences, holds promise for strengthening family engagement strategies in the child protective services area.

Cited as a strength, the availability of open-ended 65% state reimbursed preventive funding has increased the provision of available and appropriate services. Some districts, however, report that they do not access this funding due to a lack of local matching funding, thereby impacting the potential to develop additional service resources to children and families.

In addition to family engagement and funding, strides have been made in the area of helping CPS caseworkers understand the effects of domestic violence and safety planning that prevent the removal of children from their homes. These include:

- The creation of written “Guidelines for CPS and DV Workers Collaborating with Families Experiencing both DV and Child Abuse”;
- Increased focus on creating strategies for working with batterers who are fathers;
- A Local Commissioner’s Memorandum (LCM) was distributed describing the Nicholson case (a lawsuit several years ago in NYC involving the interface between CPS and DV) and its impact on case practice where there is DV;
- The mandated DV training for all CPS caseworkers was modified to better meet the needs of CPS caseworkers;
- In 13 local districts, there are DV/CPS collaborations where a DV expert is on site as a consultant to the CPS caseworker; and
- NYS was selected as one of three states to receive technical assistance from the federal Family Violence Prevention fund. One of the activities related to the technical assistance will be DV training for the OCFS Family Engagement Specialists.

Together, these activities have improved caseworker practice, and the likelihood of maintaining safety for the child is increased when the non-offending parent is assisted with safety and self-sufficiency. While the activities to engage fathers are in the initial stages, they focus caseworker

attention to safely engaging fathers by developing empathy for their children, parenting skills, providing opportunities for change where appropriate, and holding the abuser accountable. Specific practice outcome improvements anecdotally documented by CPS and DV providers include:

- Better matching of services and interventions to family needs, often reducing the need for more invasive actions;
- Joint safety planning between victims and caseworkers, resulting in creative problem solving to reduce risk and increase safety;
- More resources available to families to minimize families falling through the cracks;
- More effective court orders for victims;
- Better identification of DV issues by CPS workers in the report and during the investigation;
- Referrals to more appropriate and safer services for both child and adult victims;
- Improved trust, respect and communication between CPS and DV workers;
- More comprehensive and consistent information provided to families; and
- Better information for courts that are working with families impacted by DV.

Other initiatives, such as the Child Welfare-Substance Abuse Collocation project (see Section I, Key Initiatives) show promise in impacting factors that have been identified as predictors of maltreatment.



Item 4: Risk assessment and safety management.

How effective is the agency in reducing the risk of harm to children, including those in foster care and those who receive services in their own homes?

Policy Description:

Each local district is required to take measures to protect all the children in every case whether under investigation or open for in-home or foster care services. The assessment and reduction of risk of future maltreatment are critical casework requirements. When a child is in immediate danger, the caseworker must reduce the danger with safety interventions, which may range from an in-home solution to foster care placement. NYS requires the use of a structured safety decision-making model and the RAP to support and guide caseworkers in assessing and managing safety and risk for families reported to CPS through the SCR.

Safety assessments must occur and be documented at mandated times throughout a case (such as during the CPS investigation, at six month planning reviews, and at case closing). Caseworkers are trained via the OCFS Common Core training program and through other training programs that safety assessment is an on-going process that occurs at every contact with a family, although it is formally documented at specified intervals.

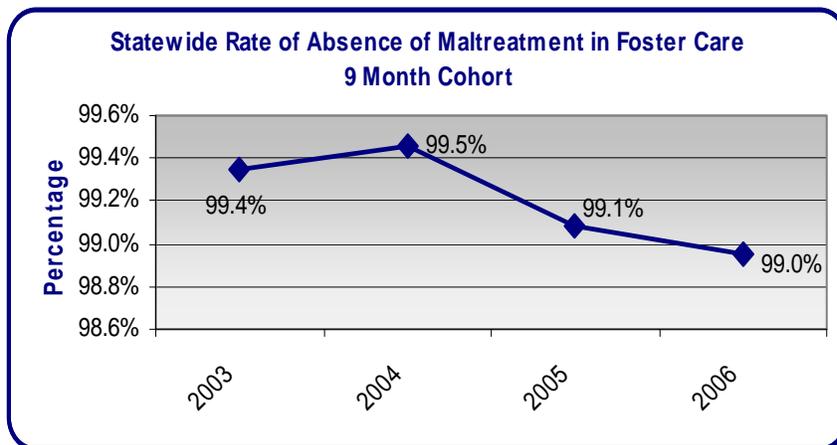
Risk assessments occur as part of the initial response to a CPS report for all cases at the point when a report is determined. This is used to inform the decision whether to open the case for on-going preventive or foster care services. Risk assessments are also conducted at the same intervals as safety assessments for all cases with a “protective” program choice that are open for in-home or foster care services. Services to reduce risk must be provided as described in Item 3, under Policy Description. Safety assessments must also be done for children and families who are receiving preventive or foster care services for other than protective reasons.

2001 CFSR Summary:

This item was called “Risk of harm to child” in Round 1 and was rated as a strength. In 35 of 38 cases (92%), reviewers found effective risk and safety assessment and management and also noted appropriate use of court orders to motivate non-compliant parents. Stakeholders and reviewers noted appropriate provision of preventive services. Areas cited as needing improvement by reviewers included: communication with parents about needed behavioral changes and timeframes; documentation and tracking progress; and, discharge planning for adolescents related to safety, permanency, and well-being. Stakeholders also noted a need to explain the CPS process to parents, and concerns about the safety of youth in group homes and the location of group homes.

Measures of Effectiveness:

Using data from all 2006 OMA case reviews, 67% (median performance) of the reviewed cases were determined to have sufficient information gathered to assess risk. When sufficient information was gathered, 87% (median performance) of the cases were ascertained to have appropriate risk assessments.



The graph to the left, illustrates a measure of safety while the child is in foster care, and demonstrates a slight decline in NYS’ performance relating to the absence of maltreatment in foster care.

Factors Affecting Performance:

Accurate assessments need to involve and engage the family. When a family assists in the development of its own plan to keep its children safe, there is a much greater likelihood that the family will successfully implement the plan, thereby reducing the risk of future abuse and maltreatment to the children. Family-developed plans are more likely to involve informal supports, including the involvement of extended family. As previously discussed, OCFS has contracted with CDHS to outstation Family Engagement Specialists in each region to develop

and enhance the capacity of districts to engage families. Focus groups have identified the use of Family Engagement Specialists in each OCFS Regional Office as a strength. In NYC, a strong emphasis is being placed on CPS caseworkers contacting key people in a child's life during the investigation as important collateral sources of information that contribute to a better-informed risk assessment.

Recent policy changes coupled with enhancements to CONNECTIONS now allow for all workers serving families with a CPS history to have immediate, 24-hour access to that history, including work done by other service providers. Until recently this was not the case. Foster care or preventive services staff, who were working with a family due to abuse or maltreatment, were unable to view the case information contained in the investigation stage of CONNECTIONS. At times, this led to important information being unavailable to the on-going caseworker and hence, the development of service plans that may not have been sufficiently robust to address the maltreatment dynamics in the family.

As discussed in Item 1, staffing resources, as evidenced through feedback from focus groups and the WRMA Study, show that CPS caseloads and responsibilities need to be aligned to allow caseworkers to invest sufficient time in the assessment process, including face-to-face time with families and collateral contacts. Stakeholders report that time constraints, such as those associated with Family Assessment Service Plan (FASP) due dates, sometimes compromise the quality of RAPs.

Risk reduction requires that services are available to address the behaviors and conditions that were identified in the RAP. However, such services, including mental health or substance abuse prevention, are not consistently available statewide when they are needed. A concern that was frequently voiced by stakeholder focus group participants is how to effectively and efficiently coordinate and deliver multiple services to families with multiple needs. Regarding accessibility to services, a focus group asked, "... with today's computer technology, why can't appointments be made by or for parents at their court date, when they are meeting with their caseworker or at other times when there is more potential for follow through?" Additionally, services offered and accessible during off-hours need to be increased.

Feedback from the field also included the recommendation that NYS develop and require an assessment tool that is specifically designed to assess the safety of children in foster care, including foster homes and residential care. NYS has implemented several models that are designed to increase the safety of children in foster care, including:

- As discussed previously, OCFS developed an Automated Restraint Tracking System (ARTS), a web-based system through which data about the use of physical restraints of children in foster care is collected for analysis. This project is in its infancy. However, the intent of the project is to generate data related to restraint practice in NYS that will be analyzed and shared with the field to improve, and hopefully minimize, restraint practice in voluntary agencies and OCFS facilities.
- The Sanctuary Model, discussed previously, brings a trauma-informed approach to residential care and emphasizes crisis avoidance/management and the reduction, if not elimination, of physical restraints of youth.

- Trainings, technical assistance and manuals provided by OCFS: Through the 2001 CFSR PIP, OCFS created and provided the following resources:
 - A foster parent manual and trainings designed specifically for foster parents. Topics of trainings were identified by foster parents themselves, in a survey to better address their specific needs. Some of the trainings addressed the behavioral issues of children in foster care, how to safely and effectively respond to the behaviors, and resources available to help foster parents.
 - Therapeutic Crisis Intervention (TCI) training was provided to group home staff and voluntary agency child care staff to strengthen crisis management and de-escalation techniques.
 - Trainings on single-person restraint techniques were delivered to congregate care staff to improve restraint practice and safety for children in a voluntary agency setting.
 - Institutional Abuse Prevention training and technical assistance was provided for voluntary agency executive directors and administrative staff to help them quickly and properly identify when institutional abuse has occurred and follow the appropriate steps to rectify the underlying conditions.
 - A Violence Prevention/Abuse Reduction training and technical assistance program was delivered to residential program staff, providing them information to improve the safety of the children in their care.
 - OCFS contracted for training on topics relevant to the prevention and investigation of institutional abuse to state Institutional Abuse investigation staff to better prepare them to address the safety needs of children in foster care.



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

Item 5: Foster care re-entries.

How effective is the agency in preventing multiple entries of children into foster care?

Policy Description:

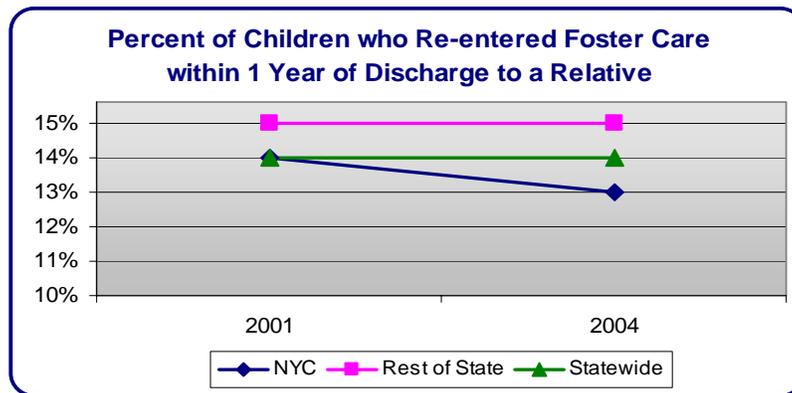
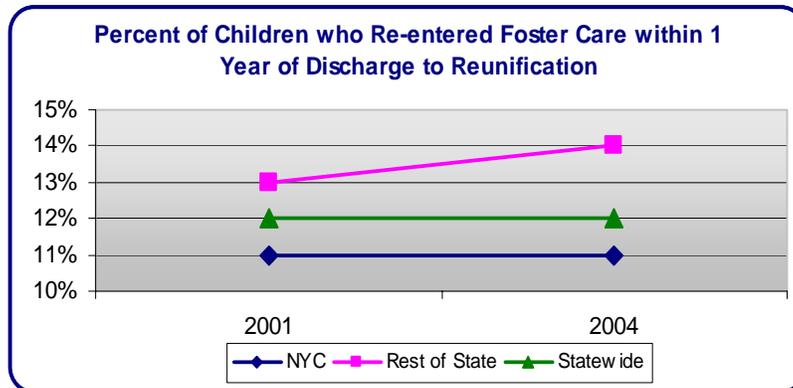
The NYS standards for re-entry into foster care are the same as those for an initial placement. Placement decisions in child protective cases are guided by the Safety Assessment and decision making protocol. Policy is clear that placement is a safety intervention only when nothing else can secure the child's safety in his or her home. Prior to placement, the local district is required to provide appropriate services to prevent the placement, except in certain situations specified in state or federal law. Policy requires the caseworker to document in the Uniform Case Record what services were offered and why placement was the only appropriate alternative. This would include the local district's required attempts to locate safe, alternative living arrangements with a relative or family friend, which would enable the child to avoid foster care.

2001 CFSR Summary:

NYS met the national standard for foster care re-entry upon resubmission of data and foster care re-entry was identified as a strength in the onsite review because re-entries did not occur or the re-entries were deemed appropriate.

Measures of Effectiveness:

The federal data measure Permanency Composite 1: Timeliness and Permanency of Reunification contains a "Permanency of Reunification" measure. For the 12-month period ending 3/31/07, 13.4% of the children who were discharged from foster care to reunification re-entered foster care in less than 12 months from the date of discharge. NYS' score of 13.4% represents a decline in performance since the federal fiscal year 2005 data report of 12.5%. However, NYS performs better than the national median of 15%.



Data Source: Fall 2007 Chapin Hall Data Packet

In the “Fall 2007 Data Packet”, prepared with data from Chapin Hall, NYS examined re-entry rates, based on initial exit type. Of the children discharged in 2004, a slightly higher percentage re-entered care within one year when they were placed with a relative, compared with children reunified with their birth family. Statewide, approximately 12% of the children discharged to reunification in 2004 re-entered care within one year of discharge. Of the children discharged to a relative in 2004, about 14% re-entered care within one year of discharge.

An analysis of the higher re-entry rate for children placed with relatives indicated that NYC’s rate of re-entry for children discharged to relatives improved between 2001 and 2004; in 2001, the re-entry rate was 14%, and in 2004, this was reduced to 13%. Statewide, re-entry rates for initial discharge to reunification and relative have remained relatively stable. Re-entry rates are slightly higher in districts outside of NYC, for both types of exits. In NYC in 2004, the re-entry rate for children initially discharged to reunification is 11%, while the re-entry rate for children initially discharged to a relative is 13%. In the rest of the state, the 2004 re-entry rate for children initially discharged to reunification is 14%, and the re-entry rate for children initially discharged to a relative is 15%. Further data analysis and case reviews are needed to determine the reasons for these differences.

Factors Affecting Performance:

Feedback from the field indicates that in order to achieve more positive permanency outcomes for children exiting to relatives, more aftercare support services need to be available to children and families. Focus groups have also identified a lack of support for relatives, guardians and

non-relative caretakers that have taken a child into their homes as an alternative to foster care placement. A factor that contributes to this perceived gap in services is the willingness of relative caregivers to become involved in services provided by the government and sometimes seen as intrusive.

The SAT Permanency Outcome Committee indicated that aftercare services provided for youth leaving residential care are insufficient. This feedback includes concerns that the funding mechanisms do not support the provision of aftercare services to be provided by residential care agencies. Additionally, some stakeholders noted that OCFS does not have formal monitoring processes for aftercare services in place.

Since July 2005, in NYC, ACS reports that \$27 million has been saved through reduced family-based and residential foster care utilization. Since that time, through reinvestment dollars for aftercare, ACS has provided agencies with additional funds that are primarily used for aftercare services for families that are considered at risk of repeat maltreatment. Agencies use the funds in creative ways, such as funding an aftercare worker, parent advocates, in-home counseling, crisis intervention, purchasing of basic household needs, and housing assistance. Other initiatives that are thought to impact re-entry in NYC include:

- **Flexible Scheduling:** As part of the 1999 RFP process, many agencies began offering more flexible scheduling of conferences such as in the evenings and on the weekends to accommodate parents who work during the week as well as older youth attending school. Participants are also phone and video conferenced in to many of the conferences.
- **Visiting best practice guidelines:** Issued in August 2006, the guidelines to agencies lays out in great detail what ACS considers to be best practices around parent/child and sibling visitations. The practices include (to name a few): immediate visit after placement, weekly visits for at least two hours, lowest possible level of supervision, family-friendly visiting space, unsupervised/weekend visits as soon as possible, etc.
- **Activities and location:** Visiting is strongly encouraged (through the RFP and other forums) to take place outside of the agency and in the community where the family can engage in fun activities.
- NYC, through **IOC**, identified a target re-entry rate of 8.6% and continues to track progress. Voluntary agencies are scored on the number of children leaving their care who re-enter within a prescribed period of time. Agencies are incentivized to reduce the number of children re-entering care as this indicator is included in the agency's overall score which affects their reimbursement rate.



Item 6: Stability of foster care placement.

How effective is the agency in providing placement stability for children in foster care (that is, minimizing placement changes for children in foster care)?

Policy Description:

The movement of a child from one foster care setting to another must be approved by the local district within specified timeframes and documented in an amendment to the service plan. Other than this, OCFS regulations do not specifically address the movement of children into different placement settings while in foster care. Good case practice dictates that children should have stable foster care placements and be moved only when absolutely necessary. This principle is reinforced in training for caseworkers and supervisors. Regulations require that children must be placed in the least restrictive and most family-like setting possible based on the child's needs.

Children must be placed with siblings or reunited with siblings within 30 days, if the siblings are separated at the time of admission into foster care, unless placement together is determined to be detrimental to the best interests of the siblings. When a child's needs change, a different placement setting may be necessary. When circumstances occur in the lives of foster families (i.e., death, illness, etc.) that are beyond anyone's control, it may require a child be moved to another foster home. Caseworkers are expected to identify potential problems during contacts with children and foster care providers and provide supportive services to prevent any unnecessary moves of children.

2001 CFSR Summary:

In the 2001 Review, NYS was unable to provide data on child movements in accordance with the national standards but used the same definition of "stability" to collect data on foster care cases in NYC and relied on data from regular assessments of upstate districts. Using this data, stability was measured at 91.6% in NYC and 82.7% upstate. NYS concluded that, based on this data, the state met the national standard for stability of placements for children in foster care. In the onsite review, 81% of the cases were identified as a strength on stability of foster care placement. Comments from the onsite review and stakeholders included: a need for improved child assessment and matching with foster parents; a need for increased recruitment of foster care resources for large sibling groups, older children, and children with special needs; and, insufficient training programs for foster care parents working with special needs children.

Measures of Effectiveness:

The federal Data Profile measure, "XII: Permanency Composite 4: Placement Stability" reveals that NYS exceeds the national standard. NYS' overall score is 108.1; the national standard is 101.5 or higher. The measures that comprise this composite, and NYS' scores are as follows.

- 90.4% of NYS' children in foster care for at least eight days but less than 12 months had two or fewer placement settings. (Nationally, the 75th percentile was 86%.)
- 72.4% of NYS' children in foster care for at least 12 months but less than 24 months had two or fewer placement settings. (Nationally, the 75th percentile was 65.4%.)
- 43.2% of NYS' children in foster care for at least 24 months had two or fewer placement settings. (Nationally, the 75th percentile was 41.8 %.)

These measures indicate substantial compliance with this federal measure.

Factors Affecting Performance:

OCFS has placed an emphasis on the importance of stability. One example, the Family Assessment and Services Plan (FASP), requires an assessment of foster parent needs and an assessment of the stability of the placement.

Initial placement often must be done quickly and the best “match” of child to foster family may not be made initially, thus leading to foster care movement. Careful considerations of a child’s needs, culture, and level of service needs, must be done as soon as possible to reduce subsequent moves.

The SAT Permanency Committee reported that stability of foster care placements are impacted when a child requires additional services (such as mental health services) that are not available; the need for a higher level of care precipitates the movement of a child from one placement setting to another. Additional foster parent training, specifically focused on de-escalating crises and dealing with mental health issues has been suggested as a potential strategy to increase foster care stability. Statewide initiatives such as B2H and the Home and Community Based Medicaid Waiver provide services that stabilize placements. Other strategies, such as foster parent respite, and other support services, have the potential to impact the retention of foster families and the capacity of foster families to appropriately care for youth with mental health issues, thereby providing stability for children in foster care.

ACS has implemented several significant systemic and practice reforms that are expected to positively impact placement stability, such as:

- Placement Disruption Conferences: The family and the ACS case manager meet before a child is transferred to another foster home or placed in a higher level of care. Under IOC, a family team conference, which includes the family and everyone involved with the family, is held and facilitated by ACS before the child moves.
- Quarterly Conferencing: In addition to disruption conferences, agencies are required as a part of IOC to conduct quarterly conferences for each child in their care. The increased frequency of conferences should focus the family, foster parents and services providers on problems that may be arising in the foster home so that the issues can be addressed before they become a crisis.
- Youth Advocacy Program: A high percentage of moves are children ages 12 and over. The Youth Advocacy Program (YAP) caseworkers provide wraparound services to these older youth to help prevent moves.
- Incentivization: Agencies are incentivized to reduce the number of moves a child experiences. Currently, since this indicator is included in the Evaluation and Quality Improvement Protocol (EQUIP) score, it affects the agency’s administrative rate. This financial incentive will continue under the new IOC funding mechanism.

ACS began implementing these initiatives in the fall of 2007 as part of Phase I of IOC and results of a comprehensive evaluation will be forthcoming.



Item 7: Permanency goal for child

How effective is the agency in determining the appropriate permanency goals for children on a timely basis when they enter foster care?

Policy Description:

Permanency planning goals must be established within 30 days of a child’s placement into foster care. NYS requires that all children in foster care have a permanency goal. The four major goals are: discharge to parents; discharge to relative, adoption, and another planned permanent living arrangement (APPLA) with a permanency resource. Regulations govern the setting of these goals, and special circumstances apply, such as for Native American children, and the universally applicable service planning, delivery, and documentation standards. At the Permanency Hearing, which must occur by the eighth month of placement for most children, a Permanency Hearing Report must be filed with the court, and the court approves or changes the permanency planning goal and documents it in the court order. Permanency planning goals are required to be reviewed at a minimum at every Service Plan Review or Judicial Review and as part of the development of each FASP that is due every six months and changed as case circumstances dictate.

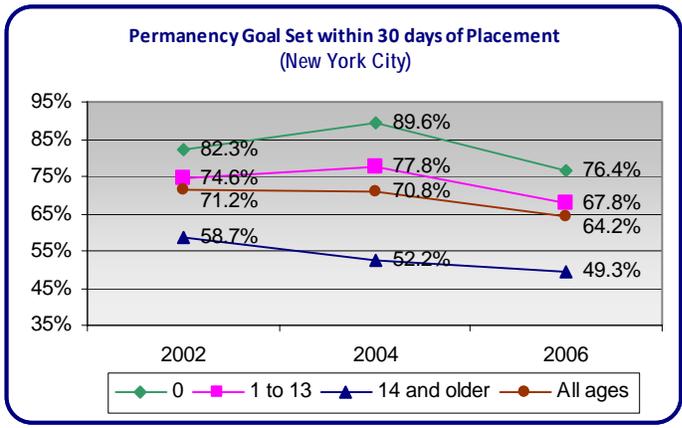
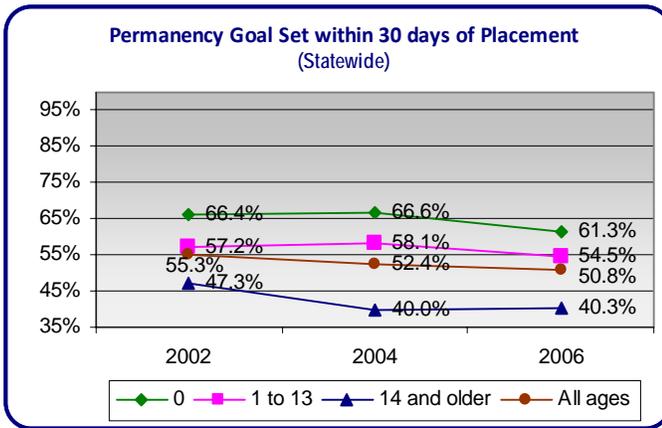
OCFS supports concurrent planning when a case assessment warrants an alternative plan to achieve permanency if there is a lack of confidence that the goal of discharge to parents cannot be safely achieved. State laws, regulations, and policy directives, as well as training for caseworkers, supervisors, and legal and judicial officials reinforce the Adoption and Safe Families Act (ASFA) timeliness standards for permanency, including timely adoption goal setting so that permanency can be achieved expeditiously.

2001 CFSR Summary:

During the 2001 CFSR, the focus of this item was the achievement of permanency with an emphasis on family reunification and adoption, while in the 2008 CFSR, reunification and adoption are addressed as separate items. In the Round 1 CFSR Final Report, this item was identified as an area needing improvement. The stakeholders and case reviewers cited a lack of concurrent planning and a need for improved coordination with judicial and legal systems to accelerate adoption goal setting and to reduce postponements and contentious litigation. Case reviewers noted positives, such as state and local initiatives to expedite termination of parental rights (TPR) and permanency, including training and case conferencing. Other areas noted as needing improvement included: how to handle permanency issues in chronic neglect cases; appropriate use and documentation of ASFA’s compelling reasons; early and continuous engagement of parents and resource persons in permanency plans; information sharing and coordination among local district caseworkers and foster care and service providers to address factors that precipitate placement and affect permanency; and, providing information to foster and prospective adoptive parents on the adoption process and post adoption services.

Measures of Effectiveness:

Statewide, the setting of permanency goals within 30 days of placement declined from 55.3% of cases in 2002 to 50.8% of cases in 2006. This includes cases in which a FASP was not yet completed within 30 days and cases with a completed FASP but no permanency planning goal recorded. Timely entry of assessment and planning information into CONNECTIONS has consistently challenged districts and agencies statewide. The case management component of CONNECTIONS was implemented in late fall of 2005, necessitating that caseworkers complete FASPs in the system. While a temporary decline in timely FASP documentation, and therefore timely entry of permanency planning goals, was to be expected as caseworkers and supervisors learned the new system, further analysis is needed to determine the reasons for the decline in timely establishment and documentation of permanency planning goals.



Data Source: CONNECTIONS

Factors Affecting Performance:

The OCFS PIP included actions designed to address permanency issues. Several trainings regarding permanency issues were provided to local districts and voluntary agencies. Through the PIP, technical assistance for implementing concurrent planning was provided to a number of local districts and a toolkit, including a video in which good concurrent planning case practice is modeled, was developed and distributed statewide. Family Engagement Specialists were hired in each region to aid in the implementation of a number of strategies including concurrent planning. This work continues today. The Family Engagement Specialists work with frontline caseworkers and supervisory staff to effectively implement the Concurrent Planning Toolkit. The work focuses on attitudes towards concurrent planning, skills needed to implement concurrent planning, and practicing concurrent planning through the use of exercises and role play. As this project is still in its infancy, OCFS has not conducted a formal evaluation of the work. However, informal feedback from the field is promising enough that OCFS plans to continue the project.

As discussed throughout this document, large caseload size and the paperwork/case documentation requirements impact the amount of time that a caseworker has available to work with families, including the establishment of the permanency planning goal. Challenges around inputting data into CONNECTIONS have been widely reported. In reviewing the data related to this item, staff at OCFS are concerned that data quality might be an issue. One hypothesis is that although the goal may have been determined within 30 days, the information may not have been entered into the CONNECTIONS system within 30 days.

Other factors, such as the ability to engage the family, impact the determination of the permanency goal. Locating absent fathers, for example, can cause delay. Fathers can either be a permanency resource themselves, or can identify extended family, who may serve as a placement resource for the child. In addition, if the case is proceeding to TPR, the identification of the father is essential to move the case along and should be completed early on in the case. Family engagement and the availability and accessibility of services, as discussed in Section IV, Systemic Factors, also impact the development of a permanency planning goal.

Permanency Hearings, although occurring later in the case planning process, affect the permanency planning goal. Permanency Hearings for most children must be held within eight months after a child is placed in foster care, and every six months thereafter. At these hearings, the court monitors the viability of the permanency planning goal. The permanency planning goal is then either accepted or changed by the court and documented in the court order. The judge may change the permanency planning goal if he or she believes that the district is taking too long to move the case toward termination, or conversely, may believe that the district has not demonstrated due diligence in attempting to support a return home.



Item 8: Reunification, guardianship, or permanent placement with relatives.

How effective is the agency in helping children in foster care return safely to their families when appropriate?

Policy Description:

Services must be provided to children and families to effect reunification, with some exceptions allowed by ASFA. State laws, regulations, policy directives, and training for caseworkers, supervisors, and legal and judicial officials reinforce the importance of efforts to reunify children safely with their families whenever possible within the ASFA timeline standards for permanency. OCFS regulations require the provision of preventive services for a child in foster care, without regard to income, when such additional services would accelerate the child's return home, and it is anticipated that such return home will occur within six months. The local district must plan for and make efforts to facilitate at least biweekly visiting between the child and the parents or caretakers to whom the child is to be discharged except in circumstances defined in regulation.

2001 CFSR Summary:

In the 2001 CFSR review, NYS did not meet the national standard on the length of time to achieve reunification. NYS' performance showed that 54.2% of children achieved reunification in less than 12 months compared to the national standard of 76.2%. The 2001 CFSR final report cited a need to improve practice focused on permanency planning in order to minimize the

lengths of stay in foster care. In 62% (23) of the onsite cases, reviewers noted that improvement was needed in achieving permanency; however, for many of these cases, the issues were adoption related. Reviewers also noted that parents and resource persons were not always engaged early or included in permanency planning, especially biological fathers, and that insufficient collaboration between local districts and contract agencies sometimes delayed timely permanency. Strengths in this regard included comments by stakeholders that there are state and local initiatives to expedite planning for foster care children and for timely achievement of discharge.

Measures of Effectiveness:

The federal CFSR measure for this item is Permanency Composite 1: Timeliness and Permanency of Reunification. The national standard is 122.6 or higher, and the NYS score is 96.3. Although NYS ranks 40 out of 47 in this permanency composite, the score has increased from 80.5 in federal fiscal year 2005 to 96.3 for the 12-month period ending 3/31/07. The data cited in the Section II data profile reported that in 2007, the median number of months to discharge to reunification was 10.9. In federal fiscal year 2005, the median number of months to reunification was 13.2. The national median is 6.5 months to achieve exits to reunification.

According to data provided in the Federal Data Profile packets, (Section II of this Statewide Assessment) a goal of reunification was the permanency plan for approximately 54% (16,498 children) of the children in foster care in NYS in early 2007, and a goal to “live with other relatives” was the permanency goal for 2.4% of children in care. Reunification as the permanency planning goal increased from 49% to 54% since federal fiscal year 2005.

Factors Affecting Performance:**Reunification:**

Although a number of issues can impact successful reunification, including the availability of community-based services which impact on the parent’s capacity to care for their children, and the capacity of the district to engage extended family and informal supports in achieving outcomes, the State recognizes that early family engagement, including visitation between children and their families, is a key strategy to support safe, timely reunification. Since the 2001 CFSR, the State has focused significant resources and efforts on strengthening family engagement in local districts and contract agencies, including hiring a Family Engagement Specialist in each of the six regions of the state to support and strengthen local practice.

Throughout NYS, agencies and local districts have developed engagement strategies designed to intensify services and engage families as soon as possible. These strategies include, but are not limited to: increased visitation in family-friendly settings, use of birth parent advocates/partners, locating and engaging birth fathers and their extended families, concurrent planning, 30 day conferences that are only held if the parent attends, and family group conferencing/family team meetings. OCFS has identified the need to engage families as directly proportionate to our capacity to achieving outcomes, because a family-developed plan is more likely to actually be implemented by the family. A family who has been traumatized by being reported for child abuse or maltreatment, or has had their children removed, should be brought to the table along with extended family to plan for achieving outcomes of safety, permanency, and well being. This

helps them overcome resistance, isolation, and fear of the system, and turns their attention to solutions which are both immediate and sustainable.

Historically, the engagement of the family involved in the child welfare system focused primarily on the birth mother. Through work done by the family engagement strategy, OCFS and University partners developed a curriculum for not only locating absent fathers but also working with fathers in the case planning process. This training curriculum is one of a kind and is being piloted in local districts across the State. (See Section I, Key Initiatives for more information.) Regional Family Engagement Specialists often utilize the training with local districts to develop caseworker and supervisor skills.

From the beginning of the placement process, foster parents can play a significant role in assisting with reunification and need supports. Feedback from stakeholders suggests additional supports are needed for foster parents and birth parents to partner to support reunification. Among the areas of strength in this regard is a specific strategy being employed city-wide in NYC, *Family to Family* conferencing. Family to Family conferencing consists of a meeting that occurs at placement between foster and birth parents in an effort to engage the biological parents in the child's life while in foster care. Foster and birth parents begin to work together and share information about the child and his or her interests, develop plans for visitation, and develop ways to maintain the family relationship.

Family Treatment Courts, Child Permanency Mediation Projects, and the Child Welfare-Substance Abuse Collocation Project provide parents with speedy access to the services that they need in order for them to make the changes that will allow reunification. (See Section I, Key Initiatives, for more information on these initiatives.)

Reunification-focused casework is difficult. It requires staff with the attitudes, skills, and experience to engage families in the difficult process of change. Districts and agencies faced with a high rate of staff turnover are less likely to have staff with those qualifications. And, the frequent re-assignment of families to new caseworkers is a barrier to family engagement and permanency progress. Working in collaboration with our University partners, OCFS is engaged in several initiatives to impact caseworker recruitment and retention:

- The NYS Social Work Education Consortium was established as a formal partnership between OCFS Bureau of Training in conjunction with the NYS Dean's Association, the social work education community, and local districts. Currently, seven regional groups are implementing programs designed to professionalize and stabilize the workforce within each region. (See Systemic Factor: Staff and Provider Training for more information.) A study of caseworker retention rates by the Social Work Consortium in NYS found that 43% of local districts had a caseworker turnover rate of more than 15% in 2005. (Twenty-two percent of NYS local districts – including NYC, had a turnover rate of more than 25%).
- The NYS Child Welfare Scholarship Program has been established. It is an education incentive program to recruit high-achieving undergraduate social work students into the field of public child welfare.

Manageable caseload size is also a factor in supporting family engagement and case practice in general. The Workload Study referenced earlier, found that caseworkers, on average, are able to spend less than one hour of face-to-face time with each family each month. Family engagement requires that caseworkers have ample time to spend with families to assess the family's service needs and jointly develop a service plan.

The family courts play a pivotal role in facilitating timely reunification. Delays associated with adjudications and dispositions contribute to the length of a child's stay in foster care. The Permanency Law has strict requirements for calendaring subsequent hearings; however, more collaborative work with family court must be done to further expedite the legal process for involved families. According to an article written by Joel Stashenko in the *New York Law Journal*, "Family Court judges in Brooklyn, where caseloads average the highest in the state at 1,300 per judge, will soon get help in managing their calendars under a pilot program the Office of Court Administration hopes will have statewide applications."⁹ Five social workers will be hired to assist judges in the assessment of cases with the intent of speeding up the court process. "The case managers will interview adults and children at the initiation of cases to determine the level of services needed by families, and coordinate the necessary paperwork and court appearances as cases progress through Family Court." The intent of this pilot is to lessen the burden on over-worked family court judges and improve the permanency process for children and families. This project is still in development so official results are not yet available; however, the court sees the pilot as very promising.

A focus group of local district directors of services raised concerns that families sometimes receive mixed messages from their attorneys and the local districts. To address this issue, NYC is piloting the use of attorneys from organizations, similar to the Legal Aid Society, to represent birth families involved in a foster care case. These attorneys are better prepared to represent families in family court, as they have received more mandatory, specialized training related to child welfare law and often work with a team that includes social workers and parent advocates. They also do not have competing priorities with other types of cases, so they are able to devote more time to the family's needs as they navigate the legal system.

Through focus groups, family court judges have cited the reluctance of caseworkers to modify the permanency planning goal of reunification for some families. In an effort to continue to support the birth parents to achieve a safe and stable living arrangement for their children, caseworkers sometimes continue to request extensions of placements beyond ASFA timeframes in hopes that the parents will achieve their goal, be it sobriety or increased mental health.

Guardianship and Placement with Relatives:

Practice related to guardianship and placement with relatives varies across the state. For example, Erie County has a specialized Kinship Placement Unit that is solely charged with diligent search and assessment of potential relative resources and the support of existing relative placements. NYC's Family Group Conferencing Model requires caseworkers to reach out and involve any relative that may be a potential resource.

⁹ Stashenko, Joel. "Pilot Plan Puts Social Workers into Brooklyn Family Court." *New York Law Journal*. 13 Feb. 2008: 1

Several focus groups identified as a strength a paradigm shift in caseworker attitudes related to relative placement. Caseworkers now recognize the importance of extended relatives and how they may contribute to faster permanency for children. Relatives are able to influence permanency for children in two distinct scenarios. First, relatives may be a resource in an initial placement. Also, relatives may become a permanent placement discharge for children not initially placed in a relative's home, but who cannot be reunited with their family. In that second scenario, relatives may be able to provide a child (or teenager) a safe and stable home upon discharge from care. However, some local districts struggle with relative placements for various reasons, including a lack of staffing resources in searching for and assessing possible relative placement resources. Additionally, clarity is needed by caseworkers as to how to best address relatives in their casework. Caseworkers need more training regarding the role of relatives in permanency planning. Local districts need more policy guidance on how to best engage relatives in both preventing removal and facilitating permanency.

SAT Permanency Committee participants identified that family court judges, attorneys, and law guardians also need more clarity and guidance on the legal role of relatives, since a child may be put in a relative home without that relative being a certified foster parent. If a relative is a certified foster parent, that relative receives a foster care stipend (like any other foster parent) and must meet the State's requirements to be approved as a foster parent, and, the placement is subject to all the regular foster care administrative requirements. As a direct custodian under Article 10, the relative/child will not receive a foster care stipend (but would be eligible for a lesser TANF payment if they applied) and need not meet the State's foster care approval standards (although they may well meet such requirements had they been pursued), but are still subject to essentially the same set of administrative requirements, thereby blurring the distinction between the two statutes.

Focus groups reported that relatives often make decisions about whether to become involved in a child's situation without being fully informed of all of their options. Since NYS does not currently have subsidized guardianship, if a child is to be placed with a relative, the relative must make the choice between kinship placement and relative foster boarding home. And, while they may be willing to commit to care for a child indefinitely, they are often reluctant to adopt the child due to family relationships, thus providing the child with a type of permanency but with a potentially lengthy time in foster care. Relatives in foster/adoptive parent focus groups noted that once a child is placed in a relative home, regardless of the type of placement, relatives often feel abandoned and do not feel they receive sufficient training and services.



Item 9: Adoption.

How effective is the agency in achieving timely adoption when that is appropriate for a child?

Policy Description:

State laws, regulations, policy directives, and training for caseworkers, supervisors, and legal and judicial officials reinforce the ASFA timeliness standards for permanency, including timely adoption goal setting so that permanency can be achieved expeditiously. Policy guidance supports concurrent planning when a case assessment indicates that there are some factors that may work against reunification but the permanency plan still remains reunification. Under such circumstances, the case planner continues to act diligently to reunite the child with the family of origin, while also exploring possible adoption resources with the family in case the diligent efforts are ultimately unsuccessful.

NYS regulations specify the maximum allowable timeframes between adoption milestones for children once their permanency planning goal has been changed to adoption. For children not legally free for adoption, an action to legally free the child must be initiated within 30 days of the establishment of the permanency planning goal of adoption. The child must be freed within 12 months after the establishment of the permanency planning goal of adoption. If the case does not meet the standard for freeing the child within 12 months, the district will be considered out of compliance with the standard unless the record shows that a petition to terminate parental rights was filed within 120 days of the date the goal of adoption was set and the delay was caused solely by the court and not by the district or agency. Children who are legally free for adoption should, with some exceptions, be placed in an adoptive home within six months after the children were freed. Children who meet the regulatory definition of “handicapped” or “hard-to-place” should be placed in an adoptive home within 12 months of being freed. For children who are legally free and in an adoptive home, but whose adoptions are not yet final, such adoptions should be finalized within 12 months after the children are placed in an adoptive home.

2001 CFSR Summary:

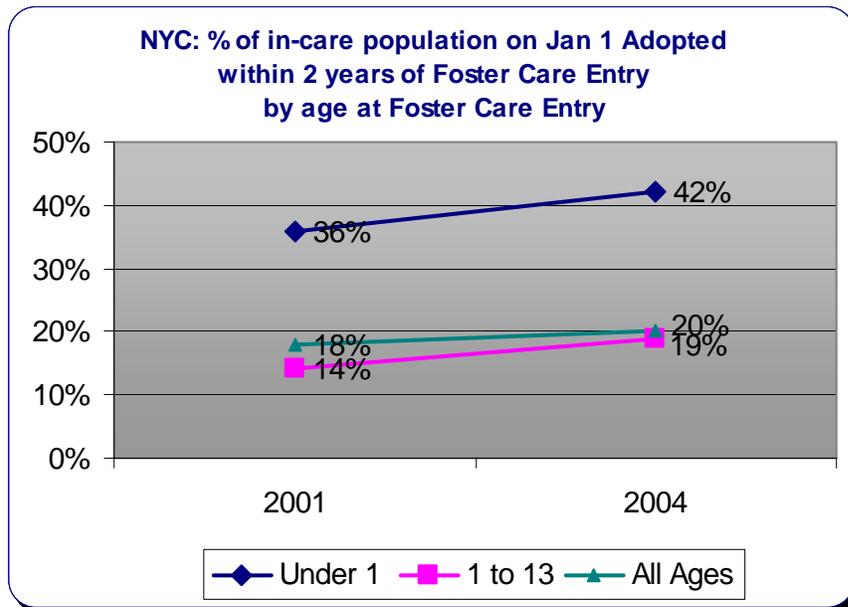
The 2001 CFSR final report found this to be an area needing improvement, stating that very few adoptions take place in NYS within two years of the child's admission to foster care. Only 3% of adoptions were achieved within that timeframe while the national standard was 32%. The report cited the need for improvements in practice, the need to review State laws that might hinder timely adoption, and that NYS laws, while ASFA compliant, did not facilitate timely adoptions. In 10 (77%) of 13 applicable cases, reviewers noted insufficient and slow adoption planning, and lack of potential adoptive resources.

Stakeholders noted that some children, foster parents, and prospective adoptive parents were not adequately prepared for the adoption process and not sufficiently informed about the process and the availability of post adoption services. In 23 (62.2%) of the 37 cases rated as needing improvement under Item 7 (permanency planning goal) and in the related stakeholder interviews, adoption concerns predominated and included: insufficient use of concurrent planning; delays in filing Termination of Parental Rights (TPR), sometimes due to heavy workloads; need for improved coordination and record sharing with family court, juvenile justice, and law

enforcement; delays caused by family court adjournments and a highly litigious environment; insufficient consideration of sibling’s case history; and, deficiencies in timely case planning and documentation.

Measures of Effectiveness:

The Federal CFSR measure for Adoption is Permanency Composite 2: Timeliness of Adoptions. The national standard is 106.4 or higher; the NYS score is 57.8 (for the 12-month period ending 3/31/07). Nationally, NYS ranks 44 out of 47 states in this permanency composite, and since the federal fiscal year 2005 measure, there has been insignificant movement in this federal composite measure. Additionally, the Federal Data Profiles recorded that the median number of months to discharge to adoption in NYS was 50 months (for the 12-month period ending 3/31/07). The national median was 32 months to achieve exits to adoption. Some progress is evident when looking at one component of Permanency Composite 2 that was present during the 2001 CFSR in New York. That component measures: of the children discharged to adoption in a given year, what percent were adopted within two years of admission to foster care. New York’s baseline performance on the 2001 CFSR was 2.9% and current performance is 10.4%.



Source: Fall 2007 Data Packet

Although as a state, New York made incremental improvement with the federal adoption measures, NYC made significant progress with their in-care population, and most notably, the population that was under the age of one when they entered care. The percentage of children under the age of one that was in care on January 1 and adopted within two years of entry increased from 36% in 2001 to 42% in 2004.

About 25% of children (7,581) in foster care for the 12-month period ending 3/31/07 had a permanency goal of adoption (according to the Federal Data Profiles found in Section II of this document). The NYS fall 2007 data packet, prepared with data from Chapin Hall, contains additional information on adoption timeliness. These data, which are based on an entry cohort approach to measuring adoption timeliness, show some improvement over the last several years.

For the children placed in foster care during 2001, only 1% were adopted within two years. For children placed in 2004, 2% were adopted in two years. The findings were similar for the in-care population at the beginning of the same two year period. For children in care on January 1, 2001, about 18% were adopted within two years. For children in care on January 1, 2004, about 20% were adopted in two years. Progress is occurring; however, improvement is not happening fast enough, as measured by both the federal measures and the supplemental entry cohort measures OCFS uses.

Factors Affecting Performance:

Barriers to timely adoption can be found at each of the adoption milestones, starting with early case planning, including concurrent planning. Caseload volume among caseworkers is cited as one of the largest barriers to concurrent planning and adoption casework. Concurrent planning means that, while the child's permanency planning goal is reunification, a concurrent plan is developed to identify potential adoption resources. The implementation of concurrent planning varies across the state. Local district Directors of Services continue to report that some counties experience barriers to concurrent planning resulting from the resistance to this practice by some family court judges, despite language that was included in the 2005 Permanency Legislation to reduce judicial resistance to concurrent planning.

Additional barriers are evident during the process of terminating parental rights. Based on work done by OCFS and the Permanent Judicial Commission on Justice for Children through the Office of Court Administration, there are multiple barriers to reaching a TPR. Some of those barriers have been referenced earlier, namely, case volume increases in local districts and family court. The sharp increase in calendared cases since the high profile child deaths in early 2006 occurring at the same time as implementation of the 2005 Permanency Law that increased the number of required Permanency Hearings, has led to a significant increase in the need for family court judges. The TPR barriers group is working to reduce barriers to timely TPRs by making recommendations for statutory, regulatory, best practices, and training for TPRs in NYS.

The strategies used for the recruitment of adoptive families also affect NYS' performance on timely adoption. Through an Adoption Opportunities Grant awarded to OCFS, the Longest Waiting Children initiative demonstrated that development of Individual Adoption Plans, especially for older children and those with special needs, is a successful recruitment strategy. In partnership with ACS and the State University of New York's Research Foundation, the project focused on, and was successful in achieving, permanency for more than 100 children who had been waiting the longest in foster care for adoptive homes. The development of Individual Adoption Plans with involvement of the youth, systematically gives consideration to adults who have been meaningful in the child's life as potential adoptive resources. Although the initiative ended with the conclusion of the grant, many districts and agencies have strengthened their individual adoption planning.

During the past several years, Adoption Heart Galleries have been held across the State. At these Heart Galleries, professional photographs and profiles of the children in the foster care system available for adoption are published in a booklet and large photos are displayed in public venues such as train stations and government buildings. The Heart Galleries have proven to be a great vehicle to spark public interest. In addition to participating in the Heart Gallery, OCFS and ACS

participate in AdoptUsKids, a national database of waiting foster children and a network providing information and technical assistance to prospective adoptive parents. OCFS and ACS also photolist children on their websites. ACS runs daily and weekly reports from its adoption website, Meet Our Kids, and the contact information of individuals accessing this website is sent to the agencies of the waiting children. Stakeholders report, however that statewide, more needs to be done to promote adoption, and that the public is not generally aware of the many benefits to adopting a child from the foster care system.

Coordination and collaboration between child welfare and the courts is essential to timely permanency for children. The partnership with the court system was significantly strengthened during the first CFSR, including the Adoption Now initiative through the leadership of Chief Judge Judith Kaye and commissioners from OCFS and ACS. From the Adoption Now Workgroup came twice yearly Adoption Panel Reviews of each legally freed child with a goal of adoption in the State. Attended by child welfare and court personnel, the Panel process identifies barriers to adoption, and strategies and timeframes for overcoming them. The Adoption Now initiative has taken additional steps to strengthen the adoption process, including:

- Development of materials to assist adoptive parents in navigating the legal system, including a 4-page pamphlet, *What to Expect From an Adoption Attorney*. It includes information on the legal relationship of adoption, filing an adoption petition, hiring an adoption attorney, paying for an attorney, signing retainer agreements, and the client's rights.
- Development of a Comprehensive Adoption Report (CAR) that caseworkers can use as a template for their adoption report to the courts. The CAR is being widely used in NYC with reported success.
- Development of an Adoption Timeline that outlines ideal adoption timeframes for six types of adoption cases.
- Production of a Freed Child Permanency Paper and video to promote best practices for moving freed children to final adoption.

Stakeholders, including the Adoption Now Workgroup members and CFSR Round 1 Adoption Strategy workgroup members, have indicated that New York must do more to further develop adoption competency in caseworkers, service providers, agencies and legal professionals. Adoption caseworkers need to master a wide range of knowledge and skills. Since the last CFSR, OCFS has developed training, *Best Practices in Achieving Adoption Through Surrender and TPR* that provides foster care and adoption staff with the abilities needed to free children for adoption. OCFS is in the process of developing a course, *Building Adoptive Families*, which will provide an opportunity for adoption staff statewide to develop a common set of skills. However, at present the amount and type of training for adoption staff is widely variable across the state.

One significant training effort developed since the first CFSR is a post-graduate Adoption Competency program available to child welfare professionals seeking to enhance their skills in working with families on adoption. It was developed in partnership between OCFS and Hunter College. This certificate program began in September of 2006 and is currently available only in NYC.

To promote provider agency accountability regarding timely adoptions, ACS gives their contract agencies an adoption goal for the year based on the number of children in their care and the number with a permanency planning goal of adoption. *Adoption Matching Conferences*, hosted by provider agencies, are held twice a month and provide an opportunity for the agency and potential adoptive families to meet face-to-face and discuss the specific waiting children.

OCFS funds several post adoption programs through TANF monies to:

- Reduce the number of pre-adoption disruptions
- Reduce the number of post-finalization dissolutions
- Reduce the need for foster care placements of children once they are adopted

Currently, 14 agencies provide TANF post-adoption services serving 18 districts; in addition to TANF, some districts contract directly for these services. When NYS received two consecutive Adoption Incentive awards in 2003 and 2004 totaling approximately \$5.5 million, all of this money was allocated to the districts that increased their adoptions in the prior year, leading to the State award. Some districts chose to use those funds to develop post adoption services but since New York has not received an award in a few years, the programs can no longer provide services.

Stakeholders in the State consistently state that there are insufficient post adoption services to support adoptive families after finalization. They state that many adoptive families find the necessary services are not available in their area or there are waiting lists. Adoptive parents have identified difficulties seeking medical and mental health services and interacting with the legal system. Stakeholders knowledgeable about adoption in New York report that when asked if they would ever adopt again through the child welfare system, adoptive parents tend to be hesitant in their response. When asked why they are hesitant, the immediate response is lack of support and services.



Item 10: Other planned permanent living arrangement.

How effective is the agency in establishing planned permanent living arrangements for children in foster care, who do not have the goal of reunification, adoption, guardianship, or permanent placement with relatives, and providing services consistent with the goal?

Policy Description:

A significant change in policy in this area has occurred in NYS since the first CFSR. As part of an enhanced focus on the permanency of adolescents, NYS now has a permanency planning goal of “Another planned permanent living arrangement with a permanency resource” (APPLA - formerly called Independent Living). Children with this goal are assisted with their transition to

self-sufficiency by connecting them to an adult permanency resource, equipping them with life skills, and upon discharge, connecting them with any needed community or specialized services. In addition, NYS policies recognize that to make a successful transition to self-sufficient adulthood, adolescents in foster care need a set of competencies and basic life skills that are supported and enhanced by connections with family or caring adults.

Life skills services (formerly Independent Living Services) and periodic assessments of a youth's progress toward the achievement of independent living skills are required for all youth in foster care 14 years or older regardless of their permanency planning goal. Life skills services are required in the areas of daily living skills, housing and community resources, money management, self care, social development, and work and study skills.

In addition to casework planning activities and life skills training, each local districts' life skills services for foster care youth must make available vocational training, including academic support services and vocational training, life skills services stipends, and aftercare services. Aftercare services are provided for former foster care youth between the ages of 18 and 21 and include financial, housing, counseling, employment, education and other appropriate support and services. Aftercare services are required for any youth over the age of 16 who is discharged to APPLA. Trial discharge is required for every youth discharged to APPLA. Custody of the youth is retained for at least six months and certain requirements for casework contacts and service provision apply. The trial discharge period may continue until a youth reaches the age of 21. If a youth loses housing during the period of trial discharge, the local districts must assist the youth to find other appropriate housing or re-place the youth in a foster care setting, if necessary. In addition, when custody ceases, the local districts must maintain supervision of the youth until the youth is 21. Supervision includes casework contacts and referral to needed services, including income and housing services, with sufficient follow-up so that the youth has begun to receive the necessary services.

Additionally, the Permanency Law of 2005 now requires Permanency Hearings be held for youth who remain in foster care after age 18.

2001 CFSR Summary:

The 2001 Statewide Assessment reported that the number of youth with a permanency planning goal of Independent Living (this was an allowable permanency goal in NYS at the time of the 2001 CFSR but no longer is) increased steadily from 1987-94 and then decreased slightly in subsequent years. Data showed that 10% of the children in care at the end of 1999 had this goal. NYS noted a variety of independent living initiatives underway to improve services for youth. In the 2001 CFSR final report, this item was rated as an "area needing improvement" with six of 11 cases rated as a strength and the remaining 5 as needing improvement. The positives were cited as appropriate case planning, service delivery to meet the youth's needs, especially a variety of independent living services, and clear documentation. Stakeholders noted that there were local initiatives to strengthen Independent Living Programs. For the cases with deficiencies, the reviewer comments included: insufficient services, premature termination of services, and discharge from foster care without a plan. Stakeholders cited: not enough transitional living or supervised independent living slots for youth; many youth leave care without adequate counseling, discharge plans and access to their case planners; youth residing in group homes

were less likely to have formalized independent living plans; and, insufficient funding prevents youth from participating in activities that support milestones in their lives, i.e. graduation activities, purchasing yearbooks or class rings.

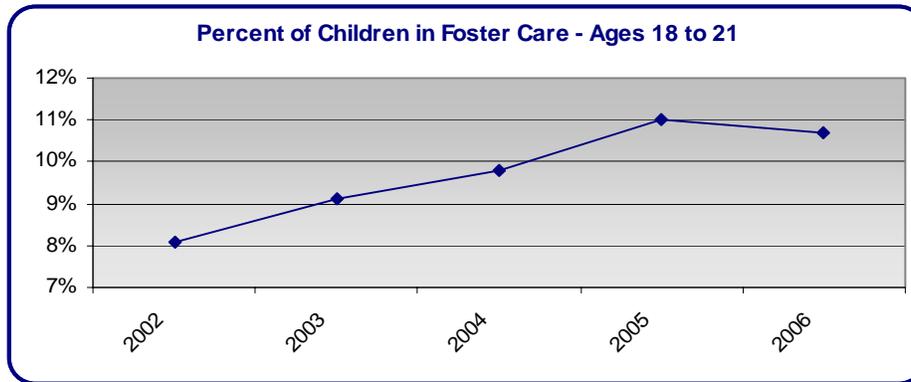
Measures of Effectiveness:

A positive trend is that there has been a decrease in the percent of youth over 14 in foster care with an APPLA goal. As the table below indicates, the percent of children in foster care with an APPLA goal decreased from about 37% of the foster care population in 2002 to about 24% in 2006. According to NYS MAPS data, children in foster care with a reunification permanency planning goal have increased 8% between 2002 and 2006.

Percentage of 14-21 Year Olds in Foster Care with APPLA Goal			
	NYC	ROS	Statewide
2002	42.1	28.2	36.9
2004	32.2	26.4	29.9
2006	25.2	22.9	24.2

Data Source: OCFS Data Warehouse

As illustrated in the graph below, of all the children in foster care on December 31st of each year, the percentage of children in care who were 18 years of age or older increased over the last several years, with a slight decrease in 2006. It is seen as positive that more older youth are staying in foster care beyond the age of 18 so they can receive services and be better prepared to live on their own at age 21 than they would have been at age 18.



Data Source: MAPS

A recent measure of effectiveness in this area is the survey OCFS conducted of older youth in foster care. Of the youth responding to the survey with a goal of APPLA, 80% indicated they had a person they identified as an adult permanency resource. About 64% of respondents with a permanency planning goal of APPLA said they have talked to their adult permanency resource more than 10 times in the last month. Of the APPLA youth that were leaving foster care within 90 days of responding to the survey, 46% felt prepared, 39% felt somewhat prepared, and 16% did not feel prepared.

The data collection on outcomes for youth who age out is of great interest to OCFS. The federal government has outlined a plan that will require states to engage in data collection on outcomes for youth ages 17, 19, and 21 years in areas such as educational attainment, employment,

homelessness, avoidance of dependency, non-marital childbirth, incarceration, and high-risk behaviors. Currently, Chafee monies can be used for this purpose but since no additional Chafee monies are available, this would mean reducing the amount of Chafee money currently available for services to youth.

Factors Affecting Performance:

Much work has been done in NYS to strengthen the permanency agenda and service provision for older youth in foster care, and more work is needed so that youth leave foster care with a permanent family or, when that is not possible, with meaningful connections to at least one adult permanency resource. A positive sign is that more youth are choosing to stay in foster care after the age of 18 and often until the age of 21. Recent research on adolescent brain development confirms what practitioners working with adolescents have long known anecdotally, that most adolescents are not ready to live independently on their 18th birthday. Add to this the effects of trauma that most adolescents in foster care have experienced and the critical importance of supports beyond the age of 18, and lifelong connections to family, are clear.

One strategy, NYC's Preparing Youth for Adulthood program, is designed to help make sure that all young people in care have a strong connection to a caring adult while in care and when they are discharged. Strategies that have informed their work include initiatives such as Families for Teens which have encouraged practice changes such as:

- Requiring concurrent planning and planning for youth with IL/APPLA goal;
- Looking beyond traditional family to any adult with whom the youth has had a connection (former resource parent, residential staff, teacher, etc.);
- Youth under 16 cannot have their permanency goal changed to APPLA without approval of the ACS Deputy Commissioner or designee, and youth 16 or older cannot have this goal change without approval of ACS case manager supervisor; and,
- Youth must be involved in planning and setting goals.

Statewide, all planned discharges to APPLA are initiated through the use of a trial discharge period. During this trial discharge, the local district retains custody of the youth for at least six months or until the youth turns 21, whichever occurs first. After the APPLA trial discharge period is complete, the local district must maintain supervision of the youth until he or she turns 21. The local district no longer maintains custody; however, supervision includes casework contacts and referrals to needed services including housing and income supports with sufficient follow up to determine if the youth has begun to receive the services. While these requirements are now in place, the reality of their implementation is an enormous challenge for local districts. Local districts' practice and ability to effectively manage these requirements in ways that benefit youth aging out vary across the state.

A focus group of youth in foster care said that despite the availability of aftercare services for former foster care youth, available services, rules and policies of local districts and voluntary agencies may not always be entirely supportive of adolescent development and growth. Specific examples include difficulty in obtaining drivers licenses and auto liability insurance.

Some service issues of importance to youth, such as the ability to get a driver's license, have yet to be resolved. Although this is more of an issue for youth outside of NYC, consistent and reliable transportation is essential for all adolescents, if they are to acquire employment or attend school or training, as mentioned by a focus group of youth in foster care. Model programs, such as the Erie County Department of Social Services *Independent Bound Program*, the *Work Appreciation for Youth Program* at Children's Village (NYC), and the *Passport to Success Program* at the DOOR (NYC) have found ways to package these services effectively for adolescents.

Stakeholders report that there are at least three critical areas of support for these young people that must be strengthened. First, there should be more emphasis on education. The Education and Training Voucher (ETV) program is a positive educational support that many foster care and former foster care youth have utilized. In conjunction with improved utilization, New York needs to improve the timing of these payments so the checks are issued in time for the start of the school year. Unfortunately, the federal funding for this program has decreased over the years because funding levels are based on each state's total foster care population. Since the ETV program began in FFY 2002-2003, OCFS has been able to fund all eligible applicants. During FFY 2006-2007, 810 youth received ETV vouchers and 33 districts participated in the program. Of the students receiving an ETV award, 165 (20%) were enrolled in a community college, 558 (69%) were enrolled in a four year college, and 87 (11%) were enrolled in a vocational training program. Funds during FFY 2006-2007 were used as follows: Tuition (22.49%), Living Expenses (16.99%), School Supplies (16.40%), Transportation (14.61%), Computers (12.96%), Loans (12.03%), Childcare (0.41%), and Healthcare (0.06%).

The second area of needed improvement for these young people is health care. Many foster care youth have significant physical and mental health needs. Youth who leave foster care at age 18 are guaranteed continued Medicaid coverage for 12 months, until the youth turns 19. However, youth who are discharged at age 19 or 20 currently have no method for Medicaid access outside of the standard Medicaid application process and eligibility rules that apply for all single adults. The Governor has recently proposed in his 2008-09 budget, continuous Medicaid eligibility for all children leaving foster care until the age of 21. This is a significant step forward, although issues of access to health care, even if eligibility were to be expanded, present barriers for youth.

A very active Adolescent Services and Outcomes workgroup, formed during NYS' PIP, continues to work on strengthening services to adolescents. On July 8, 2004, OCFS issued the *Adolescent Services and Outcome Practice Paper*, which was updated in April 2006. A product of the adolescent workgroup, the paper provides a new framework of practice for working with adolescents and preparing youth for self-sufficiency. The Adolescent Services and Outcomes Workgroup also developed an adolescent services monitoring tool that is now being utilized in local districts foster care case reviews. CONNECTIONS, NYS' case management system, now includes a life skills assessment for youth in care ages 14 and older that supports a casework focus on youths' development of life skills.

OCFS continues to seek the guidance of our youth in care through youth forums called Speakouts and the NYS youth advisory committee, YIP. The YIP team was established in August of 2003, through the development of unique partnerships between OCFS and university

training partners then known as the Independent Living Training Network and now as the Adolescent Services Resource Network (ASRN). Together, they reached out to local districts and voluntary agencies seeking foster care youth leaders, each with an adult mentor, to complete the team. Today, the YIP team is comprised of youth leaders, each with an adult mentor, from each of the six OCFS regions.

YIP representatives partnered closely with the adolescent workgroup to provide input on clothing reimbursement regulations and created an accompanying video. They have developed a number of additional training videos such as the one on dispelling stereotypes of youth in foster care. They also drafted a foster care handbook and a pamphlet on the role of a youth's law guardian. YIP has been very active in contributing to a paper on sibling visitation and informing members of the NYS Legislature about their issues. YIP was recently selected as the first state group to pilot the national Foster Club – All American Program. The adolescent workgroup continues to depend on the vital partnership with YIP to inform initiatives and practice improvement for adolescent issues.

The young people who exit foster care to the community as adolescents need and deserve the supports necessary to develop into self-sufficient and successful adults. OCFS believes that outcomes for this population can be improved.¹⁰

¹⁰ Brown, Linda C., Assistant Commissioner for Regional Operations. Testimony. Assembly Standing Committee on Children and Families and Subcommittee on Foster Care Public Hearing 14 Dec. 2007.

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

Item 11: Proximity of foster care placement.

How effective is the agency in placing foster children close to their birth parents or their own communities or counties?

Policy Description:

OCFS regulations require that, whenever possible, a child shall be placed in a foster care setting that permits the child to retain contact with the persons, groups, and institutions with which the child was involved while living with his or her parents or the discharge resource. The FASP requires caseworkers to explain decisions where continuity is not maintained. Any Native American child who is placed into foster care must be placed in accordance with state and federal regulations that reinforce family and tribal connections.

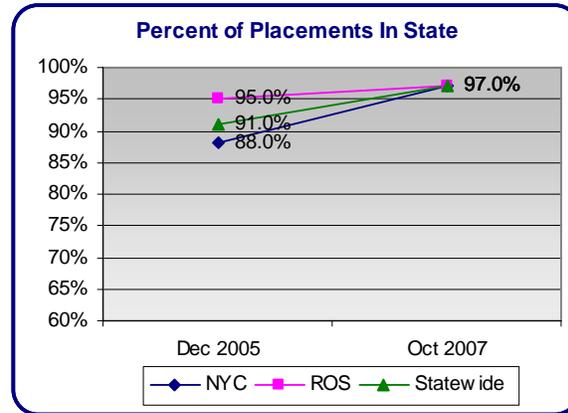
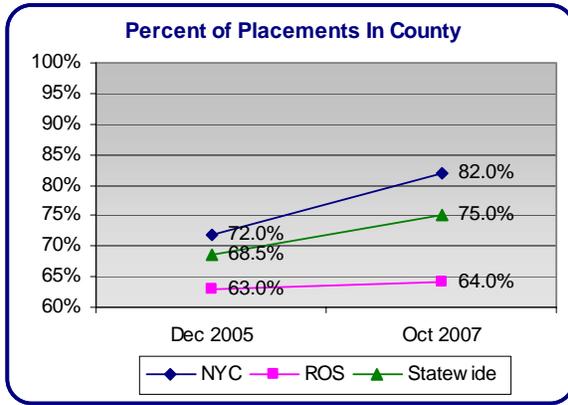
ACS's policy is to place children with suitable relatives first. The second placement priority is in community district of origin, followed by borough of origin. If there are siblings and no placement in the community of origin, the priority is for the siblings to remain together in a home that may be outside the community district or origin or borough.

2001 CFSR Summary:

In the 2001 case review, this item was rated as a strength in 34 (94.4%) of the 36 cases reviewed. The reviewers noted that efforts were made to place children within proximity of their communities and in the same school districts and, when children were placed outside of their communities, the placement was made in order to obtain services for the special needs of the children. Stakeholders, local district officials, and focus group participants reported that there are not always enough available resources, especially therapeutic foster homes, to allow agencies to place all children, especially adolescents and children with special needs, within their home community.

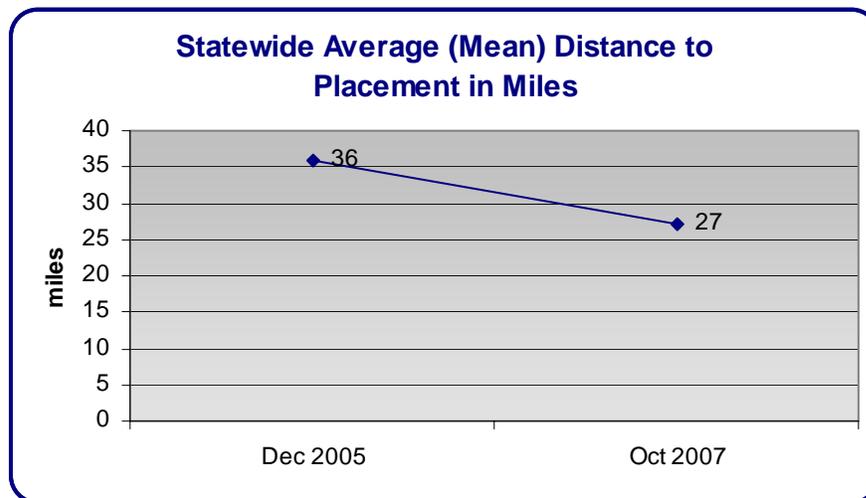
Measures of Effectiveness:

System data indicates that 97% of foster care placements were maintained within NYS. Statewide, in October 2007, 75% of the children in care were placed within their own county (up from 68.5% in December 2005).



Data Source: CCRS and GIS systems

In December 2005, 71.2% of the local social service jurisdictions had an average foster care placement distance of less than 50 miles. In October 2007, this measure improved to 89.8% (53 out of 59 NYS social service jurisdictions had an average foster care placement distance of less than 50 miles). The average distance to placements from their home communities has decreased, from a statewide average of 36 miles in December 2005, to a statewide average of 27 miles in October 2007. These findings indicate progress in the placement of children closer to their families and communities.



Data Source: CCRS and GIS systems

Factors Affecting Performance:

While the findings above indicate improvement in this area, a continuous improvement agenda is called for. Stakeholders repeated a theme from the 2001 CFSR, that there are not always enough available resources, especially therapeutic foster homes, to allow agencies to place all children, especially adolescents and children with special needs, in their home community.

One contributing cause that has been cited throughout the state is when an initial placement must be done quickly, bed availability rather than proximity is sometimes the first consideration.

Additionally, the lack of community services, specifically mental health services, provides challenges in keeping children in close proximity to their communities. The residential facilities

that offer specialized services or higher levels of care are usually located farther from the child's home community. The more specialized the needed service is, the more difficult it is to locate a residential provider in close proximity. One strategy being employed to overcome these issues in NYC is the development of additional wrap-around services provided to foster parents to help maintain the children placed in these homes. The B2H program, described previously, is also expected to positively impact specialized service provision across the state.

Stakeholders report that it is difficult to recruit foster parents from NYC's high poverty neighborhoods; resulting in placement options that are often outside the child's home neighborhood. OCFS is hopeful that the recent cost of living adjustment to foster parents will be helpful in this regard. Additionally, congregate care facilities tend to be located in the suburbs or rural areas, not in the neighborhoods where the majority of children needing foster care live.

Maintaining connections to the Tribal life is a priority for both the Seneca Nation and the St. Regis Mohawk Tribe. In all cases, as cited by the Tribes, regardless of where the family is, the agency places foster children close to birth parents, unless the family specifically requests that the child be placed on the reservation. An obstacle for placing children close to birth parents occurs when it is a case involving another state, especially if the parent was at risk of having their parental rights terminated. In this situation, the Tribe may wish to bring the child to Tribal Territory rather than be at risk of losing a child to a non-native foster family.

Despite successful efforts to diligently recruit foster and adoptive homes for children in foster care, some barriers prevent efforts from being more successful. Parents from the adoptive parent focus group said that a lack of financial resources and service supports for foster parents deters foster parents from becoming a resource for more children or from becoming adoptive parents. It also prevents them from recruiting other foster parents in their communities. There are also limited resources for agencies to recruit foster and adoptive parents.



Item 12: Placement with Siblings.

How effective is the agency in keeping brothers and sisters together in foster care?

Policy Description:

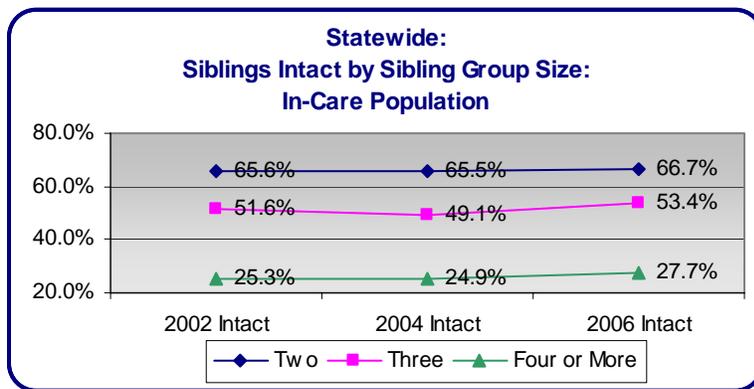
OCFS regulations require that siblings entering foster care, including half-siblings, cannot be placed separately without a documented assessment indicating why placement together would be contrary to the health, safety, or welfare of one or more of the children as determined by consultation with a professional, such as a psychologist. Factors used by the clinician in making a determination of whether siblings or half-siblings should be placed apart must include, but are not limited to: the age differences among the siblings; the health and developmental differences among the siblings; the emotional relationship of the siblings to one another; the individual service needs; the attachment of the individual siblings to separate families or locations; and the continuity of environment standards. This requirement is applicable whether or not siblings enter

foster care at the same time. If siblings must be separated on an emergency basis, they must be reunited within 30 days unless placement together is contrary to the best interests of one or more of the siblings.

2001 CFSR Summary:

In the 2001 case review, this item was rated as a strength in 22 (91.7%) of the 24 applicable cases. The case reviewers found that efforts were made to keep siblings together and place them with relatives and that when separation did occur, it was based on documented health and safety needs of some siblings. Stakeholders noted that there is a shortage of foster parents who are able to take large sibling groups and that foster parents were not always provided with the information, training, and services needed to enable sibling groups to remain together.

Measures of Effectiveness:



Data Source: CCRS

Statewide, the percentage of siblings placed together when there was a sibling group of two children remained fairly stable between 2002 and 2006, at about 66%. This percent decreased as the size of the sibling group increased. Some improvement is noted from 2002 to 2006 for sibling groups of three, and those with four or more siblings.

According to an Audit Report (Report 2007-S-10) conducted by the NYS Comptroller, “As of January 31, 2007, OCFS records indicate [that there were] 15,833 children in foster care in New York City, including 7,427 siblings.”¹¹ The report cites 3,746 (approximately 51%) siblings were placed together in foster care and 3,681 instances where siblings were not all placed together. Through a review of a random sample of documentation for 50 of the 3,681 cases, the Audit reports that in 43 cases (86%), the reasons for separation were adequately documented and were “...in accordance with the law, regulations and OCFS directives...” In four instances, the documented reasons for separation of the sibling did not meet requirements for justifying a separation. For the remaining three instances, there was no documentation showing why the siblings were separated, therefore, the Audit was unable to conclude if the separation was in accordance with requirements.

¹¹ Office of the New York State Comptroller: Division of State Government Accountability. “Office of Children and Family Services – Sibling Placement in Foster Care.” Report 2007-S-10: 4

Factors Affecting Performance:

Youth in foster care in NYS expressed their concerns, recommendations and desires in regard to sibling connections; two youth are quoted below:

“You should have at least one family member with you in the same house. It might help for you to be together.”

“Placing some of the siblings together is a start, but the agency or county should work hard to eventually place all the siblings in the same household. The situation should always be re-evaluated and reassessed.”

As the data indicate, larger sibling groups are more difficult to place together. Additional challenges arise when placing sibling groups when only some of them have been freed for adoption. Other mitigating factors to be considered are siblings that require different levels of services. According to stakeholder feedback, OCFS has heard that NYS must develop guidance around the practice issue related to the best way to serve families with large sibling groups and sibling groups that include older and significantly younger siblings.

One step OCFS has taken to begin addressing stakeholder feedback is the issuance of a white paper. Released in June 2007, this report, titled, “Keeping Siblings Connected: A White Paper on Siblings in Foster Care and Adoptive Placements in NYS,” provided a focus on sibling placement, including policy summary, benefits, issues and concerns, and practice recommendations.

The housing situation (smaller housing units) in NYC presents some specific challenges in placing large sibling groups together. One group recommended that NYS create capital dollars to convert spare rooms in foster homes to additional bedrooms. Stakeholders reported that some local districts do occasionally pay for capital improvements.

In addition to capital resources, specialized training and homemaker help to support foster families that accept larger sibling groups would be beneficial to keeping siblings together. These are necessary due to the fact that more children create more complex issues and foster families need more support.



Item 13: Visiting with parents and siblings in foster care.

How effective is the agency in planning and facilitating visitation between children in foster care and their parents and siblings placed separately in foster care?

Policy Description:

OCFS regulations require that local districts must plan for and make efforts to facilitate biweekly visiting between the child and the parents or discharge resource when the goal is to reunify unless: a court or legal agreement prohibits it; the child is in a facility operated or supervised by OMH or OMRDD; or, the placement makes biweekly visitation impossible (in such circumstances, monthly visits are generally required). The case record (Note: This is in the periodic FASP) must contain a visitation plan and visit plan review, which includes the planned frequency, the location of the visits, and any arrangements necessary to facilitate visiting.

Local districts and contract agencies are required to make diligent efforts to facilitate biweekly visitation or communication between minor siblings and half-siblings that have been placed apart in foster care unless such contact is contrary to the health, safety, or welfare of one or more of the children or geographic proximity precludes visitation. Foster parents must be informed if any child placed with them has siblings or half-siblings and if so, the location of the sibling and half-siblings.

Regulations require that for a foster child who has a permanency goal of discharge to parents or relatives, the district must plan for and make efforts to facilitate at least biweekly visiting between the child and the parents or caretakers to whom the child is to be discharged. Regulations allow this standard to be modified or waived under the following circumstances: if such visiting is specifically prohibited by court order, or by the transfer of custody agreement, or if the child is placed in a facility operated or supervised by OMH or OMRDD or because the placement that was chosen pursuant to the standards regarding appropriateness of placement makes biweekly visitation an impossibility. In the latter case, the district, at a minimum, must plan for and facilitate monthly visits between the parent and the child. At the time the service plan for discharging the child is developed, appropriate visits between the child and the family must be arranged. The efforts of the districts to facilitate at least biweekly visiting must include:

- provision of financial assistance, transportation or other assistance which is necessary to enable biweekly visiting to occur;
- follow-up with the parent or relative when scheduled visits do not occur in order to ascertain the reasons for missed visits and to make reasonable efforts to prevent similar problems in future visits; and,
- arranging for visits to occur in a location that assures the privacy, safety and comfort of the family members. In no case, except where a family court has ordered supervised visiting, will congregate visits involving members of more than one family satisfy the requirements.

Any act to limit or terminate visiting for children voluntarily placed in foster care must comply with the following requirements: parental visitation shall not be terminated or limited by a social services official having care and custody of the child, or by another authorized agency acting on the district's behalf, except by court order in a proceeding in which the parent or guardian was a party. Visitation is to continue until such a court order is obtained, except in cases of imminent danger to the child's life, health and safety. In cases of imminent danger to the child's life, health and safety, the authorized agency may terminate or limit visitation. On the same day visitation is terminated or limited, the authorized agency shall notify a designated employee of the district of

such termination or limitation. Upon termination or limitation of visitation, the authorized agency shall commence a court action or, if an action is already before the court, shall seek an order of the court as if the child had been taken into protective custody. The above requirements do not apply if the parent or guardian agrees in writing to the termination or limitation of visiting.

2001 CFSR Summary:

In the 2001 case review, this item was rated as needing improvement because of issues identified in six (18.2%) of the 33 applicable cases and stakeholder comments. Case reviewers noted: caseworker difficulties in engaging parents around visitation issues; a few instances where appropriate levels of visitation were not consistent with the goal of reunification; and some youth with goals of Independent Living were not encouraged to maintain connections and visit their family. Stakeholders expressed concerns about the quality of the visits, including whether the parent and child interactions are being evaluated and used in the case planning process.

Focus group participants during the Statewide Assessment noted: positive results from NYC's efforts to increase visitation; visitation schedules must be adapted to the family's situation; one hour visitation a week is often insufficient and the frequency and length of visitation should be increased; and visitation is not always increased prior to discharge. In 27 (81.8%) of the 33 reviewed cases, the item was rated as a strength and positive comments included: attempts were made by the contract agencies to facilitate children's visitation with parents and to ensure other opportunities for contact; supports were provided to foster parents to facilitate visits between the child, parents, and siblings; visits between children placed in residential settings, parents, and siblings are taking place, including weekend home visits; and when siblings were not placed together, foster parents facilitated contact with siblings, parents and relatives. In the 2001 CFSR, stakeholders noted that frequent telephone contact was encouraged for children whose parents were incarcerated and positive relationships between foster parent and birth parents were fostered to improve visitation.

Measures of Effectiveness:

The OCFS Safety and Permanency Assessments (SPA) instrument asks, "during the service planning period, how often did visits between the child and the discharge resource (parent or relative) occur." Of the 122 applicable cases reviewed by OCFS in 2007, the child and discharge resource visited on a bi-weekly basis in 59 cases (48%). The SPA instrument also asks if, "the agency was providing all necessary assistance to the family to facilitate bi-weekly visiting." Of the 109 applicable cases reviewed in 2007, the agency was providing all necessary assistance to facilitate bi-weekly visitation in 100 cases (92%).

Five hundred and ten foster youth with the permanency goal of reunification participated in a web-based foster care survey. Seventy-eight percent (78%) indicated that they are satisfied with their agency's efforts to help them stay connected with their parents; 70% of the respondents are somewhat or strongly satisfied with their parent visitation plan. Eighty-nine percent (89%) of these youth said that they visit with their parents at least once a month, 79% see their parents at least every two weeks, and 54% visit with the parents every week or more frequently.

Factors Affecting Performance:

Stakeholders report that successful visiting is the result of multiple parties' investment, such as foster parents partnering with birth parents, CASAs assisting with various logistical aspects, and local jurisdictions' visiting centers. However, when not all parties are invested, the quality and frequency of visits was cited as a barrier to permanency. Local districts staff report that facilitating and monitoring quality visiting is labor intensive.

Stakeholders often cite transportation as a visitation barrier. Many local districts and voluntary agencies utilize relative resources to support visitation, weekend visits, etc. In spite of this, there continues to be a need to develop and utilize community resources with supporting foster parents (in transportation, for example). Several jurisdictions have begun developing visiting centers (such as Onondaga and Queens) in more natural settings and, in some situations, merge visiting with parenting education (for hands-on application of parenting education).

During an SAT Permanency Committee meeting, Stakeholders raised questions about whether there is an over-utilization of supervised visits. Some believe that current practice is that the original visiting plan stays intact when an assessment might indicate that a less structured visiting plan could be implemented. Some states have found that visitation was more infrequent for minority children and their families, and perhaps were not encouraged as much by caseworkers. Additional research is needed to determine if there are disproportionate minority representation (DMR) issues here.

Representatives from the Seneca Nation and St. Regis Mohawk Tribes report effectiveness in planning and facilitating visitation. The Seneca Nation works with the Tribal Peacemakers Court when they order supervised visitations. When non-compliance does occur, it is when a parent/guardian did not follow the court order. Visitation plans are updated and documented. Updates are given to Peacemaker and/or multidisciplinary team. It is reinforced that successful visits are a result of team efforts.

Visiting issues for children in residential care pose their own challenges. The SAT Committee reported that, in some instances, visiting may be sometimes tied to the child's behavior; it may be seen as a benefit, a reward for good behavior. Another barrier to visiting is that during the first 30 days in residential care, the policy at some agencies is that children are not allowed to visit while they "adjust".

The 2001 PIP implementation included strategies to encourage the engagement of fathers in the lives of their children, including visiting.

Educating youth on the NYS requirements, including visiting, was a strategy of the Adolescent Services and Outcomes PIP Workgroup. This workgroup, in collaboration with YIP, developed, "The NYS Handbook for Youth in Foster Care" which states:

"When you go into foster care, your caseworker must set up a plan for visiting with your family (unless there is a court order not to have visits).

You have the right to...

- *Visit at least every other week with your family or the person you will be discharged to when you leave foster care, unless prohibited by the judge or for other reasons.*
- *Visit more often if you are going home soon.*
- *Visit in private (unless the judge and/or the local DSS says that visits must be supervised, usually for your safety).*
- *Not be punished by being kept from seeing your family.”*

Additionally, the handbook states,

“Your caseworker is required to arrange for visits with your siblings at least every 2 weeks.”

In 2006, ACS released the *Best Practice Guidelines* (2006), which stresses: “The importance of sibling visits for older children and youth in care should not be overlooked or underestimated.”



Item 14: Preserving Connections.

How effective is the agency in preserving important connections for children in foster care, such as connections to neighborhood, community, faith, family, tribe, school, and friends?

Policy Description:

OCFS regulations require that, whenever possible, a child shall be placed in a foster care setting that permits the child to retain contact with the persons, groups, and institutions with which the child was involved while living with his or her parents or the discharge resource. Any Native American child who is placed into foster care must be placed in accordance with state and federal regulations that reinforce family and tribal connections.

2001 CFSR Summary:

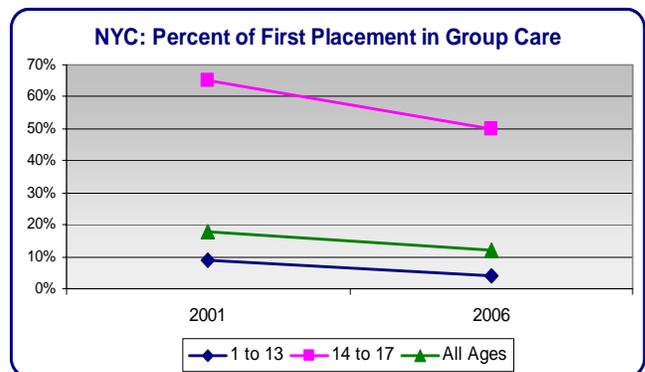
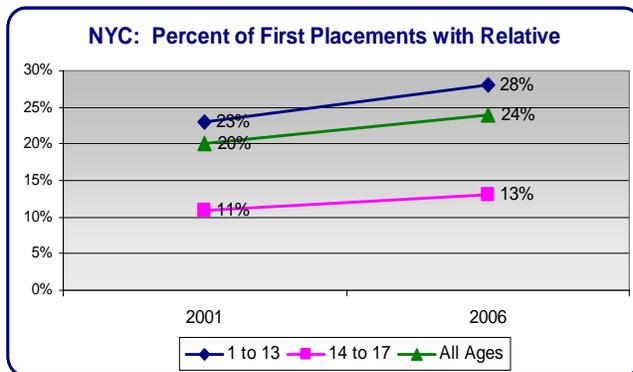
In the 2001 case review, this item was rated as a strength in 33 (89.2%) of the 37 applicable cases. The case reviewers found efforts to place siblings together in order to preserve connections and that foster parents helped facilitate children remaining connected to their families, religion, and culture. Case reviewers and stakeholders noted a need for further efforts to preserve significant relationships, such as with grandparents. Stakeholders expressed concern regarding the lack of efforts made to help youth preserve connections with significant individuals in their lives and to help youth in distant placements continue to have contact with their home communities.

Measures of Effectiveness:

The web-based foster youth survey asked youth how strongly they agreed or disagreed with a series of statements related to maintaining connections with friends, extended family members

such as grandparents, aunts, uncles cousins, and their faith tradition. The responses of “strongly agree” and “somewhat agree” are combined below:

- About 74% of respondents agreed that they are allowed to talk on the phone or through email with friends.
- About 71% of respondents agreed that they are allowed to spend time in person with friends.
- About 86% of respondents agreed that they are allowed to be involved in activities after school hours.
- 60% of respondents agreed that they are satisfied with their agency’s efforts to help them stay connected with their friends.
- 80% of respondents agreed that they are allowed to talk on the phone or through email with extended relatives.
- 81% of respondents agreed that they are allowed to spend time in person with extended relatives.
- 73% of respondents agreed that they were satisfied with their agency’s efforts to help them stay connected with their extended relatives.
- 78% of respondents said that they were able to practice their chosen faith as they wished, while an additional 10% noted that they were not sure how to answer.



Data Source: Fall 2007 Data Packet

First Placements in Group Care has dropped in NYC for all ages, and most significantly for 14-17 year olds. This is seen as a positive indicator, because most group care settings tend not to be located in the child(rens) home community or neighborhood. Conversely, NYC’s rate of first placement with relatives has gone up from 20% in 2001 to 24% in 2006. This signifies NYC’s commitment to place children in a family setting to preserve connections whenever possible.

Factors Affecting Performance:

Stakeholders reported that a child’s sense of belonging is very important and case planners need to be more intentional in their efforts to seek ways to maintain a sense of community for the child, especially when geographical proximity is not possible. In order to maintain children’s connections to their communities, some services can best be provided by the child and community’s natural supports (i.e. clergy, mentors, school staff, etc.). An effective inventory of important people in the child’s life could provide sources of such local support.

In NYS, an effort is underway to enable children and youth in foster care to benefit from the proven effectiveness of the McKinney-Vento Act. One of the main issues is determining a process where children could remain in their school of origin when placed in foster care, as this will help them maintain connections with their teachers and peers. There is a “McKinney-Vento-like” pilot process for children and youth entering foster care in NYC. The process would allow children placed in foster care to stay in their school of origin until at least completion of that school year and in some cases until moving on from that school, for example, elementary, middle or high school completion. OCFS is actively engaged with local districts, SED, OCA, and the Permanent Judicial Commission on Justice for Children in exploring strategies to provide enhanced school stability for children in foster care through the expansion of rights for children in foster care under the McKinney-Vento Act.

The American Bar Association recommended to the US Congress in August 2007 an amendment to Subtitle VII-B of the McKinney-Vento Homeless Assistance Act to clarify that the Act applies to all children and youth in foster care.

Preserving family connections is an aspect that is central to the St. Regis Mohawk Tribe and impacts its self-reported performance. The Tribe cites that the aspects of the families’ lives are central to the Tribe’s beliefs and are respected at all times. The Seneca Nation also cites that it is very effective in preserving connections for children in foster care by ensuring their children participate in their Longhouse ceremonies throughout the year. The Seneca Nation Children and Family Services staff reports that although not fluent, they know some of the basic commands and phrases and use the Seneca language when talking to their children in care.



Item 15: Relative Placement.

How effective is the agency in identifying relatives who could care for children entering foster care, and using them as placement resources when appropriate?

Policy Description:

For children being removed from their homes due to abuse or maltreatment, it is required that the caseworker attempt to locate any non-respondent parents, grandparents, and other suitable relatives identified by the parents or children who have played a significantly positive role in their lives, and inform them of the possibility of placement and the opportunity for such persons to become foster parents or direct custodians of the children. Should a relative choose to become a custodian, as opposed to a foster parent, and the family court judge agrees to the relative's preference and orders such direct custody placement, the child will not be placed in foster care (government custody), although the case will remain open as a child welfare case and there will be ongoing Permanency Hearings in the family court until a permanency plan is implemented. Such a permanency plan could include reuniting the child with her/his family of origin, long term custody/guardianship with the relative, etc. Relatives have a legal right to request the court to

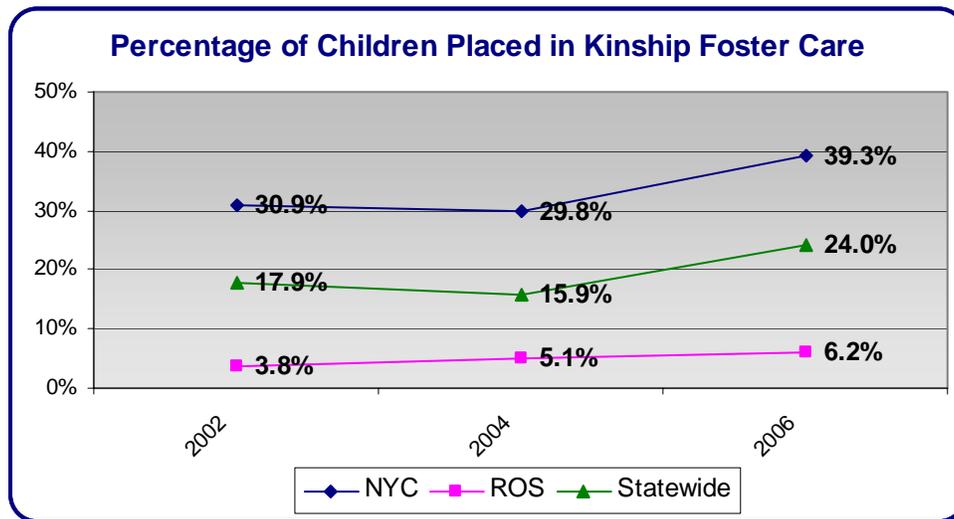
have a child placed in their home if the local district does not at first place the child with the relative.

ACS has extensive policies and guidelines on placing children initially with kin and locating kin homes after placement. Kin placement is first in the order of priorities. The guidelines describe the requirements for locating kin, assessing protective history, legal requirements, and the referral process.

2001 CFSR Summary:

In 93.8% (30 of 32) of applicable cases in the review, relative placement was rated as a strength. The reviewers found that relative placements were utilized or were evaluated for both placement and respite care. However, reviewers and stakeholders noted that fathers and paternal relatives were not regularly sought as placement resources early on in a case. In the two cases that were rated as needing improvement, it was because the relative caregivers received inadequate support services to assist them in caring for the children.

Measures of Effectiveness:



Data Source: NYS Data Warehouse

As the above chart illustrates, kinship foster care is currently being utilized more frequently in NYS, primarily in NYC. Statewide, use of kinship foster care increased to 24%, an 8.1% point increase over 2004.

This trend is especially pronounced in NYC, creating a significant geographical difference. NYC utilized kinship care on a much greater level than the rest of the state (ROS). Over 39.3% of all children placed in foster care in 2006 were placed in kinship care in NYC, whereas only 6.2% of all children placed in foster care in the ROS were placed in kinship care.

However, in the rest of the state outside NYC, direct local district placements with relatives are quite common, preventing a child’s placement in foster care altogether. In the rest of state (outside NYC), there were three times as many direct local district relative placements as Kinship Foster Care Placements in 2006. In ROS, there were only 393 kinship foster care

placements, but there were 1,268 direct local districts placements with relatives. When the direct local district placements are factored in, relative placements were 21.8% of all removals in ROS in 2006. (Data Source: CONNECTIONS and CCRS.)

In comparison, adding the 281 direct local districts placements in NYC only raises the NYC relative placement rate to 41.5% from 39.3%. Statewide, adding in the direct local districts placements raises the relative placement rate to 31.7% in 2006 from 24% in 2004.

Factors Affecting Performance:

Several potential reasons can be attributed to the increase in NYS kinship foster care, including: the caseworkers' commitment to engage families earlier in the process, the requirements to identify relatives earlier in the case, the new Grandparent Caregivers' Rights Act, and the general commitment to relative placements.

New York amended its regulations to allow for emergency certification for an adult with a positive connection to a child, beyond the longstanding emergency approval process for relatives. The regulations now permit emergency certification for such persons as a godparent, teacher or family friend.¹²

Although kinship foster care usage is up statewide in NYS, barriers to relative placements continue to impact the usage of this resource. Families themselves may be resistant to the involvement of the child welfare system in their lives and the regulations that accompany a relative foster care placement. Some groups have indicated that the process of becoming a foster parent is intimidating. In 2006, OCFS created the NYS Kinship Caregiver Program to assist persons caring for related children (additional information is in Section I, Key Initiatives). A statewide network of programs support kinship placements and promote household stability and permanency for those families. The *Kinship Navigator Program* (www.nysnavigator.org) consists of an interactive website that utilizes mapping that allows the user to click on a caregiver's county for a current list of resources.

Local districts and voluntary agencies face their own challenges to relative placements. Confusion exists about the differences between non-foster kinship care and kinship foster care. There are advantages and disadvantages for a relative to be assigned direct custody of their abused or maltreated kin. A major disadvantage is that the relative would not receive foster care payments on behalf of their kin, although they would be eligible for lesser TANF payments on behalf of their kin. A possible advantage is that the relative would typically have more authority/discretion in relation to their kin when they have direct custody, notwithstanding that the family would still be subject to family court Permanency Hearings, as well as any orders of the court.

In the fall of 2007, the Statewide Permanency Planning Team created a Kinship Subcommittee to analyze barriers to kinship care and consider strategies to improve the use of kinship care in NYS. This interagency workgroup is comprised of representatives from OCFS, OCA, the

¹² Hurley, Kendra. "Preserving Family Ties." Center for New York City Affairs: The New School Center for an Urban Future. *Child Welfare Watch - Against the Clock: The Struggle to Move Kids into Permanent Homes*. 15 (Winter 2008): 8.

Permanent Judicial Commission on Justice for Children, Legal Aid, Center for Family Representation, and local districts.



Item 16: Relationship of child in care with parents.

How effective is the agency in promoting or helping to maintain the parent-child relationship for children in foster care, when it is appropriate to do so?

Policy Description:

The policy for this item is subsumed under items 13, 14, and 17 (visitation; preserving connections; and, needs and services of child, parents, and foster parents).

2001 CFSR Summary:

This item was rated as an area needing improvement in the 2001 CFSR. In the 2001 Statewide Assessment, focus groups with birth parents indicated a need for: increased respect for and partnership with parents; stability in caseworker assigned (less turnover, especially Upstate), with one caseworker for the life of the case; and the need for more staff as caseworkers are overburdened. Local district and voluntary agency directors emphasized the importance of early and planned structured visitation, a strength-based approach, and engagement of parents. In 24 (85.7%) of the 28 applicable cases, this item was rated as a strength based on efforts to ensure frequent visitation between parents and children as a means to enhance their relationship and evidence of supportive programs provided by residential facilities to foster the relationship between parent and child. Stakeholders indicated that including relatives in the planning process and providing assistance with transportation has enhanced visitation and strengthened relationships between children and their parents. For the four (4) cases with deficiencies in this item, problems included a lack of agency effort, a lack of family centered strategies especially with difficult parents, and instances of not informing parents of a child’s medical or educational status. Stakeholders also noted a lack of information shared with parents and indicated a need to help adolescents and their parents re-establish relationships and maintain developmentally appropriate relationships.

Measures of Effectiveness:

NYS periodically hosts “Youth Speakout Sessions”. Held June – October 2007, Youth Speakouts involved over 650 young people involved in foster care. The comments below effectively capture the mixed experiences that youth in NYS foster care experience.

- Having visits with incarcerated parents is important.
- I am never allowed to talk with my mother when I need to.
- My parent is in jail and the agency won’t take me to see my parent even though there is a court order.

- My parents' rights were terminated when I was 14. It hurts me that my brothers don't know and have a relationship with my mother.
- I found a caseworker that goes to extra lengths to ensure I get to see my family.
- Foster parents don't want to always transport me to see my family, especially on holidays, so I don't get to see my family as much as I should be able to.
- My agency has vehicles and does a good job at getting youth home for visits.

Factors Affecting Performance:

Several initiatives have been cited as successfully impacting the relationship of the child in care with parents:

- Utilizing birth parents as parent mentors and hired as parent consultants in voluntary agencies.
- CASA report that they are an important component in reducing barriers to facilitating relationships (i.e., transportation and other supports) in some counties.
- In NYC, the Children of Incarcerated Parents Program facilitates visiting between children and their parents in prison.
- An ACS Parent to Parent model is being piloted to reduce the trauma experienced by the child due to placement in out of home care. For example, a meeting, designed to occur between birth and foster parents within 72 hours of placement, supports the development and maintenance of a positive relationship between the birth parent and the foster parent so that the child will be able to observe and feel the support of both sets of parents while in foster family care. During this meeting, birth parents share important information about the child's habits; likes and dislikes; friendships and school life; thus helping to create continuity of care.

The SAT Committee that was charged with evaluating Permanency Outcome 2 reported the following overall strengths related to the continuity of family relationships and preservation of connections for children:

- The practice of placement in the "least restrictive" environment is firmly imbedded in NYS practice.
- Particularly with younger children, placements with foster parents and relatives are generally located in close proximity to parents.
- Several local districts and agencies have developed family friendly visitation programs and centers.
- NYS, through the previous PIP process has developed toolkits for locating fathers, supports for staff to develop their skills in areas of family engagement and other initiatives that have positively impacted practice throughout NYS.

Additionally, stakeholders identified several improvement opportunities for NYS to preserve the continuity and connections of children in care to their families.

- There continues to be a need to improve the use of family-driven service planning.

- NYS needs to offer the same supports to relatives with direct custody as are provided to foster families. There seems to be an inconsistent practice regarding support to foster parents vs. relatives.
- Improvements are needed in strengthening the re-assessment process and tools in regards to re-uniting siblings. Reassessments in this area need to occur sooner.
- Transitions are a difficult time for children entering and exiting placement. Better planning is needed to assist the children in bringing the skills and relationships that they learned while in care with them when they come out of placement. Such relationship skills help maintain the parent-child relationship post placement.
- There is a need for visitation to have a greater focus on coaching and learning rather than monitoring. Visiting should take a strength-based approach and offer parenting skills and other skills necessary to maintain relationships. Visiting practices should be supportive and family-driven.



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

Item 17: Needs and services of child, parents, foster parents.

How effective is the agency in assessing the needs of children, parents, and foster parents, and in providing needed services to children in foster care, to their parents and foster parents, and to children and families receiving in-home services?

Policy Description:

OCFS regulations require local districts to provide, arrange for, and coordinate rehabilitative and foster care services, as appropriate, to the child and family to protect the child, prevent future maltreatment, promote the child's well-being, and stabilize family life. The required electronic uniform case record, with its safety, risk, parent and child needs, and strengths assessments, provides the basis for assessing child and family needs and documents the goals, tasks, and services that the case planner will coordinate to achieve the child's permanency goal. OCFS regulations describe the array of preventive services that local social services districts may use to prevent placement or use during placement to accelerate the child's return home. The services must be provided without regard to income. Each local district must provide, either directly or by purchase of service, the following seven "core services": day care; homemaker services; parent training or parent aide services; transportation; clinical services; respite care and services for families to relieve stress when a family member (parent, child, legal guardian, or caretaker) has an HIV-related illness; and, 24 hour access to emergency services, including cash or the equivalent in services, or goods, or shelter. NYS also provides housing subsidies for up to three years to prevent placement in, or enable discharge of children from foster care. Regulations require in home conferences with the foster parents at least monthly or whenever necessary to provide services that are responsive to issues and to protect the child's best interests. Monthly casework contacts are required with the foster parents to facilitate the caretaker's role in achieving the service plan.

2001 CFSR Summary:

While this item was identified as an area needing improvement, NYS was also recognized for its many special programs and initiatives to meet the needs of children, parents, and foster parents. Such programs included: the Preventive Housing Services Program; Intensive Case Management; Home Visiting; Coordinated Children's Services Initiative (CCSI); Multi Systemic Therapy; Respite Services; Family Preservation Centers; Advantage After School Programs; and Crisis Nurseries. The 2001 Statewide Assessment documented that more parents were receiving the three most needed services, parenting skills training, drug treatment, and housing assistance in 2000 than in 1997 and that the most common barrier to service provision was parents' lack of cooperation. The focus groups indicated a need for more and better coordinated services, for fewer turnovers in caseworkers, and for caseworkers who are familiar with and can arrange for appropriate services. The 2001 case review found this item was rated as a strength in 39 (78%) of the 50 cases, that case plans were in the records, and that placement decisions were made on the

basis of information provided in the assessment. To support the “areas needing improvement” rating, the case review and stakeholder interviews identified the following: delays in or not initiating services for identified needs; service plans were not outcome based and measurable; conflicting recommendations based on evaluations; lack of a family-centered approach and use of historical case information; need for more mental health providers; and the need to have some incentives for foster parents and biological parents to work together.

Measures of Effectiveness:

The SPA instrument asks if:

“the case record indicates that the parents/discharge resource (not foster/adoptive parents) are being provided with the services necessary to achieve permanency for the child.” Of the 142 applicable cases reviewed in 2007, the parents were provided with the necessary services in 112 cases (79%).

“the case record indicates that the foster parents are being provided with the services necessary to achieve stability and permanency for the child.” Of the 142 applicable cases reviewed in 2007, foster parents were provided with the necessary services in 122 cases (86%).

“the case record indicates that the child is being provided with the services necessary to achieve permanency.” Of the 194 applicable cases reviewed in 2007, the child was provided with the necessary services in 180 cases (93%).

More than three-quarters of the youth in foster care survey respondents reported their medical, dental, mental health, and school needs were being properly met. More than three quarters also reported that they had received helpful information on sex education and pregnancy prevention and that they had gained skills in how to get along well with people.

Of foster youth aged 17 to 21 who answered the survey, about two-thirds reported that their school needs were being properly met, had received help in planning for college or vocational school, and had received help in career planning and/or finding a job.

Factors Affecting Performance:

Birth, foster and adoptive parents alike identify the need for accurate and complete information on system process and procedures. A focus group of foster and adoptive parents mentioned that birth and foster parents often do not have access to important information related to their case. They may not be aware of all of their rights affecting their ability to advocate for themselves. In 2004, OCFS in conjunction with Center for Development of Human Services (CDHS) conducted a survey of active and former foster parents to assess training and supports. Both active and former foster parents were asked if a child had ever been removed from their home, and if so, what could have helped them keep the child in their home. Of the active foster parents that had a child removed from their home, 52% said more information upfront about child’s needs and behaviors and 43% said more intensive treatment for the child would have been helpful. Of the former foster parents that had a child removed from their home, 54% said more information up front about the child’s needs and behaviors and 59% said more practical advice from the agency. To help address this issue, OCFS asks that local districts distribute a foster parent manual to

every foster parent that completes the Model Approach to Partnerships in Parenting (MAPP) training; however, as identified in a recent foster and adoptive parent focus groups, lack of sufficient follow up and ongoing training seems to be a barrier to fully understanding all pertinent information.

The 2004 CDHS survey also asked foster parents to identify additional services needs. When inactive foster parents were asked why they voluntarily closed their foster homes, 38% said it was because they were adopting one of their foster children; however, about 17% asked for their home to be closed because they were dissatisfied with their supporting agency. Foster parents identified the following as service areas needing improvement: referrals to appropriate services, transportation assistance, counseling services for both foster parents and foster children, timely evaluations for service needs and the child's full case history. Focus groups of foster parents also cited that more in-home, community based services, such as respite, would be helpful.

Caseworker turnover and high caseload size often negatively impact a caseworker's ability to accurately and consistently assess the needs of children, parents and foster parents. One birth parent said she had worked with more than 30 caseworkers in the 10 years that her children have been in care. However, as affirmed by a birth parent focus group, child welfare staff are generally committed to serving children and families, despite these challenges.

NYS has demonstrated a commitment to the service of families through open-ended 65% state/35% local funding for preventive services. Primarily due to the inability to provide the 35% local match, utilization of these funds varies across the State, creating a variation of the availability of services to children, their parents, and their foster parents.

Several promising initiatives are being piloted or developed statewide. Initiatives such as B2H, and the Child Welfare-Substance Abuse Collocation and CPS/DV Collocation projects are designed to assess needs and facilitate the provision of services to children, birth parents, and foster parents. These initiatives are previously described.



Item 18: Child and family involvement in case planning.

How effective is the agency in involving parents and children in the case planning process?

Policy Description:

OCFS regulations require local districts to include a child's parents, guardians, and children over 10, if appropriate, as participants in the development of the Family and Child's Service Plan (FASP). The service plan includes the permanency planning goal; all assessments; and the goals, outcomes, and activities that will lead to enhanced functioning, reduction of risk, and the

achievement of permanency. The FASP has a section to complete regarding this involvement and an output may be produced allowing the parents and children over 10 years of age to sign.

Local districts must make efforts to include both the child (over the age of 10) and the child's parents or guardians at the service plan reviews (SPRs). The reviews must occur at 60 days from removal or placement in foster care and at least every six months thereafter. These conferences review progress made toward achieving goals and outcomes, past participation of family members, and any problems in service provision. Agreement should be sought on any change to the plan, on the tasks and activities to take place during the upcoming service plan period, and on the anticipated completion dates for goals. Two weeks in advance of the conference, local districts must give written notice of it to the parents, guardians, and other relevant parties. In the event that the parents or guardians are unable to attend the case conference, every effort must be made to conduct a face-to-face meeting within the next 30 days to outline the goals, outcomes, upcoming tasks and activities, and timeframes. When efforts to make face-to-face contacts are not successful, written notification of the service plan is required.

A case consultation must also be held for each foster child for whom a Permanency Hearing Report must be completed. The purpose of the consultation is to seek input for the report in preparation for each Permanency Hearing. The case consultation activity must be documented in the progress notes and the decisions and outcomes must be incorporated into the Permanency Hearing Report. The case consultation must be conducted no earlier than 60 days prior to the date certain of the Permanency Hearing and must be completed with sufficient time to finalize and submit the Permanency Hearing report at least 14 days before the date certain for the Permanency Hearing. Participants in the case consultation must include: the case planner and/or the child's caseworker; the child's parent(s), unless the parent has had his or her parental rights to the child terminated or unless it can be documented that one or both of them are unwilling or unable to attend; each child age 10 or over, unless it can be documented that the child is unwilling to attend, or it can be demonstrated that such attendance would not be in the child's best interests; and the child's foster parent, if the child is in placement in a foster boarding home, or the child's pre-adoptive parent, if the child is in such placement.

OCFS has promulgated guidance to the local districts on the need for, and methods of, locating absent parents, especially fathers, of children in foster care so that the child's permanency and well-being can be achieved more effectively and efficiently.

2001 CFSR Summary:

The 2001 case review found that this was an area needing improvement. In the 2001 Statewide Assessment, OCFS identified corrective action needed to improve parental participation in case plans based on the results of case reviews. Upstate case reviews found that: required written notice was provided to 57% of birth mothers and 49% of birth fathers; 61% of service plan reviews were attended by birth mothers, 30% by birth fathers, and 74% by children over 10. In NYC foster care cases, 68% had some documentation that the parent and child participated in the development of the plan or that efforts were made to involve them. Parents attended less than one-third (30%) of service plan reviews but NYC's data showed this rate increased to 38% as of July 2000. During 2000, NYC initiated Child Safety Conferences and, of the 3,068 Child Safety Conferences conducted that year, parents attended 72% of the time. In the 2001 case review, this

item was rated as a strength in 43 (87.8%) of 49 cases. The review found that parents in in-home cases and children over 10 were actively engaged in service planning, while in foster care cases, the parents were not as actively engaged. It also identified that challenged parents, especially those with cognitive disabilities, are not effectively engaged and that there was insufficient involvement of some prospective adoptive parents in case planning activities. The stakeholders identified lack of appropriate concurrent planning.

Measures of Effectiveness:

The SPA instrument asks if the case record documents that, “the agency actively involved the parent(s) or guardian and/or the child (if age appropriate) in the case planning activities relevant to the current plan.” Of the 190 applicable cases reviewed in 2007, agencies involved parent(s) or guardian and/or the child (if age appropriate) in 171 cases (90%).

Sixty-five percent (65%) of the foster care youth survey respondents reported that they attended their most recent service plan review meeting, 13% were invited but unable to attend, and 22% said they were not invited.

Foster care youth survey respondents indicated that the service plan is, in part, driven by their participation. Through the survey, 79% of the respondents reported that they were either somewhat (45%) or quite involved (34%) in making their most recent service plan. Sixty-three percent of the youth respondents (844 youth) indicated that they had a disagreement with the service plan as originally proposed. Of these, 51% said the plan was changed to their satisfaction.

While a majority agreed with and signed their service plan, more than a quarter said they did not receive a copy.

- 60% agreed with and signed their most recent service plan.
- 13% did not agree with their most recent service plan (64% of these youth signed the service plan anyway; 36% did not sign it).
- 27% of respondents said they did not receive a copy of their most recent service plan.

Factors Affecting Performance:

The Adolescent Strategy Workgroup, Citizen Review Panels, and local probation representatives all noted a paradigm shift in agency and caseworker attitudes regarding the involvement of children and families in case planning. Some districts are making a concerted effort to best accommodate birth parents’ work schedules. Many districts have SPR’s after normal business hours and on weekends to better accommodate working parents’ schedules. Some districts that are vastly rural have alternate sites throughout the district, so birth parents won’t have to spend several hours in travel.

Based on the results of the foster care youth survey and stakeholder feedback, NYS is doing a better job of involving youth in case planning to best assess their needs for services. A focus group of probation representatives said that by encouraging active participation from youth and beginning to develop cross-system service collaborations, youth receive more accurate assessments and therefore, more appropriate services. However, caseworkers can still benefit

from specialized training in adolescent development to help them more effectively engage adolescents, resulting in a more accurate needs assessment.

The Adolescent Strategy Workgroup, Citizen Review Panels, probations officers, and CASA directors all agree that actively involving youth in case planning usually has better results, as many youth have the opportunity to express their own needs and become invested in the planning process. The Child Development Guide, used in the Common Core training for caseworkers, helps reinforce for caseworkers this innate need of youth to develop and express a sense of self as a normal stage of adolescent development.

Through the IOC Initiative, NYC developed a new system of family conferencing, to further involve parents in service plan development. Rather than waiting until regularly scheduled SPR's, caseworkers have more frequent conferences with families, as necessary, to focus on any pertinent issues that may come up. If caseworkers can foresee that a child is going to be placed in care, they will have a pre-placement conference with the biological parents to make them aware of what is going on and also allow the parents to bring in any supports. NYC also has a conference with both biological parents and foster parents 72 hours after a child has been placed. This conference allows the biological parents and foster parents to share information about the child and also engage in joint planning.

A focus group of CASA directors and managers stressed the importance of child centered, family focused practice. While they report an improvement in the attendance of parents at SPR's, anecdotally, families are still not feeling engaged in "family driven case planning." Parent advocates have been a great help to birth parents trying to navigate the system; however, they are underutilized or unavailable in most parts of the State. The CASA directors said OCFS needs to do a better job of reaching out to parents and finding out if *they* feel they are engaged in the process, and if not, what the agency can do to better engage them, regardless of whether they receive in-home services or if their children are in foster care.

Through the Foster Care Youth survey, youth were asked about their perception of their involvement in case planning. About two-thirds of respondents attended their most recent service plan review, and about 79% felt they were either somewhat or quite involved in the development of their most recent service plan. This youth satisfaction reflects the diligent efforts of the Adolescent Services Strategy Workgroup to improve case practice for adolescents in foster care, including the active involvement of youth in case planning.

The "Handbook for Youth in Foster Care" developed by OCFS provides adolescents in foster care with information such as: what is foster care, seeing your family, legal issues, everyday life, working, chores, and planning for your future. This manual includes information about SPRs, the purpose of an SPR, and the young person's expectation for involvement.

While NYS has made strides in improvement, it is clear that more work must be done to *actively* involve children and parents in case planning.



Item 19: Caseworker visits with child.

How effective are agency workers in conducting face-to-face visits as often as needed with children in foster care and those who receive services in their own homes?

Policy Description:

NYS has different casework contact requirements for protective, preventive, and foster care cases. There must be at least 12 casework contacts with a child and/or family in receipt of preventive services within each six-month period. At least six of the 12 casework contacts must be made by the case planner and two of these contacts must take place in the child's home. In cases in which the child protective caseworker is the primary service provider, this caseworker must make at least two separate face-to-face contacts per month with the subjects and other persons named in the report and at least one must take place in the subject's home. For foster care cases, casework contacts must occur whenever a case planner determines they will best serve the child or family. NYS Regulations require that caseworkers make face-to-face contact twice during the first 30 days of placement and once a month thereafter, as a minimum. The regulation states:

Casework contacts with the child is defined as individual or group face-to-face contacts between the case planner, or the caseworker assigned to the child, as directed by the case planner, or the case manager, and the child. The purpose of the contacts is to assess the child's current safety and well being, to evaluate or re-evaluate the child's permanency needs and permanency goal, and to guide the child towards a course of action aimed at resolving problems of a social, emotional or developmental nature that are contributing towards the reason(s) why such child is in foster care.

During the first 30 days of placement, casework contacts are to be held with the child as often as is necessary to implement the services tasks in the family and children's services plan but must occur at least twice. At least one of the two contacts must be held at the child's placement location. The focus of the initial contacts with the child must include, but need not be limited to, determining the child's reaction to the separation and his/her adjustment to the out-of-home placement and arranging for services necessary to meet his/her needs. After the first 30 days of placement, casework contacts are to be held with the child at a minimum of once a month. At least two of the monthly contacts every 90 days must be at the child's placement location. If the youth is age 18 or older and is attending an educational or vocational program 50 miles or more outside the local social services district, the casework contacts may be made by telephone or mail.

2001 CFSR Summary:

The 2001 case review found this item to be a strength in 98% of the cases. The 2001 Statewide Assessment cited findings from case reviews held in NYC in 2000 as follows: 71% of children placed in foster care were seen twice in the first month and 82% of cases met the requirement for child contact over the review period; 59% of preventive families met the contact standard; and, only 19% of the on-going protective cases met the higher bi-weekly case contact requirement. Reviews in upstate counties found that the quarterly contact standard was met in 76% of the

foster care cases and the monthly contact standard was met in 74% of the cases. NYC and upstate counties undertook corrective action to improve the level of contact. The 2001 federal review noted that case contacts with children and parents occurred frequently enough to monitor and promote the safety and well-being of children. The review also found that the caseworkers remained responsive and accessible to the children in closed cases. (Note: Caseworker contacts with foster children regulations have been revised since the 2001 CFSR.)

Measures of Effectiveness:

There is significant variation in the results reported through different sources of data that are used to measure monthly casework contacts with children in foster care. The SPA case reviews indicated that in 2007, 63% of the cases reviewed demonstrated monthly face-to-face caseworker visits with children in care. This represents a decline in performance from 77% demonstrated in the 2005 reviews. On the other hand, the data entered into CONNECTIONS by caseworkers indicate that only about half of the children in foster care had a visit with a caseworker at least once a month, as regulations require. There is good reason to believe that all caseworkers are not using the appropriate progress note values to document casework contacts. OCFS is working with local districts and agencies to improve the CONNECTIONS data entry quality in this regard. Given the data discrepancies, this area requires further measurement during the on-site review.

PROGRAM	Casework Contacts with Child (done/required)		
	2003	2004	2005
Agency Operated Boarding Home (AOBH)	100%	100%	100%
Foster Boarding Home (FBH)	93%	94%	96%
Group Home/Group Residence (GH/GR)	98%	99%	99%
Residential Treatment Center (RTC)	98%	98%	99%
Supervised Independent Living Program (SILP)	99%	98%	98%
Average	98%	98%	98%

Data Source: ACS' PES System

Results of ACS' monitoring system, Program Evaluation System (PES), are charted above. PES scores agencies on a variety of tasks and provides a score according to type of program (agency operated boarding home, foster boarding home, group home/residence, residential treatment center and supervised independent living program).

PES tracks the percentage of completed required contacts (not necessarily face-to-face) between caseworker and child. The average percentage of completed required contacts has remained constant at an impressive 98%.

Through the on-line foster care youth survey, about 75% of youth that responded that they have seen their caseworker in the last 30 days; additionally, 82% said that they got along well with this caseworker. However, only 65% of respondents somewhat or strongly agreed that their

caseworker meets with them often enough. This indicates that a significant portion of youth in care feel they could benefit from more face-to-face interaction with their caseworker.

Factors Affecting Performance:

Caseworkers often have difficulty juggling all of their responsibilities, including both direct work with the family members and administrative requirements such as case record documentation, especially if they have a high caseload. Local districts foster care supervisors and focus group members, said that caseworkers see the value of face-to-face contact and would very much like to make more face-to-face contacts with youth, but significant barriers prevent them from making more in-person contact. Several focus groups noted that large caseloads could contribute to a caseworker’s inability to make appropriate contacts. According to the NYS Child Welfare Workload Study, “On average, across programs, caseworkers reported spending 10 hours during the two-week period in face-to-face contact with children, families, or both. This constitutes 16.9% of the child welfare case-related time expended.” Potentially, this could translate to, on average, less than one hour of face-to-face contact with each family each month. While there are multiple barriers contributing to these time constraints, local district supervisors cited that caseworkers spend too much time waiting in court and could better use that time visiting with children. Through the Permanency Law, work is being done with the courts to improve the calendaring of Permanency Hearings so less time is spent by caseworkers, families and others waiting outside the court room.

Caseworkers have also made efforts to better coordinate their own schedules so they spend less time in travel and more time with children. Many districts encourage caseworkers to visit with sibling groups in the same place, thereby spending less time in travel. Caseworkers also have face-to-face visits with adolescents during creative times, such as during a car ride to sports practice. Some districts have hired transportation aides so caseworker time can be freed up for other purposes.

In NYC, face-to-face caseworker visits with children and caseworker visits with parents are monitored through the EQUIP evaluative process begun in 1999. The frequency of contacts and the ability of the agency to comply with the minimum contact requirements is evaluated and rated as part of the overall EQUIP – now Provider Agency Measurement System (PAMS) - score. The overall agency rating and score then impacts the per diem reimbursement rate for the voluntary agency as well as the need for a corrective action plan.



Item 20: Worker visits with parents.

How effective are agency workers in conducting face-to-face visits as often as needed with parents of children in foster care and parents of children receiving in-home services?

Policy Description:

NYS regulations require that, during the first 30 days of placement, casework contacts must occur with the parents as often as is necessary, but at least twice unless compelling reasons are documented why such contacts are not possible. Thereafter, contact with the parents must occur at least once a month unless compelling reasons are documented why such contacts are not possible.

For protective and preventive cases there must be at least 12 casework contacts with the children and their families within a six-month period. For protective cases, one contact per month must be in the home and, for preventive cases, two contacts in the six-month period must be in the home.

2001 CFSR Summary:

The 2001 case review found that this item was a strength in 93% of the cases. The 2001 Statewide Assessment cited findings from case reviews held in NYC in 2000 as follows: for first month of foster care, 57% of parents and 53% of caretakers were seen twice in the first month; monthly casework contacts with parents/discharge resources were made in 29% of cases; 59% of preventive families met the contact standard; and, only 19% of the on-going protective cases met the higher case contact requirement. Upstate reviews showed that 67% of cases had the required quarterly contact and 41% had the required monthly contact. NYC and upstate counties undertook corrective action to improve the level of contact. The 2001 federal review noted that case contacts with children and parents occurred frequently enough to monitor and promote the safety and well-being of children. Reviewers noted case records reflected that caseworkers met with parents on a bi-weekly basis and, in some instances, they met with them on a weekly basis. The case review also found a need for increased efforts to locate and engage fathers as part of visiting with parents. (Note: The regulations have been changed since the 2001 CFSR review.)

Measures of Effectiveness:

The SPA instrument asks if, “the case planner had face-to-face contact with the parent or relative with the required frequency (at least monthly).” Of the 135 applicable cases reviewed in 2007, the case planner had at least monthly face-to-face contact with the parents in 52 cases (39%).

PROGRAM	Casework Contacts with Caretaker (done/required)		
	2003	2004	2005
Agency Operated Boarding Home (AOBH)	98%	98%	100%
Foster Boarding Home (FBH)	9%	92%	93%
Group Home/Group Residence (GH/GR)	94%	98%	98%
Residential Treatment Center (RTC)	9%	9%	99%
Supervised Independent Living Program (SILP)	98%	75%	99%
Average	62%	74%	98%

Data Source: ACS' PES

NYC’s ACS uses a system called the Program Evaluation System (PES) (chart) to monitor child welfare practice in NYC. PES scores agencies on a variety of tasks and provides a score according to type of program (agency operated boarding home, foster boarding home, group home/residence, residential treatment center and supervised independent living program).

PES tracks the percentage of completed required contacts (not necessarily face-to-face) between caseworker and parent. Although the percentage fluctuated over the years, the average percentage remained above 90%.

Factors Affecting Performance:

In spite of the low SPA findings regarding face-to-face contact with the parent, a focus group of seven birth mothers who all experienced removals all reported getting the required casework contacts.

For those who do not experience the required casework contacts, it is likely that many of the barriers to frequent and effective casework contacts with children are also barriers to casework contacts with parents.

Many caseworkers statewide struggle with making all of the required contacts. This is due to a number of reasons including: high caseloads, lack of sufficient engagement of the parents so parents do not maintain appointments with the caseworkers, parents unavailability during the hours that caseworkers have available, and unreliable parental transportation.

OCFS, in conjunction with the Center for the Development of Human Services (CDHS) Buffalo, has outstationed Family Engagement Specialists in OCFS Regional Offices. Working with the Family Engagement Specialists, counties and voluntary agencies have begun to assess their current practice and to identify practice improvements in such areas as the development of family meetings, effective casework with parents and their extended family, and others.



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

Item 21: Educational needs of the child.

How effective is the agency in addressing the educational needs of children in foster care and those receiving services in their own homes?

Policy Description:

NYS regulations require that child-care agencies take steps necessary for all children in foster care to receive education appropriate to their needs and in accordance with the requirements of the Education Law. In addition, they are required to maintain an active and direct liaison with any school in which a child in its care is enrolled and make certain that each child receives appropriate educational and vocational guidance. State standards require that the child's case record contain educational and vocational training reports and evaluations indicating the educational and/or vocational needs of each foster child, including school reports and committee on special education evaluations and/or recommendations.

2001 CFSR Summary:

During the 2001 CFSR, this item was identified as a strength based on 43 (91.5%) of the 47 applicable cases and due to stakeholder comments.

The 2001 Statewide Assessment cited data from a review of 401 foster care case records in NYC during Spring 2000 that showed that 87% of case records contained documentation of school performance and, of the approximately 100 cases in which children needed enhanced school services, about 78% received all needed enhanced services and 9% received some needed enhanced services (a total of 87% received some or all of the needed enhanced services).

Also in the 2001 CFSR:

- Case reviewers noted the following positive findings:
 - Young children were frequently referred for Early Intervention Services ;
 - Caseworkers were out-posted at some schools to facilitate early intervention and coordination of services; and,
 - An array of educational services including in-home tutoring and transportation to maintain local school enrollment.
- Stakeholders reported:
 - Strong partnerships with the local educational systems involving case and educational planning; and,
 - Discharge planning from residential placement includes educational issues to foster continuity of services.

Measures of Effectiveness:

Data in this item is difficult to gather at the systems level. At this time, NYS Education Department can not share information related to individual children, and, without parental consent, local school districts often do not share information. CONNECTIONS now includes an

education module so that basic information regarding the child's education, if they have an IEP, etc., is now available. By requiring casework staff to record and maintain education information, OCFS underscores the importance of education for youth in care. However, in a 2007 OCFS sponsored web-based survey, over 1,340 foster care youth ages 14 to 21 shared information about their experiences:

- 76% of all youth felt that their school needs were properly met.
- 48% of all youth felt that they were provided help in planning for college or vocational school but 62% of youth aged 17 to 21 said that they were provided with help in this area.

Sixteen percent (16%) of youth who responded to the survey did not feel their school needs were being properly met. This varied by current placement setting, with only 2% of youth in Supervised Independent Living Programs, 12-13% of youth in foster and group homes, and 18% of youth in residential centers expressing negativity about their school needs not being properly met. While respondents currently living in college dorms were a small percentage of the survey respondents and most were from NYC, 48% of them did not feel their school needs were being properly met. Based on youth comments in the survey and other sources of information about foster youth in college, it may be that some of these youth feel their prior schooling may have left them less academically prepared for college than they wish they had been and some are expressing unhappiness with not having enough money to enjoy the young adult college experience as other students at their college.

Although over 75% of the youth respondents reported that their school needs were properly met, it is important to note that this was not based on a scientific sampling and concerns remain that there were voices that were not included.

Factors Affecting Performance:

Access to data related to specific children is currently a barrier to measuring educational outcomes for children in the child welfare system. However, NYS Education Department (SED) has developed the NYS Student Information Repository System (SIRS) to provide a single source of standardized individual student records for analysis at the local, regional, and state levels to improve student performance and to meet state and federal reporting and accountability requirements. Data is currently being collected by SED and, in the future, it is anticipated that child welfare providers will have access to some of the data.

Other child-specific data collection efforts are underway. As a result of a Special Mayoral Task Force in NYC, the Department of Education and ACS have joined forces to continue to better coordinate services for children. ACS now has access to the Department of Education's automated tracking system so that Child Protective Services can access a child's grades, attendance, IEP, immunizations, etc. Due to a high number of cases reported to ACS alleging educational neglect, Specialized Educational Neglect Units have been created. MSW interns have been assigned to these units and are based in high risk schools. They work with school personnel to identify children who may be at risk of abuse or neglect. ACS has also established an education unit to track data related to educational activities of children in foster care. Agency

case planners are required to have no fewer than three contacts per year with a child's school. One of those contacts must be in person.

OCFS is actively participating in a workgroup formed under the leadership of the Permanent Judicial Commission on Justice for Children to examine the issue of children having to change schools because of being placed in foster care. School mobility can negatively impact academic achievement for children entering foster care and those moving between foster care settings. Five districts (Albany, Erie, Monroe, Oneida, and Tompkins) committed to gathering data to examine the extent to which children change schools upon admission to foster care. The initial data gathered indicates that local districts are by and large doing a good job in promoting stability in schools of origin, when appropriate. These counties rely on caseworkers, community service workers, transportation aides, and foster parents to provide transportation whenever possible. The single largest impediment to this practice is the absence of a funding stream to support the transportation costs. This is especially important in the rural areas of the State.

OCFS staff and external stakeholders involved in the SAT Education Committee identified similar factors impacting the education of youth as those identified by the Commission:

- Lack of guidance or mechanism for the school of origin, the school of location or the local social services district to provide or pay for transportation to the school of origin.
- Lack of clear roles between the local districts and school district sometimes leads to district placements (school enrollment) taking too long.

The child's current grade level or program, academic progress and achievements, and other relevant educational or vocational (when appropriate) information must be included in the Permanency Hearing Report. A focus group attended by CASA representatives identified the "Education Checklist for Judges and Child Welfare Professionals" (a document developed by the Judicial Commission)¹³ as an extremely useful tool for CASA, social services caseworkers, and judges. The Checklist was also cited as being helpful with the development of personal relationships between stakeholders that enable necessary family and child information to be obtained faster and more accurately.

Reported at the SAT "displayed thinking" January 2008 event, support and training are needed for both foster parents and birth parents to become more involved, knowledgeable, and skilled in assisting foster children achieve educational goals, as well as navigate the educational system.

Particular needs have been identified for youth aging out of foster care. Educational plans for youth (beginning in middle school) need to be focused on preparing them for college and other post-secondary educational opportunities. The survey results mentioned previously point to the need for further supports for foster youth already attending college who "do not feel their educational needs are being met." One youth who has aged out of foster care reported, during an interview, the importance of youth being supported after they age out of foster care. Although (with some exceptions) federal support for youth in foster care ends on the youth's 18th birthday,

¹³ "Education Checklist for Judges and Child Welfare Professionals."
<http://www.nycourts.gov/ip/justiceforchildren/PDF/EducationalNeeds.pdf>

in NYS children may remain in foster care until age 21. Services for youth beyond their 21st birthday are needed to support students in foster care who are attending college or other post-secondary programs.

The Educational Training Vouchers (ETV) began in FFY 2002-2003. OCFS has been able to fund all eligible applicants. During FFY 2006-2007, 810 youth received ETV vouchers; of the students receiving an ETV award, 20% were enrolled in community college, 69% were enrolled in a four year college, and 11% were enrolled in a vocational training program.



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

Item 22: Physical health of the child.

How does the State ensure that the physical health and medical needs of children are identified in assessments and case planning activities and that those needs are addressed through services?

Policy Description:

OCFS requires, for each child admitted into foster care, a comprehensive medical examination within 30 days after admission unless records are available to document that such an exam was completed within 90 days prior to admission. The initial examination must be in accordance with current recommended medical practice as it applies to the child's age, development and environmental background. A child's periodic medical exams must include immunizations as needed and vision assessments. Foster parents are to receive the child's comprehensive health history at the time of placement. All children in foster care age three years and older must be examined by a dentist annually and must be provided with any needed dental care. All medical information on each child is to be maintained in the case record.

2001 CFSR Summary:

The 2001 case review found that this item was a strength based on 43 (91.5%) of the 47 applicable cases and due to stakeholder comments.

The Statewide Assessment cited data from a review of 401 foster care case records in NYC during Spring, 2000 and showed that 81% had the required medical examination within 30 days of placement and (for the one-third of who had an identified medical need during a one year period) 92% received the needed services. Documentation of up-to-date immunizations was present in 75% of case records; 86% of children had some or all required routine health exams. Routine dental and eye exams were not consistently provided for all children.

Also in the 2001 CFSR, stakeholders noted that:

- Foster parents are strong advocates for children's medical needs and help each other locate medical providers and understand health-related issues;
- Not all service providers accept Medicaid patients but those that do are serving children in foster care; and,
- Pregnant teens receive appropriate prenatal care as well as infant care education.

Measures of Effectiveness:

OCFS undertook a comprehensive review of a sample of medical and foster care records in 2005. Based on this review:

- 82% of the records documented an initial physical assessment and 67% of these assessments were completed on time

- 50% of the records documented an initial dental assessment and 7% of these assessments were completed on time
- 78% of children received well child care services, 14% received primary care, and 9% received specialist care
- 37% of children received routine dental care
- 82% of children received health education services related to HIV education, while 9% received pregnancy prevention education

Foster care youth over age 14 responded to a 2007 OCFS sponsored web-based survey. Respondents reported:

- 80% somewhat or strongly agreed that their medical needs are properly met
- 77% felt their dental needs are properly met
- 78% said they received helpful information on sex education and pregnancy prevention

Factors Affecting Performance:

A major initiative underway in NYS that will positively impact the provision and integration of health services for children in foster care is Bridges to Health (B2H) Medicaid Home and Community-Based Waiver program in NYS. This program consists of three 1915(c) Home and Community-Based Services Medicaid Waivers, approved by the federal Center for Medicare and Medicaid Services (CMS) in July 2007, serving children in foster care with three disability groups. These three groups of children include: children that are diagnosed with serious emotional disturbances, developmental disabilities, or medical fragility. The implementation start date for B2H was January 1, 2008 and, following a three-year implementation schedule, the program will serve 3,305 children and their families at any one time. A particularly exciting component of B2H is that the services can follow a child after the child's discharge from foster care and support the family – birth, foster and adoptive families – until the child's 21st birthday.

In 2008, OCFS staff and stakeholders (via a Statewide Assessment Team Committee) affirmed that NYS is doing well in the provision of physical health services to children. It was agreed that the quality of health care among youth involved in the child welfare system is considered to be of high quality and comprehensive. A recent module was added to the CONNECTIONS system to capture basic health information and should provide data in this regard in the near future.

Local districts, in collaboration with health care providers, have developed creative ideas for promoting dental care such as the use of dental vans. Also, community medical clinics provide on-site dental services in some locations.

Health-related guidance manuals, checklists, and booklets have been created in recent years and widely distributed to the intended target populations, such as judges, CASAs, youth in foster care, etc. For example, during a focus group, judges and court referees in the 5th Judicial District reported the benefits of the Health Development and Education checklist. The Handbook for Youth in Foster Care provides adolescents in foster care with information such as: what is foster care, seeing your family, legal issues, everyday life, working, chores, and planning for your future. According to the 2007 web-based survey, 47% of the youth reported receiving this

manual. Distribution of this booklet needs to be more intentional. The chapter titled “Big Questions” includes several pages on “health” and “sexuality”. Areas included in the booklet are:

- Initial Health Activities (i.e. what to expect within 30 days of entering foster care)
- Follow-up Health Activities
- HIV/AIDS
- Taking Medicine
- Pregnancy
- Emergency Contraception
- Sexually Transmitted Diseases

The OCFS Manual “Working Together: Health Services for Children in Foster Care” provides guidance to case managers and is available on the OCFS website. To support its use, training was provided statewide when it became available in 2006. It is designed to support foster care and health services staff in focusing attention on the critical issue of adequate, timely health services for children in foster care. The Manual covers the five different areas of health needs: medical, dental, developmental, mental health, and substance abuse, as each has a unique focus with diverse assessment and treatment protocols. Along a similar line, ACS has developed a health form that is comprehensive in its inclusion of preventive care.

There were multiple successes identified by various groups regarding the physical health needs of children in foster care and those receiving services in their own homes. These initiatives include, but are not limited to:

- The New York Partnership for Family Recovery
- The Healthy Development of Foster Children Initiative
- The “Babies Can’t Wait” project
- The use of Child Abuse Medical Provider (CHAMP) network

The Court Improvement Project (CIP) is developing a Healthy Development of Children in Foster Care training curriculum to support the court’s role in promoting child well-being. The goals of this curriculum are to improve participants’ capacity to identify health, mental health, and educational needs of children in care and facilitate appropriate service plans. The Permanency Hearing Report contains specific sections to be reported to the court on the child’s health.



Item 23: Mental/behavioral health of the child.

How does the State ensure that the mental/ behavioral health needs of children are identified in assessments and case planning activities and that those needs are addressed through services?

Policy Description:

NYS regulations require that each authorized agency is responsible for providing comprehensive medical and health services for every foster child in its care. Psychiatric, psychological, and other essential services must be made available appropriate to the needs of the child. NYS has implemented a comprehensive health services program which includes an assessment of mental health needs. This includes an initial screening for child abuse and neglect by a health care provider (preferred) or caseworker/health staff within 24 hours of placement.

NYS requires the following assessment of mental and psychological development be part of required periodic health exams:

- For children through five years of age, a detailed developmental history of the infant or child must be obtained and documented in the child's medical record. The history should include information relating to speech, cognitive, emotional, psychosocial, and gross and fine motor development. Administration of a standardized (formal) developmental screening test, such as the Denver Developmental Screening Test (DDST) or the abbreviated DDST, is recommended but not required. The child's health status must also be updated at each periodic visit in such a way as to allow for serial evaluation.
- For children six to 12 years of age, an assessment of the psychosocial adjustment should include a discussion of school performance and peer and family relationships.
- For adolescents 13 years of age and older, an assessment of the psychosocial adjustment should include a discussion of peer and family relationships, school/job performance, use of drugs, alcohol or tobacco, and sexual preparedness and activity.

In addition, NYS' *Working Together Health Services for Children in Foster Care* manual strongly urges, based on best practices, that all children entering foster care receive a mental health assessment, conducted by a mental health professional within 30 days of admission.

2001 CFSR Summary:

The 2001 CFSR found that this item was an area needing improvement because of problems identified by the case reviewers and stakeholders notwithstanding that reviewers found this item a strength in 40 (91.1%) of the 44 applicable cases.

The 2001 Statewide Assessment cited data from a review of 401 foster care case records in NYC during spring, 2000 that showed 57% had mental health and/or behavioral problems; and, of these, 90% received services to address their mental health/behavioral problems while in foster care.

Measures of Effectiveness:

OCFS undertook a comprehensive review of a sample of medical and foster care records in 2005. Based on this review:

- 89% of the records documented an initial mental health assessment; 33% of children have at least one mental health problem identified; and 28% of children received individual therapy

- 82% of the records documented an initial developmental assessment; 42% of children have at least one developmental problem identified.

A summary of preliminary results from the 2007 OCFS web-based Foster Care Youth Survey indicate the following:

- 80% of respondents surveyed felt their mental health needs are properly met.
- 83% of the respondents surveyed felt they have gained skills in how to get along well with other people.

Factors Affecting Performance:

The extent of the need for mental health services for children in the child welfare system is well documented in the literature, as is the shortage of accessible mental health services to meet these needs. According to the Surgeon General, "...roughly 1 in 10 children experience a mental illness severe enough to cause significant impairment."¹⁴ Given the traumatic issues that often bring them into care, children who are in foster care, are even more at risk for such impairment. Various research studies indicate that, nationally, anywhere from 40-85% of children in foster care have mental health disorders.¹⁵ In addition, although this data points to a clear need for mental health care, less than one-third of these children receive mental health services.¹⁶ Further, only 3% of mental health providers surveyed in 2004 noted that they work with children in foster care.¹⁷

In the national spotlight, there are fewer child and adolescent mental health professionals, most especially child psychiatrists, who are available to work with children including those children in foster care. A study commissioned by the American Academy of Child and Adolescent Psychiatrists estimates that there are only about 7,000 child and adolescent psychiatrists in the United States, resulting in an average of only one child psychiatrist for every 15,000 youth under age 18. Many mental health professionals, who do work with children in foster care, may not be versed and educated in the child welfare system's mandates and roles. In addition, though research shows that early identification of mental health issues can lead to prevention of serious emotional disturbances, opportunities to identify children who are showing early signs of a serious emotional disturbance are much more limited. Many times children in foster care are not screened preventively for a serious emotional disturbance and as a result are not referred until they show evidence of behavioral and emotional health issues. Further, when the child is in foster care, previous health and mental health history is often fragmented, leaving mental health professionals with an incomplete or non-existent information to accurately diagnose and treat mental health issues, ("Mental Health Needs of Youth in Foster Care: Challenges and Strategies", *The Connection*. Winter 2004, Vol. 20, No. 4).

In NYS, several initiatives to strengthen the assessment of mental health needs of children and provide appropriate services are underway.

¹⁴ Austin, Lisette. "Mental Health Needs of Youth in Foster Care: Challenges and Strategies." *The Connection: Quarterly Magazine of the National Court Appointed Special Advocate (CASA) Association*. 20.4 (Winter 2004): 6.

¹⁵ Ibid.

¹⁶ Ibid.

¹⁷ Ibid.

CONNECTIONS Build 18.9, released at the end of 2006, provides system support for the recording of key health information including health status, health exams, vital information, clinical diagnoses, and other select information regarding a child's health history and that of their biological family.

In addition to the OCFS B2H Waiver operated in collaboration with NYS DOH, OMH, and OMRDD, other interagency collaborations at the state and local level continue to be essential to the identification and elimination of barriers to the delivery of mental health services for children in the child welfare system. These other state collaborations include the following:

- The Coordinated Children's Services Initiative (CCSI) is an interagency (eight NYS agencies) and family collaboration, which supports localities in creating systems of care that allow children who are at risk of residential placement to remain at home with their families and in their communities.
- The NYS OMH operates a Home and Community-Based Waiver program for children with serious emotional disturbance. Of the 1,326 waiver slots in the State, 352 are dedicated to children in the child welfare system through the use of 65% State/35% Local Preventive Funding, net of federal costs.
- In 2006-07 OMH implemented the "Achieving the Promise" initiative which resulted in changes in the ways that services are provided and accessed. Under Achieving the Promise:
 - Child and Family Clinic Plus adopts a public health approach to the early recognition of health concerns through the screening of nearly 400,000 children each year for serious emotional disturbance and expands clinic services to an additional 36,000 children. Clinic Plus identifies target populations for screening in identified sites, a small number of these targeting foster care and child preventive populations of youth.
 - Through the use of Rural Telepsychiatry, child psychiatrists are available to provide designated rural psychiatry shortage areas with up to 600 comprehensive evaluations and consultations each year.

Often, these state interagency collaborations are evident at the local service level also. State preventive funds, provided at a 65% reimbursement rate, encourage the development and implementation of local best practice services, such as Multi-systemic Therapy and Functional Family Therapy.

Since FY 2000-01, OMH has overseen the implementation of Single Points of Access (SPOA) in each locality in NYS. The SPOA encourages collaboration with all child-serving systems, including local districts, to ensure that the mental health needs of children are comprehensively served. SPOA processes however, are locally based and vary with the philosophy and infrastructure of each county

Despite of the strides made in this area, focus groups throughout all areas of NYS repeatedly identified the lack of local mental health service and clinicians as a barrier to service accessibility. There is often a lengthy time between the determination that a client needs services

and when the services are actually delivered. In one focus group, the point of view expressed was that sometimes the wait is so long that the initial issue is untreated to the point that the family situation gets worse and other issues rise from it. One mental health agency was used as an example in a discussion: this agency has a 40 family waiting list for services; this equates to a five month wait.

Despite all of these promising initiatives, NYS, like most and perhaps all states, continues to struggle to make mental health services available to children in the child welfare system that are accessible in sufficient quantity and are located in the communities where children live.



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SECTION IV

Systemic Factors

Statewide Information System

Item 24: State Information System.

Is the State operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

Systems Description:

Since 2001, NYS has made significant progress with the development and implementation of a statewide information system to track needed information about children in foster care through its Statewide Automated Child Welfare Information System, CONNECTIONS. With the statewide implementation of the Case Management Module in 2006, CONNECTIONS is the system of record for child protective, preventive, adoption and foster care case initiation, assessment, and service planning. Across all local districts, and over 200 contract agencies, 16,000 caseworkers and supervisors access CONNECTIONS to review and document demographics, investigations, safety and risk assessments, progress notes, family assessments and service plans, health and education information. The CONNECTIONS Resource Directory is the system of record for service providers and foster and adoptive home initiation and on going certification or approval. The Welfare Management System (WMS) and the Child Care Review Service (CCRS) legacy systems, which have been operational since 1975, continue to function but several components have been replaced by CONNECTIONS functionality.

All child welfare cases originate in CONNECTIONS, and when a decision to purchase services is made, CONNECTIONS demographic information is used to drive an interface to WMS which in turn supports the eligibility and service authorization process for all child welfare services, and provides the case and demographic framework for the CCRS sub-system. CCRS remains the system of record for foster care placement and legal events, and adoption milestone recording. With the implementation of the Statewide Services Payment System (SSPS), CCRS placement and legal information, along with WMS purchase of service and eligibility data support the Benefits Issuance and Control System (BICS) to issue payments and regulate claiming for foster care, adoption, and preventive services. SSPS-BICS implementation was completed statewide in June 2005.

CONNECTIONS and the legacy systems interface on several levels:

- Demographic information is entered in CONNECTIONS and synchronized with WMS and CCRS.
- Legal information in CCRS is utilized to generate alerts and ticklers to CONNECTIONS regarding permanency timelines. Placement information entered in CCRS is displayed in CONNECTIONS.
- Assessment and Service Plan Information entered in CONNECTIONS is posted to CCRS to establish consistency of data and timelines.
- CONNECTIONS resource information is used by WMS, CCRS and BICS for placement location, purchase and payment purposes.

These interconnected systems support the needs of local districts, voluntary agencies and OCFS management and staff in the identification of the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care. Data from CONNECTIONS and CCRS is currently used to report AFCARS and CFSR data to the Administration for Children and Families. Youth placed in OCFS operated facilities are currently tracked only in OCFS' stand-alone CMAP system, and are currently not included in NYS' AFCARS reporting.

Now that CONNECTIONS Case Management functions are available statewide, OCFS' ability to track data has been extended, providing caseworkers, managers and other stakeholders with the ability to follow a case through the delivery of child protective services to foster care or other services. Data from CCRS and CONNECTIONS is joined in the Data Warehouse to support extensive reporting and analysis including the federal AFCARS submission.

Reporting capabilities have been progressively enhanced, and OCFS is fully capable of producing Child Welfare Case Management Reports to address multiple purposes and on many levels. The OCFS Data Warehouse was developed to provide access to data retrieved from CONNECTIONS and state legacy data systems. Users, who include local district, voluntary agency, and Home and Regional Office OCFS staff, have on-demand pre-defined summary and detail reports as well as ad hoc (user generated, on demand) reporting capability directly from their desk computers. These reports can be used for point in time and historical trend analysis of child welfare services in NYS. As of November 2007, more than 3,400 users in local districts, voluntary agencies, and OCFS home and regional offices are accessing reports from the Data Warehouse.

Data and reports from the Data Warehouse are also available to local district staff via the Commissioner's Dashboard. The Commissioner's Dashboard is a joint project of OCFS, DOH and OTDA to develop a web-based reporting tool to provide access to high level analysis, trending and operational reports. This tool supports the creation of performance indicators, statistics, and other management information.

The Operational Data Store (ODS) has been developed to support local districts and voluntary agencies who have an on-going need for current data to support their specific operational needs. The data is sourced from CONNECTIONS and raw incremental files are sent to a local district or voluntary agency - operated server. Participating local districts and voluntary agencies are required to have an ODS password and an Office for Technology (OFT) - approved secure server.

These reporting capabilities allow OCFS and users to join data from several sources to get a holistic picture of the case activity, history and trends. A subset of our reporting capacity is listed below.

2001 CFSR Summary

This item was rated as an area needing improvement. The Statewide Assessment indicated that the various systems used in NYS (WMS, CCRS, BICS, CONNECTIONS), did not communicate

with one another. At the time of the 2001 CFSR, the system contained gaps that prohibited information from being shared, especially case histories. This has since been addressed.

Timeliness of Investigation:

Timeliness of investigations is supported in a series of on-line reports. CONNECTIONS data is currently used to produce this report (CPS Open Caseload Inquiry Report Series). It is available on line on a caseworker level and generated monthly for each local district. Statewide and regional roll ups are also produced. The report is distributed to each local district's liaison(s) and to OCFS regional and home office liaisons

Timeliness of Case Plan:

The Family Assessment and Service Plan (FASP) serves a critical function in working with families. The FASP series in the OCFS Data Warehouse can assist supervisors and managers in local districts, voluntary agencies and regional offices in improving the FASP process by monitoring the status of open, over due and coming due FASPs by type (Initial, Comprehensive, or Reassessment) for a particular month, and monitoring FASP activity at different stages of the submittal-approval process.

Time in Care, Number of Placements, Adoption Statistics

CCRS is the system of record for placement related information for children in foster care. Three reports, In-care, Admission, and Discharge Summary, are updated monthly to provide descriptive data by status on the population of children in the care/custody of local districts or voluntary agencies. In addition to counts on average months in care, number of admissions and discharges to adoption, data is also available on age, permanency planning goal, previous admissions, gender, and current facility.

Recurrence of Indicated Reports, Number of Reentries

Using the federal CFSR definition of recurrence of maltreatment and re-entry into foster care, reports are available to support local districts in identifying potential factors contributing to failure in providing safety and permanency to children in care. These reports are available in summary or detail form. From any local district, a detail report is available, which will list each of the district's children included in the universe. Details of the CPS reports are available in CONNECTIONS and/or the local case records. Details of foster care outcomes are available in CONNECTIONS, CCRS and/or the local case records.

While our capacity to track and report on child welfare case demographics, characteristics and events is comprehensive, we recognize that the current, multi-system model is not ideal. NYS has recently made a decision to modernize the CONNECTIONS architecture before moving ahead with plans to replace WMS and CCRS thus completing the child welfare information system within a single application. The decision to delay further implementation was made in response to extensive user and stakeholder feedback, industry expert reviews and in consultation with our federal partners. Further details and a business case have been shared in communications with ACF. Use of the current system is cumbersome. Enhancements are needed in order to reduce the time workers spend entering data and generating reports, thereby increasing the time they have for casework contacts.

Case Review System

Item 25: Written Case Plan.

Does the State provide a process that ensures that each child has a written case plan, to be developed jointly with the child, when appropriate, and the child's parent(s), that includes the required provisions?

Policy Description:

NYS requires that local districts develop written Family Assessments and Service Plans (FASP) and maintain these plans as part of the standard Uniform Case Record (UCR) since 1981. A UCR must be created for all families receiving child protective services, preventive services, or foster care services. For a child legally freed for adoption, there is a required child-specific assessment and service plan. Since 2005, the Family (and child) Assessments and Service Plans are documented electronically as part of NYS' CONNECTIONS system. The FASP documents each child's permanency planning goal, as well as specific assessments of safety, risk, strengths, needs, and the service plan, which includes descriptions of the activities and services that will address the circumstances or conditions that need to change in order to achieve permanency, enhance well-being, and reduce risk. OCFS regulations require local districts to include, among others, a child's parents, guardians, and children over age 10, as appropriate, as participants in the development of the case plan.

The initial FASP is required within seven days of a determination of a CPS report of abuse or maltreatment if the case will be opened for child welfare services, or within 30 days of a foster care placement, a court order, or receipt of an application for services, whichever is earliest. A comprehensive FASP is required within 90 days of the case opening and the first reassessment FASP within seven months of case opening and continuing reassessment FASPs every six months thereafter. Within these timeframes, all case plans must be approved by the case manager, the local district representative who has the authority to authorize service provision and determine eligibility. Plan amendments are required at points of significant change in the case and on-going progress notes are also required. The FASPs serve not only as the official source of documentation for the case, but also as tools to help support and guide caseworker and supervisory decision making.

Please see *Item 18: Child and family involvement in case planning*, for additional policy information related to child and family involvement in case planning.

2001 CFSR Summary:

The 2001 CFSR found that this item was an area needing improvement. The Statewide Assessment cited data from NYC and upstate reviews that showed high percentages of case plan documentation, but low parental participation in case plan development.

The CFSR review team noted that the State and local districts are highly effective in developing case plans. Case reviewers noted that the required UCR planning and documentation materials were in the records and were supported by an information system that prompts timeliness in case

plan development. Stakeholders reported a need to actively engage parents, foster parents, or guardians in case plan development so that these individuals understood what was being done and the impact of their involvement. They noted that improvement has been made in involving birth parents in case plan development, but that more improvement is needed and suggested better notification and communication with birth parents, clarity about their rights, and more attention to contacting birth fathers.

Item 18: Child and family involvement in case planning provides additional information related to the effectiveness of engaging parents and age-appropriate children in the development of a written case plan.

Factors Affecting Performance:

Significant efforts have been made in recent years to develop more effective parent and youth engagement throughout the case planning process. Additionally, there has been increased attention focused on locating and engaging birth fathers and their extended families. The following are a few initiatives implemented during recent years:

- Employment of Family Engagement Specialists in every region to facilitate family involvement in case planning (this is a joint initiative between OCFS and the Center for the Development of Human Services), and associated strategies, such as Family Case Conferencing, Parent to Parent, and using the Federal Parent Locator Service;
- Development and distribution of the Handbook for Youth in Foster Care that provides youth in care with practical information, including the purpose of, and their rights in relation to, their service plans;
- Cultural education (for example, OCFS produced the Indian Child Welfare DVD and ICWA Desk Aid, to increase cultural awareness in working with Native American tribal families);
- Development of the ACS 72-hour case conferencing process for high-risk cases where foster care either has occurred or could occur;
- ACS provision of training and technical assistance to agencies to support effective service plan reviews with families.

Documentation of the written case plan is now supported by NYS' CONNECTIONS system to assist with preparing a FASP that includes the required provisions. Several sections of the FASP are controlled by edits that require the caseworkers to modify and/or enter required information. In addition, the FASP identifies where sections have not been completed, but must be, prior to submission to supervisor for approval.

Timely development and reassessment of case plans is an area that OCFS continues to focus on. The FASPs Due Report, available from the Data Warehouse, is designed to help supervisors and managers track FASP activity and status by monitoring and assessing the number of overdue and coming-due FASPs. The FASP Activities Series Reports can help supervisors and managers monitor point-in-time FASP activity.

The NYS Citizen Review Panels' 2007 Annual Report anecdotally reports positive comments from youth and birth parents involved in the child welfare system. The topic, titled: *Partnering*

with Parents: An Approach that Puts Parents in the Driver's Seat, reports that, "The NYS Office of Children and Family Services (OCFS), understanding the value of relationship building, is piloting the use of several family engagement strategies throughout the State...Involvement, not coercion, works best."¹⁸



Item 26: Periodic Reviews.

Does the State provide a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review?

Policy Description:

NYS regulation requires periodic reviews of the family service plans for foster care cases and other out-of-home placement cases (i.e. when a child is directly placed by the court with a relative or other suitable person as a result of an abuse or neglect petition) and makes such reviews optional in non-placement cases. These administrative reviews, known as Service Plan Reviews (SPR), must be held no later than 90 days from the date the child was removed from the home. Subsequent SPRs must be held every six months thereafter. These reviews are conducted by a case conference that by regulation must include the case planner and a third party reviewer and must allow for notification to and participation of the parents, guardians, any foster child over 10 years of age, the child's foster parents, and service providers, among others. Two weeks in advance of the conference, the parents, guardians, and other relevant parties must be given written notice of the date, time, and location and informing the parent(s) that they may be accompanied by a person(s) of their choice. A Permanency Hearing, described in Item 27, may in some instances, serve as an SPR.

The SPR and its resulting recommendations must be documented and made available to all service plan review participants. The SPRs consider the previous service plan, progress made toward achieving goals and outcomes, past participation of family members, and any problems in service provision. Agreement is sought on any change to the plan, on the tasks and activities to take place during the upcoming service plan period, and on the anticipated completion dates for goals.

OCFS has promulgated guidance to the local districts on the need for, and methods of, locating and involving absent parents, especially fathers of children in foster care, so that the child's permanency and well-being can be achieved more effectively and efficiently. A directive was jointly issued with the NYS Office of Child Support informing child welfare and child support workers of the ability and process for using the Federal Parent Locator Service (FPLS) and State

¹⁸ New York State Citizen Review Panels for Child Protective Services. "Partnering with Parents: An Approach that Puts Parents in the Driver's Seat." 2007 Annual Report and Recommendations. 9.

Parent Locator Service (SPLS) and other information on the State's child support system for the purpose of permanency planning.

2001 CSFR Summary:

The 2001 CFSR rated this item as a strength. Focus group input showed that in NYC SPRs were seen as a positive opportunity for case conferencing, but noted difficulty with the attendance of law guardians due to court scheduling conflicts and indicated that the SPR is an under-utilized planning tool. The Statewide Assessment noted that in Family Treatment Courts in NYC, service plans were a focal point for biweekly hearings to monitor substance abusing parents. Upstate case reviews in 2000 and 2001 found that 60% of the foster care cases had the required SPR and 63% of those were held within the six month standard.

Factors Affecting Performance:

NYS has clear policy guidelines for conducting SPRs, including the frequency with which they must be held, who must be invited and who must attend. OCFS monitoring of local district and agency practice through the Safety and Permanency Assessment (SPA) shows that in the majority of cases reviewed (90%), parents, guardians, and/or the child were involved in case planning activities.

Sixty-five percent of youth responding to the OCFS web-based survey developed for the CFSR Statewide Assessment reported that they attended their most recent SPR. However, 22% said they were never invited. Feedback from stakeholders identified uneven practice in inviting parents and youth to SPRs. Best practices are to coordinate a convenient date and time with family members and to hold SPRs during non-traditional hours such as evenings or weekends so children do not miss school and parents do not miss work or participation in treatment services. Most local districts and agencies schedule SPRs during weekday hours and many send an invitation, with a date and time set by the agency, to the parents and children.

Foster parents report uneven practice in receiving invitations to SPRs and again, the weekday hours during which SPRs tend to be scheduled create an obstacle for foster parents who also work outside the home, and those with small children, to attend. The more frequent family team conferencing that is being conducted as part of ACS' IOC pilot initiative provides increased opportunities for caseworkers to meet with families to actively involve them in case planning without waiting for a SPR to be scheduled.



Item 27: Permanency Hearings.

Does the State provide a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date that the child entered foster care and no less frequently than every 12 months thereafter?

Policy Description:

This is an area where significant legislative and policy changes have occurred since the 2001 CFSR review. The passage of the Permanency Legislation in 2005 created a schedule for Permanency Hearings that exceeds the federal requirements.

Permanency Hearings apply to the following children:

- Children who have entered foster care as abused or neglected children (FCA Article 10);
- Children who have entered foster care through a voluntary placement agreement (SSL §384-a);
- Children in foster care who have been surrendered for adoption (SSL §383-c) and are completely legally free;
- Children who have been surrendered for adoption (SSL §384);
- Foster children determined by a court to be completely legally free for adoption, whether in foster care pursuant to FCA Articles 3 (juvenile delinquent), 7 (PINS), or 10 (abused/neglected), or by voluntary placement or surrender; and
- Children placed by the court directly with a relative or other suitable person as an outcome of a FCA Article 10 proceeding.

Each Permanency Hearing for children has a date certain established. Petitions for extension of placement and/or Permanency Hearings are no longer filed as a means to calendar the Permanency Hearing for the above population. The term date certain means a specific day set by the court when a Permanency Hearing will be held. The date certain for the initial Permanency Hearing is set at the first removal hearing, or the hearing under section 358-a of the SSL approving the voluntary placement agreement or surrender. The date for each subsequent Permanency Hearing is set at the completion of the previous Permanency Hearing. The actual timing of the date certain is based on the standards set forth in section 1089 of the FCA:

- Initial Permanency Hearing (Non-freed Child): Date of removal from home plus 60 days plus 6 months = no later than 8 months;
- Initial Permanency Hearing (Completely Freed Child): Immediately following an approval of a surrender or termination of parental rights disposition; or no later than 30 days after the court hearing completely freeing the child;
- Subsequent Permanency Hearings – Freed and Non-freed Child: No later than six months following the preceding Permanency Hearing.

NYS law requires that a Permanency Hearing Report be created and sent to required parties fourteen days prior to each and every Permanency Hearing date certain and that the report be filed with the Court. A Notice of Permanency Hearing with the date, time and location of the hearing must also be submitted or mailed to the required parties and a statement to the Court of the Permanency Hearing Report and Notice Sent must be submitted to the Court, listing all those who received the Report and/or the Notice.

Notice of the Permanency Hearing and the Permanency Hearing Report under Article 10-A of the FCA must be provided to the following:

- The child's parent, including any non-respondent parent (except where the parental rights of the birth parent have been terminated or surrendered);
- Any other person legally responsible for the child;
- The foster parent in whose home the child currently resides, if applicable;
- The child's law guardian;
- The attorney for respondent parent, if applicable;
- The agency supervising the child's care, if applicable;
- Any pre-adoptive parent;
- Any relative providing care for the child;
- All former foster parents within whose home the child resided for a continuous period of 12 months must be provided ***only with Notice of the Permanency Hearing***. This requirement is to be met regardless of whether the foster boarding home remains open or has since closed; however, the court is permitted to dispense with notification to a former foster parent where the court determines it is in the best interests of the child.

Department regulations require a case consultation be held. The purpose is to assist with the development of the Permanency Hearing Report and to address the following:

- Review the progress and the status of the child who had been removed from his or her home, including the child's health and education;
- Review the safety of the child in his or her current environment;
- Review the appropriateness of the current placement, including whether such placement is the least restrictive environment that can meet the child's needs;
- Assess whether it would be safe to return the child to his or her home, and assess the level of risk of the likelihood of abuse or maltreatment such return would entail;
- Review the progress made by each parent toward successful implementation of the service plan and the child's permanency planning goal, unless the parent has had his or her parental rights to the child terminated;
- Review the reasonable efforts made to assist with the achievement of the child's permanency planning goal;
- Assess the need for modification or continuation of the current permanency planning goal;
- Review the current service plan and any barriers to service delivery and assess the need to make modifications to support the safety, permanency and well-being of the child;
- Review the current visiting plan and assess the need to make modifications to support family relationships;
- For a child who is not free for adoption, review the status of the concurrent permanency plan for the child, in the event the child is unlikely to be able to safely return home;
- Review the status of any permanency discharge resource being considered for the child;

- Develop a recommendation as to whether the child needs to continue in placement or be discharged from such placement. If the child will be discharged from placement within the upcoming six months, develop a recommended discharge plan; and
- For a child completely free for adoption with a goal of adoption, review the status of each adoption milestone, and assess progress toward achievement, as appropriate, including but not limited to recruitment efforts, adoption assistance/subsidy approval, and overcoming any other barriers to finalization of the adoption.

The case consultation must be conducted no earlier than 60 days prior to the date certain of the Permanency Hearing and must be completed with sufficient time to finalize and submit the Permanency Hearing Report at least 14 days before the date certain for the Permanency Hearing.

Participants in the case consultation must include:

- The case planner and/or the child's caseworker;
- The child's parent(s), unless the parent has had his or her parental rights to the child terminated or unless it can be documented that one or both of them are unwilling or unable to attend;
- Each child age 10 or over, unless it can be documented that the child is unwilling to attend, or it can be demonstrated that such attendance would not be in the child's best interests; and
- The child's foster parent, if the child is in placement in a foster boarding home; the child's pre-adoptive parent, if the child is in such placement; or the relative or other suitable person with whom the child has been placed directly by a court order.

Efforts must be made to also consult with the case manager, the permanency discharge resource, key providers of service to the child and family, the child's school, in the case of an Indian child, the child's tribe, if known, and any other person identified by the parent(s); however, efforts to involve such additional person(s) must not delay the case consultation or preparation of the Permanency Hearing Report.

2001 CFSR Summary:

The 2001 CFSR found that this item was an area needing improvement. As reported in the Statewide Assessment, Permanency Hearings were not occurring in a timely manner due to court delays, high staff turnover (child welfare agency), and a lack of fully prepared needed documentation. Getting sufficient information into the court ahead of time was a challenge. The quality of Permanency Hearings suffered from poor communication between the local district and the court system. The CFSR Final Report indicated that even though Permanency Hearings were not always held in a timely manner, all relevant parties are involved.

Factors Affecting Performance:

Since the 2001 CFSR, significant improvements have been implemented across multiple systems (courts, local districts, voluntary agencies, etc.). On December 21, 2005, the new Permanency Law took effect. This sweeping reform legislation, supported by both the Office of Court Administration and OCFS, requires earlier and more frequent court review to monitor the progress of child welfare cases. The result has been an increase in emphasis on court informed

discussions and court-based monitoring of case progress. It has also led to an increase in the volume of cases heard by the family court system in NYS.

During 2006, NYS family courts held 46,379 Permanency Hearings. Additionally, court calendars also include filings of abuse and neglect cases and in NYC family courts these filings more than doubled during 2006. Original filings in NYC increased from just over 5,000 in 2005 to over 12,300 in 2006, an increase of 147 percent.¹⁹ As reported by the Court Improvement Project, the workload continues to increase, in part, as a result of the new permanency legislation.

The increase in caseload volume is further exacerbated by the lack of resources. The number of family court judges in NYS was set by statute during the late 1980's and without an increase in the number of judges, the system is taxed. Focus groups with family court judges and referees across the State universally named the caseload volume as the primary challenge. Caseload volume has been cited as an impediment to implementing Permanency Hearings within the legislative timelines. Caseload volume also affects the quality of the Hearings, due to the inability of caseworkers, law guardians, and others to adequately prepare and distribute the reports. Permanency Hearings that are adjourned create additional delays.

ACS has implemented some methods to support high quality Permanency Hearings, such as:

- ACS Legal Tracking System (LTS): LTS assists the ACS attorneys in managing their caseloads. The system also allows voluntary agencies to track and view the status of the child in court, any court reports, any upcoming court date, etc. LTS is also used as a management tool providing information such as the timeliness of permanency reports, caseworker attendance in court, etc.
- Attendance at hearings: In order to decrease the number of cases adjourned, ACS has been making efforts to ensure that agency case planners and CPS caseworkers attend hearings and are punctual. Any lateness or non-attendance is recorded in LTS. If a case planner or CPS worker fails to attend a scheduled Hearing, ACS Family Court Legal Services sends a notice to the agency executive director.
- Increase in ACS attorneys: Since March 2006, ACS has increased the number of attorneys from 175 to 210 in an effort to reduce caseloads, be better prepared in court, and reduce the likelihood of an adjournment.



Item 28: Termination of Parental Rights.

Does the State provide a process for Termination of Parental Rights (TPR) proceedings in accordance with the provisions of the Adoption and Safe Families Act (ASFA)?

¹⁹ Preliminary Report of the Chief Administrative Judge, Pursuant to Chapter 626 of the Laws of 2007, Dec. 2007.

Policy Description:

NYS requires, except as described below, that a petition to terminate parental rights (TPR) must be filed when a child has been in foster care for 15 of the most recent 22 months, a court has determined the child to be an abandoned child; or a court has made a determination that the parent has committed murder of another child of the parent; committed voluntary manslaughter of another child of the parent; aided or abetted, attempted, conspired or solicited to commit such murder or voluntary manslaughter; or committed a felony assault that has resulted in serious bodily injury to the child or another child of the parent.

A TPR petition is not required when:

- The child is being cared for by a relative (although a TPR may be filed in such cases); or
- The family has not been provided, consistent with the time period in the case plan, such services necessary for the safe return of the child to the child's home, if reasonable efforts required to be made with respect to the child; or
- The district/agency has documented a compelling reason for determining that filing such a petition would not be in the best interests of the child.

OCFS has developed guidance for districts and agencies around what may constitute compelling reason for not filing a TPR. This list is not considered all inclusive. Compelling reasons may include:

- the child is 14 years old or older and does not want to be adopted;
- a family setting will not currently meet the child's needs because of the child's severe emotional, behavioral or psychiatric problems;
- at least one parent is actively being considered as a discharge resource for the child, and it is anticipated that such discharge is likely to occur within six months;
- the child is in placement with a sibling(s) and the sibling(s) is not being freed for adoption;
- the parent makes regular contact with the child and maintaining their relationship benefits the child;
- the child is in foster care for a child-related problem, at least in part, and there would be little or no benefit to the child in ending the child's relationship with the child's parent(s);
- the parent's death is imminent;
- there are insufficient legal grounds for TPR;
- the child's best/most likely permanency option is something other than adoption;
- the child was placed into foster care pursuant to Article 3 or Article 7 of the FCA and a review of the specific facts and circumstances of the child's placement demonstrate that the appropriate permanency goal for the child is either return to his or her parent or guardian, or discharge to APPLA;
- the child is the subject of a pending disposition under Article 10 of the FCA, (except where such child is already in the custody of the commissioner of social services as a result of a proceeding other than the pending Article 10 proceeding) and a review of the specific facts and circumstances of the child's placement demonstrates that the appropriate permanency goal for the child is discharge to his or her parent or guardian.

The guidance has also been placed in the CONNECTIONS system Help feature.

Existence of an exception must be determined on a case-by-case basis and the case specific determination documented in each periodic FASP that is part of NYS' statewide information system, CONNECTIONS.

In relation to the above "compelling reasons," every case (i.e., child and family) must receive ongoing individualized assessments. The factors that might constitute compelling reason must be weighed along with other known child and family circumstances.

2001 CFSR Summary:

The 2001 CFSR found that this item was an area needing improvement. CFSR stakeholders reported that NYS was making concerted efforts through policy developments, staff training, and other supports to implement provisions of ASFA regarding TPR. However, they cited continued delays in making decisions regarding TPR when children have spent 15 of 22 months in care. This finding was also supported by the case reviews.

Factors Affecting Performance:

The Adoption Now Workgroup, described in Section I, was formed during the Round 1 CFSR PIP process and is a multi-disciplinary workgroup created to identify systemic issues that impede the expedited finalization of adoptions. Initiatives to address systemic issues, such as cross-training opportunities were created. The Adoption Now Workgroup has utilized the Annual "Sharing Success" OCA/OCFS collaborative conferences to disseminate training information.

Regarding delays to TPR caused by appeals, according to DeCataldo and Carroll, "...it was not uncommon to have 2-year delays before termination appeals were resolved. The Chief Judge supported dialogue with Appellate Courts, and most judicial departments have instituted significant practice changes for cases involving appeals of termination of parental rights orders. The Appellate Courts instituted case management strategies including designated calendar slots for expedited oral argument, scheduled orders with rigid time lines, and restricted use of filing extensions. The work has shortened the average time to decision by one year and improvements continue."²⁰

Also cited by DeCataldo and Carroll was the lack of uniformity of practice. "...the [Adoption Now] workgroup supported the legislation proposed by OCA, known as the One Judge/One Family law, which requires one judge to preside over a family's surrender or termination of parental rights proceeding and later filed adoption proceedings for child welfare involved cases. The new law, passed in 2006, paves the way for greater consistency in practice."²¹

The proposed 2008-2009 Judiciary Budget includes a total of \$1.8 million to support Family Justice Enhancements including an expansion of the use of the Child Welfare Best Practice Courts (or "Model Courts"). Model Courts, described in Section I, have demonstrated success in meeting the goals of ASFA.

²⁰ DeCataldo, Kathleen R., Esq. and Carroll, Karen, Esq., "Adoption Now: A Joint Initiative of New York's Courts and Child Welfare System." Child Welfare League of America. (2007):37.

²¹ Ibid., 37.

OCFS, through our university training partner, Center for the Development of Human Services, provides a training, *Best Practices in Achieving Adoption through Surrender and TPR*. The program, with sections co-led by attorneys, provides information on rights of fathers, preparing for TPR, surrender, and the Permanency Law of 2005 as they impact adoption practices.



Item 29: Notice of Hearings and Reviews to Caregivers.

Does the State provide a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child?

Policy Description:

NYS law requires that foster parents, pre-adoptive parents and relatives caring for a foster child be notified of each Permanency Hearing and that they have a right to be heard at the hearing. Chapter 327 of the Laws of 2007 amended statute because formerly there was only an “opportunity” to be heard. Fourteen days prior to the Permanency Hearing, foster parents, pre-adoptive parents and relatives caring for a child (among others) are provided with a Permanency Hearing Report (PHR) which contains specific information regarding a child's well being, including health, educational progress, and current placement; visitation plans; parent status and progress; services offered to the parent and any barriers to the delivery of appropriate services; and reasonable efforts made by the local district to effectuate the permanency plan. Additionally, a case consultation is required in conjunction with the development of the child's Permanency Hearing Report to seek input from those persons.

In the case of PINS and JDs, notice is provided in the form of a petition and summons. The right to be heard applies equally to foster parents, pre-adoptive parents, and relatives caring for a foster child.

Currently, at the foster child's fact finding and dispositional hearing, there is no provision for notice and a right to be heard.

With regard to a TPR hearing, in addition to the child's parents and certain prescribed others, such other persons as the court may in its discretion prescribe, are sent notice. Once a termination order is issued, NYS law requires that notice is served on people who have been approved as adoptive parents for the child regarding the entry of the termination order and the fact that an adoption proceeding can be commenced. Furthermore, the court must hold a Permanency Hearing no later than 30 days after the child is freed, and the above noted notice and hearing rights for Permanency Hearings apply.

Foster parents, pre-adoptive parents, and relatives caring for the child are encouraged to participate as members of each SPR, conducted within 60 to 90 days of a child's removal (or placement in foster care for PINS and juvenile delinquency) and every six months thereafter.

2001 CFSR Summary:

The 2001 CFSR rated this item as a strength. The Statewide Assessment noted that reviews conducted in several upstate counties found that foster parents attended 63% of SPRs. Data from a review in NYC in 2000 found that 26% of the foster parents attended the SPR and 33% received written notice two weeks prior to the review.

Factors Affecting Performance:

The Permanency Laws of 2005, and enhancements to the laws since 2005, are identified as supportive of notice requirements. A series of templates have been developed by OCFS and the Office of Court Administration, with input from a number of local districts. These templates are for the required Permanency Hearing Report to be used statewide by local district and voluntary agency child welfare caseworkers. These templates have been promulgated as OCA forms.

ACS has implemented some requirements to its process to assure required notices have been sent. Along with the Permanency Hearing Report, case planners send a notification grid to the ACS attorney that lists all the parties involved, including birth parents and caregivers, and addresses. The ACS permanency office in each court sends out the notification two weeks before the Hearing.

Several focus groups identified the participation of foster, birth, pre-adoptive parents, and youth as a challenge for those populations. Some participants in the foster parents' focus group covering two upstate counties cited an uncertainty about participating in Permanency Hearings. They indicated that they would like help in learning how to speak up in court; they also indicated that they dislike sitting and waiting for hours only to learn that decisions were made in conference prior to the court hearing. Another foster and adoptive parents' focus group discussed bringing photos of their foster child(ren) to the court hearings to show attendees at the hearing who the child is.

CASAs have been identified as a way to engage parents in the process and to keep required parties informed of court dates and requirements.



Quality Assurance System

Item 30: Standards Ensuring Quality Services.

Has the State developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children?

System Description:

NYS has developed and implemented a comprehensive array of standards to provide children in foster care with safe, quality services. The standards for foster boarding homes and congregate care facilities comply with federal laws. The OCFS Internet site provides easy access to and continually updated manuals, administrative directives, and related practice standards. The Internet site also provides links to various federal and state web sites that contain information on evidence-based practices and programs.

NYS provides protections for children in foster homes by requiring criminal history record checks on prospective foster and adoptive parents as well as all members of the household over the age of 18. When criminal history is found, a safety assessment must be performed to determine whether children can be safely placed in the home. Certain criminal convictions relating to prospective foster and adoptive parents require presumptive disqualification. In addition, checks are made both in-state and out-of-state for history of child abuse and maltreatment. The latter check, as required by the federal Adam Walsh Protection Act, is requested of states in which the prospective foster or adoptive parent or adult household members have lived within the five years preceding application. Home studies of the foster care parents require an evaluation of character, ability, and motivation. In addition, foster parents are required to undergo medical exams, supply references and attend training prior to the placement of foster children in the home.

Separate standards exist for each type of congregate care facility. All facilities must be inspected and meet the standards prior to the issuance of an operating certificate. Facilities are re-inspected on an on-going basis. The inspections are conducted by OCFS Regional Office staff and include: physical plant, sanitation, food, fire protection, employee qualifications, employee health, and checks against the statewide database on child abuse and maltreatment. Other standards that relate to the children in the care of these facilities cover policies on health and medical services, nutrition, restraint and isolation, privacy, and recreation. A review of a small sample of FASPs and child interviews are conducted to assess if children in the sample are receiving recommended and needed services.

OCFS conducts investigations of reports of abuse or maltreatment of children placed in congregate care settings. For all children in foster care, whether foster boarding home or congregate care, standards specifically provide for caseworker contacts with children, safety, risk, child, and family assessments, the provision of services, and documentation.

2001 CFSR Summary:

The 2001 CFSR rated this item as a strength. The Statewide Assessment described the policy background and stressed the comprehensive nature of the standards contained in the New York Codes, Rules, and Regulations (18 NYCRR). It also discussed the activities of OCFS' Monitoring Unit and the variety of on-site case reviews that are conducted on a periodic basis throughout the State. The 2001 CFSR final report noted that Quality Assurance standards are in place and are monitored by state and local districts. The report cited performance contracting as another method for developing quality services that protect the safety and health of children in foster care. The report acknowledged that OCFS Regional Offices are very involved with local districts and voluntary agencies in on-going monitoring and in quality assurance training activities related to State standards and program and case outcomes. The CFSR case reviewers found that staff understood the standards for timeliness of investigations, contacts with children and parents, timeframes for developing and revising service plans, and the time to achieve adoption milestones.

Factors Affecting Performance:

NYS has put into place standards to provide the structure necessary for children in foster care to be provided with an appropriate and timely permanency plan and quality services that protect their health and safety. Those laws, regulations and policies are aligned and compliant with federal requirements. OCFS administers, oversees, and monitors licensing, safety, and quality assurance activities. The monitoring of foster care homes and congregate care facilities for compliance in licensing and safety is discussed in Systemic Factor: Foster and Adoptive Home Licensing, Approval, and Recruitment.

OCFS continues to strengthen the standards and supports for the health and safety of children in foster care. In 2006, OCFS published *Working Together- Health Services for Children in Foster Care*, a comprehensive manual that describes the expectations for initial and on-going evaluation of the health of children in foster care. Health services training has also been provided on a regular basis for local districts and agencies. The CONNECTIONS Case Management system was updated to include health and education modules, in addition to the components that assess the safety of children in foster care.

Given the key role that foster parents have in supporting the health and safety of children in their care, a workgroup was developed as part of New York's first PIP to examine the supports in place for foster parents. This workgroup conducted a survey of current and former foster parents about their needs, issued a statewide Informational Letter to districts and agencies about the needs of foster parents (05-OCFS-INF-03 Supporting the Role of Foster Parents), updated the Foster Parent Manual, and helped to develop a youth handbook for children in foster care that describes their rights and responsibilities.

OCFS Commissioner Carrión recently established and greatly expanded – from one staff person to ten - the OCFS Office of the Ombudsman. Staffed primarily by attorneys, this office has a regular presence in OCFS facilities and voluntary agencies where youth in OCFS custody are placed. When this office receives complaints or becomes aware of issues with children in the custody of local social services commissioners, appropriate referrals are made to resolve the situation.

Improvements have been made in data availability and its application to tracking and monitoring incidences of restraint that occur in residential care facilities (a Round 1 PIP improvement initiative). The ARTS (Automated Restraint Tracking System) has been implemented statewide to store and aggregate data about physical restraints of youth. This data is used to provide feedback to agencies about their performance, identify trends, etc. In addition to tracking restraints, there is cross-systems work related to the circumstances for restraint and the type of restraint. In September 2007, the Committee on Restraint and Crisis Intervention Techniques distributed its final report to the Governor and Legislature, titled Behavior Support and Management: Coordinated Standards for Children's Systems of Care. The report outlines a comprehensive, coordinated set of standards recommended for use in children's service settings licensed by OCFS, OMH, OMRDD, and SED. It underscored the importance of a comprehensive approach to behavior support and management, focusing primarily on prevention and early intervention strategies. The standards included in the report were intended to protect the physical, psychological and medical well-being of children served and the safety of staff while also emphasizing an individualized, holistic approach to care.²²

Through the 2005 Permanency Law, the status of certain children in foster care is judicially reviewed at eight months from removal and through a semi-annual judicial review of their safety, well-being, and permanency status thereafter. Permanency Hearing Reports are developed by the districts and filed with the court after required consultation with children, families, and others. Copies of these reports are provided to parents, youth, foster parents, and others.

The NYS Child Protective Services (CPS) Program Manual was recently updated by OCFS and placed on OCFS' intranet site to increase accessibility. The manual specifies statutes, regulations, and policy guidelines for CPS caseworkers including, but not limited to the investigation, the provision of services to families, and necessary court activities.

The OCFS Eligibility Manual for Child Welfare Programs is another valuable resource that details the eligibility standards and policies for programs that provide services (i.e. Title IV-E foster care and adoption assistance, Medicaid for foster and adopted children, TANF/EAF, and Title XX Below 200% of Poverty). Consistently keeping manuals updated remains a challenge for OCFS.

OCFS continues to engage in collaborative efforts and programs intended to maintain and increase the quality of services delivered to children in order to protect their health and safety. OCFS has been working closely with stakeholders in the field to examine congregate foster care. It has become clear that various sections of existing regulations need to be updated to include emerging best practice in the field of congregate care. The following sections of regulation are in the process of significant revision:

- 18 NYCRR Section 441.17, Restraint of Children in Care, is proposed to be replaced with a new Section 441.17 to be entitled Behavior Management, Crisis Prevention and Intervention

²² New York State. Committee on Restraint and Crisis Intervention Techniques. Behavior Support and Management: Coordinated Standards for Children's Systems of Care. Final Report to the Governor and Legislature. Sept, 2007: 1.

- Proposed revisions will focus on behavior management and crisis prevention, strengthen training expectations, notification and consent clauses for children and families, reporting expectations, and continuous quality improvement standards.
- Proposed revisions will be consistent with, and incorporate, the recommendations generated from the Final Report to the Governor and Legislature delivered in September 2007 from the Committee on Restraint and Crisis Intervention Techniques on Behavior Support & Management: Coordinated Standards for Children's Systems of Care.
- 18 NYCRR Section 431.8, "Procedures in cases of children absent without consent from foster care placement", is proposed to be replaced with a new section 431.8, "Procedures in cases of children absent without consent from the child's placement".
 - These proposed revisions bring greater clarity to the protocols to be followed when a child is absent from his or her placement, and also provide a framework for interaction with other systems, including law enforcement and the education system.



Item 31: Quality Assurance System.

Is the State operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, evaluates the quality of services, identifies the strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented?

System Description:

NYS operates an identifiable Quality Assurance System operated by the Program Monitoring Unit in the Office of Regional Operations. The Regional Offices monitor the local districts and voluntary agencies that provide child welfare services. The Data Warehouse and computerized systems also provide performance monitoring data for state, local district, and voluntary agency staff. The Program Monitoring Unit supports the Regional Offices in conducting case record reviews in Child Protective Services and in foster care. The Regional Offices conduct the licensing and monitoring activities described in Item 30 and conduct Voluntary Agency Reviews as well as support program improvement by numerous training and technical assistance activities.

ACS has quality assurance systems in place to monitor and evaluate the quality of services, including efforts to achieve permanency, medical and mental health services to children in foster care, service to families receiving preventive services, and the quality of child protection investigations.

2001 CFSR Summary:

The 2001 CFSR rated this item as a strength. The Statewide Assessment described, in detail, the primary quality assurance reviews and cited related initiatives, such as special reviews in NYC; a review by the Office of the Inspector General; local initiatives; and, aggregate and case specific data tracking systems. The CFSR final report for this item, as with Item 30, stated that case reviews and stakeholder interviews indicated the following: that staff knew the standards for timeliness of investigations, contacts with children and parents, timeframes for developing and revising service plans, and the timeframes for achieving adoption milestones. The final report noted that stakeholders and local districts are very aware of state level quality assurance activities such as: foster care and child protective services reviews; Service Plan Reviews (requiring an independent reviewer); and, supervisory conferences. During the review, attorneys in NYC noted that ACS has held contract agencies to performance agreements and that several contracts were revoked because the agencies were making decisions contrary to the best interest of children.

Factors Affecting Performance:

NYS' On-going Monitoring and Assessment (OMA) tool and the OCFS Safety and Permanency Assessments (SPA) instrument are continuously improved. Instruments and Review Guidelines are updated to reflect changes in the standards (such as the new standards for a Permanency Hearing Report to be submitted to family court, as defined by the Permanency Laws of 2005). Additionally, the SPA and OMA instruments have been revised so that they provide more useful feedback to the districts regarding the specific deficiencies found. The Adolescent Services Workgroup developed an instrument for assessing the quality of services to prepare youth for life after foster care and have conducted reviews in select districts.

OCFS conducts OMA case reviews of CPS investigations for all local districts on a prescribed four-year cycle; reviews can be conducted more frequently if a greater need is identified. Cases are randomly selected from the universe of all closed CPS investigations for a specified time. Regional Office staff collaborate with both Home Office and local district staff to conduct a review of the required activities during the course of a child protective investigation, including assessment of immediate danger, initial safety and safety at investigation conclusion, safety interventions, adequacy of the investigation, determination decision making, service provision, legal intervention, child removal, case closing decision making, and risk of future abuse or maltreatment. Upon completion of the review, a final report is provided to each local district that identifies strengths and areas of concern as well as required and recommended actions, if necessary. The local district, if necessary, develops a corrective action plan that identifies the activities the local district will undertake to be responsive to the recommendations in the final report. During 2007, OCFS conducted OMAs in twenty (20) local districts; a total of 286 cases were reviewed. OCFS Regional Offices provide oversight of the local districts corrective action plans.

OCFS conducts SPA case reviews of children in foster care for local districts on a scheduled four-year cycle; reviews can be conducted more frequently if a greater need is identified. Random samples are drawn from the total population of children in foster care in the identified district, and the case is reviewed for a one-year service period to assess safety and risk, appropriateness of the permanency goal and activities to support progress towards the goal,

frequency of casework contacts and family visitation, appropriate service provision to the child, discharge resource and foster parents, service planning and review of service plan, efforts to finalize adoption, and documentation of supervisory oversight. A final report is provided to each local district upon completion of the review that identifies strengths and areas of concern as well as required and recommended actions, if necessary. The local district, if necessary, develops a corrective action plan that identifies the activities the local district will undertake to be responsive to the recommendations in the final report. During 2007, OCFS conducted SPAs in 11 local districts; a total of 230 cases were reviewed. OCFS Regional Offices provide oversight of the local districts corrective action plans.

OCFS is responsible for Title IV-E activities, and for preparation of Title IV-E Foster Care Eligibility Reviews. Communications between ACF and OCFS regarding Title IV-E regulations, and the impact on claiming Title IV-E funds (adoption or foster care), are disseminated to local districts through the OCFS Regional Offices. NYS was found to be in substantial compliance with the Title IV-E Foster Care Eligibility Review of 2006; this success was due in large part to New York's Title IV-E workgroup and strong collaboration with OCA and supporting work in districts. Quality assurance efforts needed to sustain compliance have included deliverables such as an updated Title IV-E eligibility manual, the production and distribution of a DVD training titled "*Sustaining Progress, Sustaining Success: Compliance with Title IV-E Court Related and Non Court Related Eligibility Requirements.*" These training resources are widely distributed throughout OCFS, local districts, and family court jurisdictions.

CONNECTIONS, although criticized by many as cumbersome and time consuming to use, has also been cited as contributing to the strength of NYS' QA system. CONNECTIONS provides increased opportunities to monitor critical aspects of service delivery (such as, coming due and overdue investigations and FASP reports) through caseworker level reports that are available directly in the Application and Management Reports available from the Data Warehouse.

The Management Reports provide information to local districts that can assist with the management of practice. Through the development of Management Reports, OCFS has made great strides in using QA to drive continuous quality improvement. OCFS uses information gleaned from QA to strengthen areas in need of improvement and has engaged local districts to use QA data to assess performance and target areas in need of improvement.

However, in spite of the availability and accessibility of data for quality improvement, local districts continue to struggle with fully integrating the information into agency operations and practice. Focus groups have reported that current QA data is not always presented in ways applicable to the workers that use them. There is a virtual flood of data that needs to be presented better to front-line and supervisory staff so they can translate the "big picture" measures into specific actions that they can take to improve practice and results. Recommendations include:

- Develop a process for getting data to front-line staff in a way that caseworkers can understand and act on it in their daily practices;

- Further refinement of data measures so that they are available in a form that better assesses the quality of practice rather than those practice dimensions that are easily measured (i.e. timeliness or the number of contacts in a month).

OCFS will continue to identify opportunities to target the quantitative information and prepare it in a manner that is more directly applicable to practice change and develop a process of inquiry that provides tools for linking broader system performance data to specific case data in order to better understand and learn from both positive and negative child and family outcomes (translating quantitative data into qualitative data that can be used for individual case action planning).

NYS promotes many initiatives to respond to the divergence of needs in districts and agencies and in response to legislative directives and appropriations. While this is a strength, it is also a challenge – referred to in a focus group as “initiative overload.” “Initiative overload” creates a difficult environment for districts and agencies to focus on and manage real practice change. Focus groups state that OCFS should better prioritize what it wants districts to pay attention to so as to focus QA improvement efforts more strategically and consistently.

ACS has put several QA processes in place and has continuously worked with OCFS and the contract agencies to make more QA data available to enable quality oversight. Introduced in 2006, IOC is ACS’ strategy for strengthening foster care preventive services to enhance child safety and stability and expedite the progress toward permanency. This redesign of the preventive and foster care system in NYC will place ACS in more of a monitoring role, rather than providing direct service.

- Monitoring efforts include, but are not limited to:
 - Foster care and Preventive Services: ACS’ Division of Quality Assurance’s routine monitoring consists of site visits, case reviews and interviews conducted by the Agency Program Assistance (APA) department. Also, each voluntary agency has an assigned APA staff person who is familiar with the voluntary agency’s operations and programs. When necessary, and/or in response to concerns received by ACS, APA conducts an on-the-spot assessment of an entire agency or an agency’s program performance in response to concerns received by ACS.
 - EQUIP-Foster Care and Preventive Services: ACS’ Policy and Planning Division is responsible for implementing ACS’ annual evaluation of foster care programs that are under contract with ACS. EQUIP* consists of outcomes and timeliness data, as well as data on the quality of services gathered from case reviews. Voluntary agencies are ranked in the order of their performance scores. The decision to continue an agency’s contract may depend on the agency’s EQUIP scores and other monitoring results.

*EQUIP has recently been converted to the Provider Agency Management System (PAMS). PAMS is a comprehensive performance measurement system designed to evaluate the quality of practice and services provided by foster care programs and will soon be implemented for preventive programs as well. The PAMS review consists of case record reviews, observations of foster boarding homes, congregate care facilities, and interviews with foster parents, child care workers, and Supervised Independent

Living Program (SILP) youth. PAMS serves as a comprehensive source of performance information for evaluation, scoring, and quality improvement. PAMS results are factored into ACS' SCORECARD.

SCORECARD: ACS' SCORECARD is a user friendly quality improvement tool consisting of several key performance indicators which were selected to provide a more holistic picture of an agency's performance, identifying areas of strength and weakness in provider agency performance, which can point to strategies for improving performance and/or technical assistance needs of the agency or program.

- Child Protection:
 - Childstat: Childstat is an ACS accountability system of review of the quality of child protective investigations. The format of Childstat consists of a weekly meeting (attended by the Commissioner, Deputy Commissioner and Associate Commissioner of the Division of Child Protection, and up to two Borough Assistant Commissioners and their mid-managers) to review borough and zone specific performance data and case practice evident in cases still under investigation in that particular borough and zone.
 - Case reviews: The ACS Division of Quality Assurance conducts routine case reviews of 100 completed investigations per borough and provides the results of these reviews to the senior management in the Division of Child Protection. QA also reviews a random sample of cases in the Family Preservation Program and Family Service Units within the Division of Child Protection.



Staff and Provider Training

Item 32: Initial Staff Training.

Is the State operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services?

Item 33: Ongoing Staff Training.

Does the State provide for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP?

System Description:

OCFS provides training annually to over 190,000 human service professionals throughout NYS. This training includes both juvenile justice training programs and a comprehensive child welfare training system. The mission of OCFS' training program is to develop training and professional development strategies to meet the needs of the human service system using a wide range of approaches, including direct training, contract services, and technologies, such as distance learning. OCFS provides training and technical assistance to OCFS staff in Home and Regional Offices; staff in all local districts, including NYC; staff in child welfare voluntary agencies; foster and adoptive parents; and group and family day care providers. In addition, OCFS provides training for mandated reporters throughout the State.

NYS mandates training for CPS staff. Both line staff and supervisors are required to satisfactorily complete the NYS approved program for CPS caseworkers or CPS supervisors, and meet all training and annual in-service training requirements. Training is also mandated for residential foster care and child care workers to enable them to create a safe environment for the children and youth in care. OCFS provides a comprehensive system of initial, specialty, and advanced in-service training that allows staff to meet the mandates.

OCFS provides resources to train mandated reporters to identify and report instances of suspected child abuse and/or neglect. Among the topics addressed in the training are the role and responsibility of mandated reporters, procedures to complete and submit a report of child abuse/neglect to NYS' Statewide Central Register (SCR), and how to recognize the indicators of abuse and neglect. OCFS also provides a train-the-trainer to prepare and equip trainers to deliver the mandated reporter training program.

The cornerstone of OCFS' child welfare training program is The Child Welfare/Child Protective Services Outcome Based Training (OBT) System. This comprehensive training is designed to provide caseworkers and supervisors with the abilities needed to achieve safety, permanency and well-being for the families they serve. Each component includes practice demonstrations and multiple opportunities designed to build practice skills. This includes skills-based simulations, role playing, and on-the-job training. OCFS maintains a standard pre-registration process through its Statewide Training and Registration System (STARS). STARS identifies training

opportunities, collects attendance figures and collects the standard evaluation results. STARS also combines personnel information, which allows OCFS and the local districts to track the participation of new caseworkers in mandated training.

Additional, on-going training opportunities developed and implemented by OCFS are intended to positively impact child safety, permanency and well-being.

- To promote the safety and well being of youth in residential care, OCFS developed a training project to enable new and experienced child care staff in residential child care agencies to implement a trauma sensitive model of care known as the Sanctuary Model.
- To respond to the need to reduce repeat maltreatment and to support the ability of caseworkers to conduct accurate safety and risk assessments, OCFS developed and/or provided a number of training opportunities. OCFS provided regional training on consolidating reports of child abuse/maltreatment; developed and provided a training program to teach new and experienced CPS caseworkers and supervisors how to apply the principles of critical thinking to their CPS practice to improve decision making; and developed and provided safety and risk refresher training. OCFS provided training on access to investigation records for voluntary agencies that provide services to children and their families. To support the ability of new and experienced caseworkers to conduct accurate safety and risk assessments, OCFS enhanced its safety assessment decision making protocol and its RAP and trained caseworkers and supervisors on its use. OCFS provided training on the updated safety assessment and the new Risk Assessment Profile, as well as the Family Strengths, Needs and Risk Assessment that is supported in CONNECTIONS.
- To support the well-being of youth in care, OCFS supports and sponsors the YIP Team, which is comprised of current and former foster youth and their adult mentors. Other ongoing training, such as casework practice supports, include: telephone consultation “Coaching to Connect,” supervisory practice guides, research on turnover, development of an integrated core curriculum for NYC ACS staff and training to support IOC.
- To strengthen the interface between the courts and key stakeholders in the child welfare system, OCFS co-sponsors the Sharing Success conference, which builds collaborative alliances among the child welfare system, the courts, and other service providers to work toward the outcome of timely permanency for youth in care. Established in 2003, the conference is sponsored by OCFS and OCA. The 2007 conference focused attention on building collaboration among key child welfare stakeholders to improve outcomes for families affected by substance abuse and included OASAS as a co-sponsor.

In addition, OCFS and OCA partnered to plan and deliver training to court personnel on Title IV-E requirements in preparation for NYS’ Title IV-E review in 2006.

OCFS supports on-going training projects designed to meet individualized local district performance improvement initiatives. Training resources are used to provide on-site training and/or consultant services and technical assistance. Examples of the training, consultation, and/or technical assistance provided include:

- Solution-Focused practice training and coaching
- Succession Planning consultation
- Consultation on transfer of learning
- Service Plan Review training

- Adolescent Life Skills training
- Locating and Engaging Absent Fathers training
- Sexual Abuse Interviewing training
- Effective Interviewing of Children training
- Recruiting Homes for Teens training
- Domestic Violence training
- Preparing/presenting cases for family court proceedings consultation and technical assistance training
- Overcoming barriers to termination of parental rights training
- The Indian Child Welfare Act: What Caseworkers Need to Know training
- Understanding and Working with Families Blended Through Adoption training
- CPS Access Law training
- Working with Lesbian, Gay, Bisexual, Transgendered and Questioning Youth in Care training

Since the 2001 Statewide Assessment, OCFS has developed a number of training supports. In recognition of the key role of supervisors in building and sustaining best child welfare practice, OCFS supports child welfare supervisors by providing the following training for new supervisors:

- Module I of the Supervisory Core training program, Child Welfare/Child Protective Services Supervisory Core: Foundations, is designed to build the knowledge and skills that all new supervisors need to coach, model and monitor child welfare casework.
- In addition to taking Module I, Child Protective Services supervisors are mandated to take Module II-A of the Supervisory training program. Module II-A is designed to build the skills for CPS supervisors need to coach, model and monitor the CPS Response.

In addition to foundation level training for new supervisors, OCFS provides the following support for new and experienced supervisors:

- A DVD and training program that builds supervisors' ability to implement the Indian Child Welfare Act;
- A guide to support supervisors' ability to coach, model, and monitor practice (The Supervisor's Guide to Assessing Practice);
- A guide to build supervisors' ability to coach, model, implement the practice strategy of concurrent planning (the Supervisors' Guide to Implementing Concurrent Planning);
- A one-day skills clinic to teach supervisors how to build and maintain engagement with their workers. As a result of the training, supervisors learn how to model and coach the skills that workers need to engage children and their families;
- A training forum for local district Directors of Services to build their leadership skills to create and sustain performance improvement. This forum has now become an annual training opportunity for Directors of Services;

- A training program to teach new and experienced CPS caseworkers and supervisors how to apply the principles of critical thinking to their CPS practice to improve decision making.

In order to make substantial changes and improvements to the way the child welfare workforce is developed and supported, OCFS developed a Teaming Project Model Program in 2007 in six pilot districts. In the Teaming Model (adapted from an award winning approach by the State of Massachusetts) individual casework is restructured to team work. The organizational culture of individual responsibility for all aspects of family needs, casework tasks and decisions is transformed to that of the team's responsibility. The supervisor is integral to this shift in behavior and culture and must model strong leadership and promote, coach, and monitor the accomplishment of CPS and child welfare casework. Training supports the pilot districts in team building, facilitation skills, group supervision, and solution focused practice. The learning collaborative extends across state lines as managers, supervisors and caseworkers from Massachusetts have come to New York to share their experiences and knowledge with New York Teaming staff. (Additional information is available on the Teaming Model in Section I.)

NYS has shaped its annual training plan to support the areas of practice identified as needing of improvement. Continued engagement of stakeholders in the development of the training plan and in shaping the training to support local and pilot programs has been successful in meeting needs. Foundation level training and advanced training is assessed frequently to confirm that it responds to identified local needs, is informed by national trends in practice improvement, and is adapted to changing technology.

The assessment of training needs and the development of the annual training plan is a partnership between the OCFS Bureau of Training (BT), OCFS/CWCS, and the OCFS Office of Strategic Planning and Policy Development (SPPD). For example, on-going discussions with the Native American Tribes focus on building alliances and collaboration on training, as well as needs assessments. As new courses are being developed, BT and CWCS conduct focus groups and reach out to local districts for input and direction. BT meets regularly with the NYS Staff Development Advisory Committee to discuss training needs and concerns. OCFS/BT and OCFS/CWCS maintain regular contact with local districts and agencies to identify needs and emerging practice issues that will need training support. Findings from reviews of district and agency cases conducted by the OCFS/CWCS are used to provide individual district and agency training and technical assistance, as well as inform the annual training plan. OCFS/BT staff convenes advisory groups as needed to discuss training needs and concerns. OCFS/BT and OCFS/CWCS also conduct field monitoring to evaluate new and current course offerings.

Local districts are also asked to review training material prior to new pilots to determine that the material meets their needs, and are accurate and appropriate.

OCFS, through its contract with the CDHS at Buffalo State College, supported ACS' implementation of its own outcome-based training program for all new CPS caseworkers and supervisors. In 2006, OCFS assisted the ACS James A. Satterwhite training academy to develop and implement an accelerated Core for new CPS caseworkers that combined classroom training

with follow-up training in the ACS field- based training units to enable new CPS caseworkers to begin field work sooner and to facilitate the transfer of learning.

In 2007, ACS, with support from OCFS, redesigned its approach to casework training requiring a new training program, to be known as the Integrated Core, which combines the initial Core training and the follow-up CPS specialty training. OCFS is providing resources to develop the curriculum, and a pilot delivery is expected to conclude in March 2008.

On-going partnership with ACS has resulted in the strengthening of its Training Academy to provide training in safety and risk and to meet the continuing challenges of turnover and expansion of the CPS workforce.

OCFS works directly with New York's Council on Family and Child Care Agencies (COFCCA) to assess the training needs of caseworkers in voluntary agencies statewide through formal written needs assessments. As a result, initial competency based training for voluntary agency caseworkers are provided by COFCCA in downstate agencies. The COFCCA training consortium of voluntary agencies also assesses, develops and shares training resources. COFCCA also provides training to build the capacity of foster care and preventive agency child welfare caseworkers to assume case management responsibilities.

2001 CFSR Summary

This systemic factor was rated as a strength. The Common Core training for new workers and MAPP training for foster parents were reported as positive factors.

Factors Affecting Performance:

Since the 2001 CFSR, OCFS, with feedback from local districts, revised its supervisory core training including supervisory foundations training and CPS supervisory specialty training. OCFS also developed new training including: the Family Preservation/Reunification specialty, the Adoption specialty, Best Practices in Achieving Adoption through Surrenders and Termination of Parental Rights, and a Family Engagement Specialists training project.

In recent years, local districts have had increasing difficulties attracting and retaining qualified child welfare caseworkers. The New York State Social Work Education Consortium was established as a formal partnership between the OCFS BT and the New York State Dean's Association, the social work education community, and local districts to address this issue. Currently, seven active regional groups with representatives from local districts and social work education programs are implementing programs designed to professionalize and stabilize the work force within each region. The regional structure allows for the design of programs responsive to the unique needs of a region, thereby targeting resources in a highly effective way. Activities include tuition support for child welfare workers to attend graduate and undergraduate social work courses and specialized social work training workshops. The program also includes field placements in public sector child welfare programs for students interested in careers in child welfare.

The NYS Legislature appropriated \$5 million dollars in each of the past two state fiscal years to support the implementation of the mandated annual CPS in-service and supervisory training.

Also, additional funds were appropriated to improve staffing in CPS. This has resulted in the hiring of additional CPS staff by the local districts.

In addition, the program supports distance education initiatives that facilitate access to courses for working adults and trainees from rural districts and collaboration between OCFS Home and Regional Offices and local districts. These initiatives increase the availability of education and in-service programs on specific casework and supervisory practice topics identified in the 2006 legislation for CPS workers and supervisors.

Depending upon local budgetary concerns, local districts may place travel restrictions on their staff preventing travel outside of the county for training. By using online courses and web-based interfacing, OCFS currently provides some training that overcomes this barrier, and OCFS has plans to integrate more technology into its programs for new caseworkers.

Through online courses and web-based interfacing, OCFS has expanded training opportunities to staff, thereby reducing travel costs to attend training, reducing the time staff need to be out of the office for training, reduced delivery costs, and providing programs that effectively provide knowledge to trainees. Continued use of a variety of distance learning technologies facilitates participation in training that would otherwise be denied. The use of iLinc technologies, web based training applications, and teleconferences enable staff to remain at their worksites, thus reducing travel expenses and time away from family. OCFS is exploring the use of the 'Smart Classroom'. A pilot is scheduled for the spring of 2008.

Stakeholders report that access to OCFS sponsored training for private voluntary agency staff is a barrier. They tend not to use the OCFS internet where training announcements are posted and therefore, may be unaware of what training is available. Despite efforts, OCFS has been unable to develop techniques to better inform agencies of available training and to develop methods to assess their training needs.

Voluntary Agency participation in Core training is restricted due to several factors: The FFP funding level for foster care casework staff, as opposed to direct care staff, the 24/7 nature of agency operations that makes it difficult to release staff for training, and mandated training requirements for CPS that gives new CPS hires priority in securing a slot in Core training. The funding issues are driven in part by the formula used by the state and federal government to provide training funds (Random Moment Survey). The Random Moment Survey data is heavily informed by NYC ACS staff who are primarily CPS staff and foster care administrative staff, and often represents administrative functions that are not allowable under Title IV-E, thereby causing a reduction in NYS' Title IV-E allocation. Title IV-E funding has been declining each year and this restricts OCFS' ability to meet all of the training needs of voluntary agency staff.

Another barrier stakeholders voiced about the current training system for new caseworkers is the lack of opportunity to practice new skills once a caseworker returns to his/her home district or agency. Districts and agencies report difficulty in supporting this transfer of learning, given the demands on supervisors and the individual culture and capacity of each district and agency. Some large districts have Staff Development Coordinators that often facilitate in house training,

coaching, and/or mentoring programs; smaller districts may not. Transfer of learning strategies that can be supported by districts and agencies need to be developed statewide.

The SAT Staff and Provider Training Committee, convened in preparation for the 2008 CFSR, noted that the OCFS child welfare training is an extremely comprehensive system of knowledge and skills-based training.



Item 34: Foster and Adoptive Parent Training.

Does the State provide training for current or prospective foster parents, adoptive parents, and staff of State-licensed or State-approved facilities that care for children receiving foster care or adoption assistance under title IV-E? Does the training address the skills and knowledge base that they need to carry out their duties with regard to foster and adopted children?

Policy Description:

OCFS requires that certified and approved foster parents and prospective foster/adoptive parents receive training that will prepare them to meet the needs of the children in their care. The training is delivered directly by university training staff under the direction of OCFS or by local district or agency trainers. The training program must be approved by OCFS and include information on agency policy and practice, child development, separation and attachment issues, behavior management, safety, and the roles and responsibilities of foster parents as well as a number of other areas.

2001 CFSR Summary:

Foster/adoptive parent training was identified as an area of strength. The Statewide Assessment included descriptions of training initiatives such as the Model Approaches to Partnerships in Parenting (MAPP) training for prospective foster/adoptive parents, independent living training and technical assistance for child welfare staff and foster parents working with youth toward the outcome of self sufficiency and Therapeutic Crisis Intervention training for residential staff of child care agencies.

The 2001 CFSR final report noted that the State's training initiatives are strong. In particular, the CFSR final report identified the Outcome Based Training System and the Group Preparation and Selection/Model Approaches to Partnerships in Parenting (GPS/MAPP) training for foster and adoptive parents as a significant strength.

The final report noted that stakeholders identified specific ways in which training could be improved including: training that clarifies the roles of foster parents so that they can be more effective; scheduling training and technical assistance to accommodate foster parents' schedules; training to build the capacity of foster parents to work as partners with birth parents. Stakeholders also noted that agencies need to provide transportation to enable foster parents to attend training, especially in rural areas. In addition, the report noted that some stakeholders

requested training in the area of cultural competence to support their ability to meet the needs of children from diverse ethnic and racial backgrounds. Finally, stakeholders noted that training was conducted in Spanish and identified this as a strength.

Factors Affecting Performance:

OCFS has increased foster/adoptive parent access to training via iLinc technology. iLinc enables foster/adoptive parents to access training from their personal computers.

OCFS revised the pre-service foster/adoptive parent preparation and selection program (GPS₂/MAPP) to support concurrent planning. OCFS revised the in-service training curriculum, COMPASS, to reflect revisions to the pre-service foster/adoptive parent selection and preparation program. OCFS translated the foundation level and in service training curricula into Spanish. Additionally, foster/adoptive parent resource materials have been translated into Spanish, Russian, Chinese, and other languages representative of NYS diverse populations. NYS/OCFS has updated and translated into Spanish its Foster Parent Manual and the Foster/Adoptive Parent's Guide to Adoption. Finally, OCFS provides for the reimbursement of child care and travel expenses to facilitate foster/adoptive parent participation in training. OCFS collaborates with ACS to provide training for foster and adoptive parents of special population children.

All of the OCFS training contracts contain provisions around registration, attendance, performance, and quality standards. There is a standard evaluation required for every training. A pre/post test and/or skills demonstration is required for every training that is provided three times or more. OCFS requires a standard pre-registration process through STARS for foster/adoptive parents, trainers, local districts, and voluntary agency staff. STARS identifies training opportunities, collects attendance figures and the standard evaluation results. In addition to STARS, OCFS has an electronic system that provides real time data reporting of attendance and evaluation results. Evaluation results of less than 3.5 of a total rating of 5 are flagged so that OCFS can determine whether the training content or delivery needs to be corrected. Training providers contracted by OCFS provide quarterly reports that identify the location of the training, the agencies or districts that participated, the number of foster/adoptive parents trained, and the topics and issues that were the focus of the training and/or technical assistance.

Local district and voluntary agency trainers deliver the Group Preparation and Selection/Model Approach to Partnerships in Parenting program (GPS₂/MAPP) for foster/adoptive parent preparation and training. OCFS provides ongoing technical assistance and coaching to agency and district training staff to enable them to deliver the programs.

The primary vehicle for in-service training is the COMPASS training curriculum. COMPASS is composed of a series of experiential trainings that are delivered directly or by district and/or voluntary agency trainers who participated in the COMPASS Train-the-Trainer program. Some offerings of COMPASS are also offered via iLinc (iLinc is synchronous or asynchronous distance learning technology that can be easily accessed by home computer.) Foster/Adoptive parents identified lack of transportation and child care as a barrier to participating in training. Offering training via iLinc enables foster/adoptive parents to access training from their personal computers.

In addition to providing regional and on-site training and technical assistance, OCFS supports the NYS Foster and Adoptive Parent Association's annual training conference and the NY Citizens' Coalition for Children, Inc.'s annual foster/adoptive parent training conference via OCFS training resources.

Training and technical assistance projects sponsored by OCFS include, but are not limited to, the following:

- GPS₂/MAPP: This training provides a structured format through which local districts and voluntary agencies can prepare prospective foster/adoptive families and agencies to work as team members in permanency planning. A key component of this training is that certified/approved foster/adoptive parents participate as trainers/leaders.
- Group Preparation and Selection (GPS) Certification Training: The nine-day GPS training program prepares local district and voluntary agency caseworkers and foster parents to deliver the 30 hour GPS training program for their agencies.
- Agency Preparation and Assessment Training: Agency Preparation and Assessments provide training to local district and voluntary agency administrators, Directors of Services and supervisors on major concepts in MAPP, outcomes derived from the MAPP program and resources needed to support the MAPP program in their agencies.
- Mini-MAPP Training: Mini-MAPP training prepares GPS certified trainers to provide an overview of the basic concepts in the MAPP training program to all other child welfare staff and foster/adoptive parents within the agency.
- Deciding Together Training: Deciding together training provides training on preparing families to foster or adopt on an individual basis, rather than through the group process.
- Caring for Our Own: a five-day train-the-trainer program that prepares relatives to become relative foster parents.
- GPS Follow-Up Training: This technical assistance is designed to meet individual agency training needs related to all of the MAPP components and activities.
- MAPP Needs Assessment: A needs assessment to determine the status of MAPP implementation in agencies. The needs assessment provides information on issues agencies have in the following areas: a) status of MAPP implementation; b) areas of need in MAPP implementation; and c) assistance agencies feel would help them to maintain and enhance their delivery of MAPP.
- Annual MAPP Leader Seminar: This training activity will be held once in upstate New York for MAPP certified trainers. The seminar will consist of workshops, lectures, and large group activities on selected topics.
- Foster Parent Regional Seminars: Provides training on special topics for foster parents in a seminar setting. Training topics and activities are developed by MAPP trainers.
- Therapeutic Foster Boarding Home (TFBH) Training: This program prepares agency staff to implement TFBH programs. Staff and foster/adoptive parents learn how to provide quality care to children with special program needs in the least restrictive and family-like environment and to prepare children for return home or adoption.
- COMPASS training and technical assistance as noted above.

- On site technical assistance on special topics (e.g. fostering children with developmental disabilities or fostering children who are lesbian, gay, transgender, bisexual, and questioning) delivered on site.
- Foster the Child Who Has Been Sexually Abused is a special topic program delivered directly by an OCFS training contractor.

Stakeholders identified the need for the targeted recruitment and retention of foster and adoptive parents. OCFS provides support for recruitment and retention via a training contract with the Professional Development Program of the University at Albany. This project, The Recruitment and Retention Project, provides training and technical assistance to enable districts and agencies to develop and implement targeted recruitment plans. Staff is assigned to specific regions and provides technical assistance on the development of recruitment materials as well as child specific recruitment strategies. Staff also provides technical assistance on current technologies and strategies to improved retention.

In addition, OCFS allocates training resources to support regional and statewide events that focus public awareness on the need for adoptive homes and the significant role that adoptive and foster parents play in the lives of children.

To build their capacity to provide permanent homes for children, training and technical assistance is provided to enable foster care caseworkers and foster parents to navigate the legal and emotional path to adoption.

OCFS also supports, via two training contracts, consultation from existing foster parents on strategies to recruit new foster parents. This program, known as “Foster Parents as Recruiters,” has existed for over 10 years. Foster parents receive a fee for their recruitment efforts.

OCFS provides training to districts and agencies to enable the accurate and comprehensive completion of the foster/adoptive home study. Home studies are a required component of the certification/approval process.

Training is mandated for residential child care workers to enable them to create a safe environment for the children and youth in care. To meet the mandate, OCFS provides a train-the-trainer program for residential child care agency trainers. The program, Behavior Management, Crisis Prevention and Intervention in Residential Setting, builds the abilities that residential child care agency trainers need to teach residential child care staff: preventive methods and procedures for situations that might lead to the use of restraint, appropriate alternatives to restraint, the circumstances when restraint may be necessary, and methods of applying restraint and the rules which must be observed in doing so. Annual updates for residential child care agency trainers are also provided through the Behavior Management, Crisis Prevention and Intervention in Residential Setting training program



Service Array and Resource Development

Item 35: Array of Services:

Does the State have in place an array of services that assess the strengths and needs of children and families, that determine other service needs, that address the needs of families in addition to individual children to create a safe home environment, that enable children to remain safely with their parents when reasonable, and that help children in foster and adoptive placements achieve permanency?

Item 36: Service Accessibility:

Are the services in item 35 accessible to families and children in all political jurisdictions covered in the State's CFSP?

Item 37: Individualizing Services:

Can the services in item 35 be individualized to meet the unique needs of children and families served by the agency?

Policy Description:

NYS requires local districts to provide, arrange for, and coordinate appropriate rehabilitative and foster care services to the child and family to protect the child, prevent future maltreatment, promote the child's well-being, and stabilize family life. State law requires that the safety and permanency standards are documented and considered in all case assessments, planning, and service delivery. NYS requires that local districts develop and review written FASP that assess the strengths and needs of children and families. These plans must be monitored as part of the standard Uniform Case Record (UCR). The FASP serves not only as the official source of documentation for the case, but also as a tool to help support and guide caseworker and supervisory decision-making. See various items (such as Items 4, 18, and 24-29) for specific policy information on service plan development and service plan reviews.

Local districts may provide services directly to families, may contract with not-for-profit agencies to provide in-home and foster care services, or may utilize other public services (such as county mental health services) often with a written administrative agreement for appropriate availability. The required electronic service plan, with its safety, risk, family, and child assessments, provides the basis for assessing individualized child and family needs and documents the goals, tasks, and services that the case planner will coordinate to achieve the child's permanency goal. State regulations specify the array of preventive services that every local district must have available to prevent placement or for use during placement to accelerate the child's return. Each local district must provide, either directly or by purchase of service, the following seven "core services": day care; homemaker services; parent training or parent aide services; transportation; clinical services; respite care and services for families to relieve stress when a family member (parent, child, legal guardian, or caretaker) has an HIV-related illness;

and, twenty-four hour access to emergency services, including cash or the equivalent in services, goods, or shelter. Regulations and policies support the placing of services where there is a high need for services to prevent child abuse and maltreatment; and, the development of services, including pre-placement preventive services, to meet needs in areas of high foster care placements. NYS also provides housing subsidies for up to three years to prevent placement in, or enable discharge of children from, foster care.

Regulations require in-home conferences with the foster parents at least monthly or whenever necessary to provide services that are responsive to issues and to protect the child's best interests. Monthly casework contacts are required with the foster parents to facilitate the caretaker's role in achieving the service plan. The services must be provided without regard to income.

Through its Home and Regional Offices, OCFS provides training resources and technical assistance to local districts and monitors compliance with state policies, including service availability and delivery.

2001 CFSR Summary

This item was rated as an area needing improvement. The CFSR final report indicated that efforts have been made to offer an array of services, they are not always strategically located. Other barriers identified in the 2001 CFSR are lack of transportation, scheduling not convenient for birth and foster/adoptive parents, and the absence of a continuum of mental health services.

Factors Affecting Performance:

CONNECTIONS FASP tabs promote the development of individualized service plans. The system is designed to assist workers to do a thorough evaluation of each family. Documentation of the written case plan is now supported by NYS' CONNECTIONS system to assist with preparing a FASP that includes the required provisions. For example, the system requires the Case Planner to review specified pre-filled data (i.e. the CPS Safety Assessment carried over from the prior FASP) and accept it as currently accurate and ready for submission or modify it as necessary. However, effective in early 2008, other health and education information, such as physical, dental, and mental health fields, and other fields, must also be documented in CONNECTIONS. At the time of Build 18.9 in CONNECTIONS, OCFS allowed local districts the option to implement an incremental approach to full compliance with the documentation requirements in CONNECTIONS.

Although all districts must comply with NYS laws and policies, because NYS is a state-supervised, county-administered structure, assessment skills, tools, and resources are, to some degree, determined locally and a variety of enhancements to the process exist throughout the State. For example, in several local districts, through the "Teaming" model pilot, the family meets with a team, not just their caseworker, thus potentially providing information about a larger array of services and resources. The family benefits by getting to know a number of service providers that could help them. In NYC, ACS has a new conferencing model for preventive services cases, which is expanded to bring other service providers to the table to talk about whether the family is getting the services they need.

A Statewide Assessment Team Committee reported that each state system is required to assess service needs from its own perspective, and that there needs to be a broader assessment of a

child's and family's needs. Collaboration among agencies at the state and local levels has helped in the coordination of services. It was reported, for example, that in most districts, the various systems are familiar with the same families and collaborate in the provision of services.

The following is a listing of initiatives being piloted, developed or highlighted in various areas of NYS to address identified systemic and outcome needs. (Many of these initiatives are described further in Section I, *Key Initiatives Associated with Prior CFSR PIP Strategies.*)

Services:

- Sanctuary Model
- Bridges to Health (B2H)
- Intensive Home Based Family Preservation Services
- Home-Visiting Program
- Family Preservation Centers
- Intensive Case Management
- Coordinated Children's Services Initiative (CCSI)
- Multi Systemic Therapy
- Family Resource Center Network
- Healthy Families New York Home Visiting
- Parent Advocate program
- Families Together
- Mediation/Alternative Dispute Resolution
- Differential Response
- Concurrent Planning
- Teaming
- Multi-disciplinary Training
- Court Appointed Special Advocates program (CASA)
- Child Welfare Best Practice Model Court
- Child Advocacy Centers
- Youth In Progress
- Family Treatment Courts, Drug Treatment Courts and Juvenile Justice Courts
- Child Welfare Substance Abuse Collocation Project
- Domestic Violence/CPS Collaboration
- In-Depth Technical Assistance

Federal, state, and local funding provides support to independent living, preventive, child protective and after-care services. In addition to statewide initiatives, regional and district level work is being done to expand the service array for children and families. For example, through Chafee money, Erie County Community College funds 30 internships per year for youth in foster care. Kids Oneida in Oneida County utilizes a managed care model to contract with individual providers for various services, such as mentoring programs. St. Lawrence County has a successful in-home parenting service through BOCES. NYC just received a grant to begin providing trauma informed treatment for parents.

The co-location of services reduces accessibility barriers (such as transportation) and increases collaboration and resource sharing among service providers. Initiatives such as the Child Advocacy Centers, Child Welfare Substance Abuse Collocation Project, the provision of parenting classes during parent/child visiting meetings, and Domestic violence/CPS collaborations, are just a few that are aimed at making services readily available to families.

Language barriers can impact accessibility of services. In order to improve communication with non-English speaking children and families and to better assess their service needs, OCFS supports local districts in translating written materials. It should also be noted that NYC and other localities are using cultural competency skills to engage families and better assess service needs.

The St. Regis Tribe provides its own foster care, preventive, adoption, and child and adult protective services under a State Tribal agreement with OCFS.

Military families are a growing group in need of specific services. A resource center in upstate works with families on a military base and within the military structure to intervene effectively.

Within the Rochester Regional Office area, a cross-systems collaboration was developed and is devoted to serving children "close to home". Program development has focused on meeting the needs of cross-systems children. If a child needs a service which is not available in the Rochester Regional Office area, a cross-systems committee works to "quilt" a solution so the child can be served within the region; in the quilting process each system brings to the table what they can contribute to meet a child's needs. In 2007, this joint planning collaboration submitted a budget request to six state agencies (OCFS, OMH, OMRDD, DOH, OASAS, and SED) to fund cross systems assessments, training, and parent/child advocacy. The request has been approved, a clear indication of the progress being made to serve the needs of cross systems children in NYS.

OCFS provided guidance on the safe and appropriate use of psychiatric medications for children and youth in care and the process involved in obtaining informed consent through the issuance of an Information Letter (08-OCFS-INF-02) in February 2008, titled, "The Use of Psychiatric Medications for Children and Youth in Placement; Authority to Consent to Medical Care."

Despite the strides that have been made to expand the array of services in NYS, some areas of needed improvement still exist, such as insufficient post-adoption and after-care services. NYS funds some post-adoption programs through Temporary Assistance to Needy Families (TANF) monies and for the 2008-09 budget year, the Governor's budget proposes to move this funding from TANF to state funds. This will allow additional non-TANF eligible families to receive services. Districts also can fund post-adoption services through preventive services funding with 65% State reimbursement; however, many districts report insufficient local funds to do this.

Adoptive and foster parents find that it is particularly difficult to find mental health services for children in care, and in some districts, it is difficult to find providers that accept Medicaid. Adoptive and foster parents also mentioned that it is difficult to find after-hours resources, respite, and support for crisis intervention.

In accordance with Part H of Chapter 57 of the Laws of 2007, Preventive Services: Performance or Outcome Based Provisions, NYS law requires that preventive services funded with federal or state dollars include performance or outcome-based provisions. All districts made progress in this regard during the past year and reported their efforts to OCFS. Regional forums about performance and outcome-based provisions were provided statewide during 2007 and nine districts were provided with in-depth training in this regard. However, the lack of available resources was cited by stakeholders during the Statewide Assessment as a barrier to engaging in research and evaluating the effectiveness of programs.

Through the Improved Outcomes for Children (IOC) initiative, ACS has made a major investment in upgrading the quality and intensity of its oversight of the private agencies. Teams of ACS performance monitors will be assigned to each provider agency to determine whether it delivered high quality services to children and families. Further, ACS technical assistance teams troubleshoot specific cases and provide training and consultation to provider agencies regarding challenging areas of practice.



Agency Responsiveness to the Community

Item 38: State Engagement in Consultation with Stakeholders.

In implementing the provisions of the CFSP, does the State engage in on-going consultation with tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies, and include the major concerns of these representatives in the goals and objectives of the CFSP?

Item 39: Agency Annual Reports Pursuant to the CFSP.

Does the agency develop, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP?

Item 40: Coordination of CFSP Services with Other Federal Programs.

Are the State's services under the CFSP coordinated with the services or benefits of other Federal or federally assisted programs serving the same population?

System Description:

This Systemic Factor was identified as a strength in the 2001 CFSR, and planning in NYS continues to be a joint activity. NYS has a state-supervised, county-administered child welfare system. Therefore, effective collaboration and communication must occur on both the state and local level. OCFS supports local collaboration through an integrated county plan - the Child and Family Services Plan. This requires local districts to work collaboratively with county-level youth bureaus and county probation departments on PINS cases, and encourages participation from others, such as the local OMH and DOH, in the development of their service plans. Additionally, the local district planning process requires the social services district to hold a public hearing with public notice where both professionals and non-professionals may participate; specific areas, such as CPS, require additional interagency consultation. The State review of the local level plans involves discussions with each local district and often identifies broader issues requiring statewide discussion.

Collaborative, cross-systems relationships occur through multiple domains and involve projects that range from direct service programming to joint data collection initiatives to cross-systems training events. The Annual Progress Services Report of the 2005-2009 Child and Family Services Plan identified several efforts of consultation.

The creation of OCFS was accompanied by a statutorily created Child and Family Services Advisory Board comprised of 24 members. The Board's purpose is to help OCFS construct a better system of services for New York's children, families and individuals. The Governor appoints twelve members, and the State Senate and Assembly each appoint six members. Its

duties broadly include consideration of matters related to the improvement of children and family services, review of rules and regulations of OCFS prior to their adoption, advocacy for OCFS programs, and liaisons with local stakeholders.

In addition to the broader avenues of input noted below, local districts and voluntary authorized agencies interact with OCFS' Regional Offices routinely for technical assistance, feedback on problem areas, and suggestions for improvement. Regional Offices share those concerns/suggestions with the OCFS Home Office on an on-going basis. Monthly meetings provide a vehicle for advising and discussing field concerns with OCFS Home Office and for comparing various regional issues to determine how broad the issue may be or whether geographic location or district population is a factor.

In a similar manner, the Native American Services (NAS) unit actively interacts with the Tribes to offer general forums for discussions of issues, as well as to address specific child/family circumstances. Monthly meetings with Tribal representatives provide the opportunity for on-going dialogue. As with Regional Office staff, the NAS unit provides feedback to the OCFS Home Office. In addition, Regional Office staff and county welfare attorneys are involved and provide another conduit for feedback. The NAS unit is very active in supporting and sharing feedback from the Tribes and for facilitating meetings for direct feedback to Home Office.

OCFS seeks the input of its partners in the local districts and voluntary agencies using a variety of methods. Communication occurs through state level associations – the New York Public Welfare Association (NYPWA), the Council of Family and Child Caring Agencies (COFCCA), and others.

The OCFS and OTDA Faith and Community-Based Partnership was formed in 1998 in response to the federal Temporary Assistance for Needy Families (TANF) Charitable Choice provisions. Both agencies have expanded the opportunities for all faith and community-based organizations to help serve families and children in need. To support this partnership, each agency has designed faith and community-based coordinators and liaisons that act as a bridge between the two agencies and the faith and community-based organizations. This partnership builds upon long-standing faith and community-based activities, which have been developed throughout NYS.

With OCFS playing the lead coordinating role, the partnership works with diverse faith and community-based organizations to help them to become high quality human services providers. This is accomplished by maximizing the availability of information and resources administered by OCFS and OTDA. One-on-one consultations; educational workshops; symposiums with other federal; state and local governmental partners; and Resource Development workshops featuring strong grant writing techniques are ways in which organizations build their capacity to become service providers.

OCFS, in partnership with University-based training programs, has successfully developed a practice framework that supports youth involvement. The Statewide Foster Care Youth Leadership Team, now called YIP, is comprised of 25-30 youth in foster care or foster care alumni and adult mentors for each youth. YIP contributions include feedback and involvement in

staff training, including the development of training videos; input on revised clothing allowance policies; and consultation on the creation of the online foster care youth survey, among other activities. YIP's involvement in the development of teen friendly court centers is expected to significantly improve youth involvement in court case reviews, such as Permanency Hearings.

An area in need of improvement is the development of an initiative to consistently capture the voices of birth families to get their input into the development of policy and practice guidance. Methods to regularly and routinely solicit family input in a safe and trusting manner needs to be further developed and expanded. The Rochester and NYC Regions have established parent voice groups; however, the initiative is not yet implemented statewide. Several community-based groups, such as Citizen Review Panels, CASAs, and Crime Victims' Boards, have also identified this as a need.

The list below, while not exhaustive, provides a sampling of external meetings/collaborations that seek to engage stakeholder consultation:

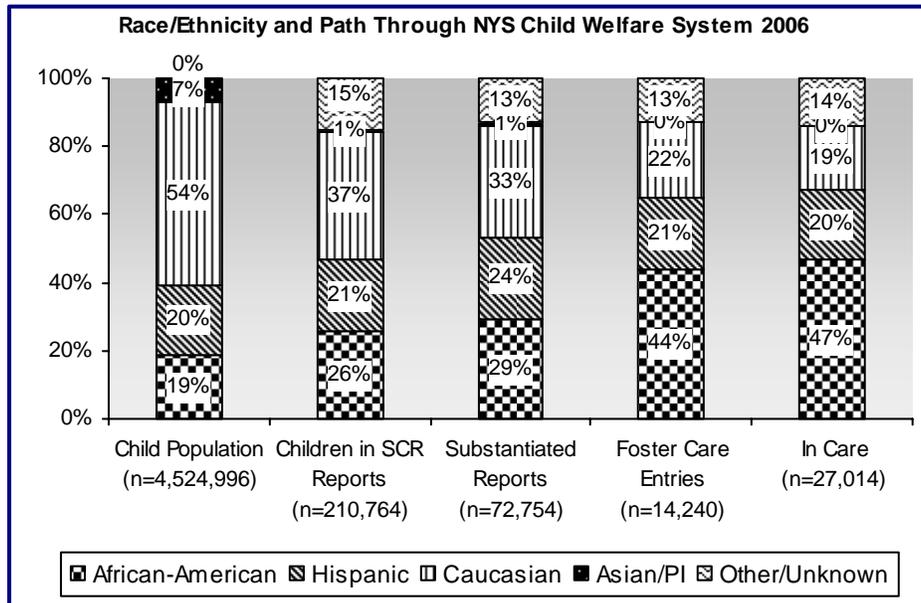
- **Advocates Briefing:** Budget briefing for Advocates.
- **Council of Family and Child Caring Agencies (COFCCA) Quarterly Meeting:** Identifies areas to be addressed stressing mutual accountabilities.
- **Adoption Strategy Workgroup:** This PIP workgroup is designed to identify and improve aspects of the adoption process primarily through systemic changes.
- **Coordinated Children's Services Initiative – CCSI:** The CCSI promotes a set of core principles to guide a process of integrated planning that develops and delivers individualized services to children and their families. The process utilizes strength-based, culturally competent approaches to identify and meet a child and family's needs. CCSI includes a three-tiered model to promote collaboration at the local (Tier 1), county (Tier 2) and statewide (Tier 3) levels.
- **CPS/DV PIP Advisory Group:** Develops guidelines to reduce recurrence of domestic violence by addressing the overlap of domestic violence and child abuse/maltreatment.
- **CPS/DV Roundtable:** Brings together all the CPS/DV collaboration project participants in NYS for a yearly training/networking session.
- **Disproportionate Minority Representation Work Group:** Convened in 2003 to work on disproportionate minority representation issues in the child welfare and juvenile justice domains of the agency.
- **Healthy Families NY Central Administration:** Administrative meeting for the Healthy Families NY Home Visiting Program. Sets policy, reviews best practices, implements new procedures, reviews individual program performance, develops and provides quality assurance and technical assistance.
- **White Eagle State Agencies' forum:** A multi-day, semi-annual meeting with local district commissioners and other stakeholders, including OCFS. A separate White Eagle forum with local district directors of service also occurs semi-annually.
- **Homeless Advisory Committee:** Key representatives from local and state agencies to improve policies and address interagency issues that affect service delivery of educational services to runaway and homeless youth and their families.

- **New York Citizen Reviews Panels (CRPs):** The CRP’s focus is to examine the practices (in addition to policies and procedures) of state and local agencies to evaluate the extent to which the agencies are effectively discharging their child protection responsibilities; provide for public outreach and comment in order to assess the impact of current procedures and practices upon children and families in the community; and make recommendations to the state and public on improving the child protection services system at the state and local levels.
- **NYS Crime Victims Board (CVB) Advisory Council:** The Advisory Council works to assist in formulation of policies on the problems of crime victims.
- **NYS Developmental Disabilities Planning Council – Children’s Issues Committee:** The purpose of this group is to review activities funded by the DDPC relative to children with developmental disabilities and their families.
- **NYS Youth Development Team:** The NYS Youth Development Team is a public-private partnership of leading agencies whose holistic vision, “families, schools and communities partner to support the development of healthy, capable and caring youth,” requires key stakeholders at all levels to address adverse youth health outcomes through effective partnerships.
- **Sexual Violence Primary Prevention Committee:** This committee is developing a sexual violence prevention strategy to satisfy the requirements of a federal grant received by DOH.
- **CONNECTIONS Management Steering Committee:** This group provides guidance to CONNECTIONS project staff regarding project activities.
- **Adoption Now:** An interagency collaboration with the Office of Court Administration (OCA) to look at improving the number of adoptions and shortening the time it takes for children in foster care to be adopted.
- **Lesbian, Gay, Bi-Sexual and Transgender (LGBTQ) Youth Workgroup of the Juvenile Justice Subcommittee of the New York City Family Court Advisory Council:** This group focuses on best practices in juvenile justice with respect to the LGBTQ population.
- **McKinney-Vento Workgroup:** The purpose of this group is to establish a pilot project that would explore the application of McKinney-Vento concepts for the choice of a child to remain in his school of origin upon removal from the home and placement into foster care.
- **New York Partnership for Family Recovery, In-Depth Technical Assistance Project (IDTA):** A partnership between OCA, OCFS, OASAS, the New York Public Welfare Association (NYPWA), ACS and the Alcoholism & Substance Abuse Providers of NYS (ASAP). This collaboration seeks to integrate the various services and agencies working with families who come into the child welfare system as a result of substance abuse and/or alcoholism so that services are received swiftly, are family-focused, and have improved outcomes in terms of treatment and child safety.
- **OCFS/OTDA Faith and Community-Based Partnership:** The Partnership builds the capacity of new faith and community-based organizations to better serve vulnerable children, families, and communities.
- **Rodriguez Stipulation Meetings on Lesbian, Gay, Bi-Sexual and Transgender Youth:** This group reviews agency policy direction as they relate to the LGBTQ population.

- **Statewide Permanency Planning Team:** The SPPT, comprised of multi-disciplinary team members, share the goal of improving permanency for children in NYS, improving children's health, safety and educational opportunities, and addressing other child welfare and juvenile justice issues.
- **Termination of Parental Rights Barrier Project:** This project is an interagency collaboration with the OCA and OCFS to make recommendations for statutory, regulatory, best practices and training for termination of parental rights in NYS.
- **OCFS/OTDA Fatherhood Work Group:** To move forward the agenda to develop a joint fatherhood initiative with OTDA.
- **Kinship Care Workgroup:** Convened to inform and guide the development of the NYS Foster Parent Manual.
- **Research Advisory Committee:** A panel of child welfare experts, this committee is part of SUNY Albany's Center for Technology in Government, an applied research center devoted to improving government and public services through policy, management, and technology innovation.
- **Out-of-State Placement Committee:** The committee is comprised of commissioners from SED, OMH, OMRDD, OASAS, DPCA, and DOH. Its purpose is to monitor out-of-state placements, promote coordination across all levels of government and establish a process for identifying and considering in-state resources prior to making an out-of-state placement.
- **Crisis Intervention and Restraint Committee:** An interagency group working to provide standards in restraint/crisis intervention.
- **Children's Cabinet:** This Cabinet, established by Governor Spitzer, is charged with oversight of the development and implementation of reforms for the success of New York's Children.

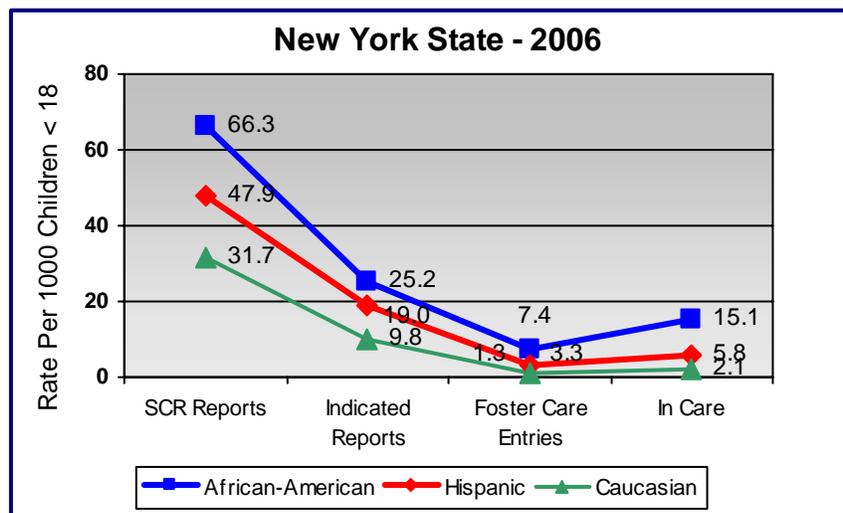
OCFS' involvement in external collaborations assists in increasing cross-systems awareness of issues. One example is disproportionate minority representation (DMR). NYS, like most states, is beginning to research and respond to DMR issues.

In her "Testimony to the New York State Legislature's Joint Budget Committee", held on Tuesday, February 5, 2008, Commissioner Carrión expressed her deep concern about the "disproportionate representation of Black and Latino children in our child welfare and juvenile justice systems."



Data Source: CONNECTIONS and OCFS Data Warehouse

African-American children make up a substantially higher percentage of the child welfare population at each stage in the process than their share of the general population of children under age 18. The over-representation of African-American children increases steadily with progression through the child welfare system, from SCR reports to foster care placements. In 2006, African-American children represented 19% of NYS’ child population; however, they represented almost half of the population in care.



Data Source: CONNECTIONS and OCFS Data Warehouse

As measured by rate per 1,000 children in population, African-American children are more likely than Hispanic children, and Hispanic children are more likely than Caucasian children to be involved in a report to the SCR for abuse/neglect, admitted to foster care, and be in care. Relative to Caucasian children, SCR reports involving African-American children are 2.1 times as likely to be reported to SCR, 2.6 times as likely to be involved in reports for abuse/neglect. These

children are 5.8 times likelier to be admitted to foster care, and 7.2 times likelier to be in care. Regardless of race/ethnicity, infants have the highest likelihood of being involved in reports for abuse/neglect. The rate of reports for African-American infants is particularly high, in comparison to other races/ethnicities.

In November 2007, OCFS partnered with NYC ACS and Columbia University School of Social Work to host a Disproportionality conference, featuring keynote speakers Dr. Robert Hill, OCFS Commissioner Gladys Carrión, and ACS Commissioner John Mattingly. OCFS is also involved in various cross-agency DMR initiatives.

Data Collection

OCFS and stakeholders recognize that data provides the necessary information to substantiate concerns and drive potential solutions. Therefore, OCFS and external stakeholders work in consultation to reduce barriers to data sharing, for example:

Data Collection and Analysis Projects

Chapin Hall Data Packets: OCFS contracted with Chapin Hall Center for Children at the University of Chicago to develop data measures that could accurately capture child welfare outcome performance, especially at the district level, and inform practice improvement. OCFS staff worked closely with Chapin Hall consultants to identify appropriate measures, develop data packets and provide initial technical assistance to OCFS Regional Office staff and staff in the ten largest local districts. The data packets build on data provided by Chapin Hall by including graphical representations of district-specific data and district comparison charts. Each district received a hard copy of the packet. The CIP also distributed the packets to each of its Judicial Districts. Additionally, the CIP is preparing to work with Chapin Hall to develop court-focused data packets designed to complement the OCFS data packets.

Universal Case Management System: The NYS Court System has developed the Universal Case Management System (UCMS), a statewide case management system in use in each of the 62 family courts in NYS, as well as 38 Integrated Domestic Violence (IDV) Courts for Family Court cases. UCMS enforces the standardization of data, court processes and business rules statewide. UCMS enables judicial officers, administrators, and non-judicial employees to view family court information statewide and also provides standardized statistical information and a variety of reports to aid in the management of individual courts as well as in statewide processes.

Currently, UCMS provides the Family courts the ability to create a case record, assign a judicial hearing officer, schedule the case for an appearance, record the activity on the case, and ultimately record the disposition on the case. UCMS collects information on all phases of the case such as orders, motions, and appeals. UCMS also writes outcome highlights for display in the Inquiry module so that all information on a case is easily accessible.

NYC “LUC” Initiative: The NYC Legal Tracking System/Universal Case Management System/CONNECTIONS (LUC) data-share project was initiated in 2007 between the NYC Family Court and ACS. The objectives of the interagency data-share are to streamline the process of filing child protective cases, to synchronize the legal case information between the

two agencies and their systems, and to enhance the information in the electronic file.

OCFS/OCA Data Sharing Project: An OCA/OCFS Data Share Management Group has been established to explore opportunities to build on the work of the LUC project so that the investment in the NYC project will eventually allow for inter-operability between UCMS and the child welfare data system statewide.

County Performance Data Indicators: In November 2007, with the approval of OCFS, county-based data packets based on OCFS' Child Care Review Services (CCRS) data were distributed to court managers in their respective family courts. The CIP, in partnership with the OCA Research and Statistics unit and the UCMS-Family Application Development group, is currently preparing a data extraction for the purpose of developing a report that will integrate certain existing child welfare CCRS data indicators and additional court system UCMS data indicators into a comprehensive set of district-based indicators that can be used to guide child welfare improvement efforts.

Interstate Placement Assessment: The CIP, in connection with OCFS, will engage in a thorough assessment of the effectiveness of NYS' interstate placement of children. The CIP will conduct a review of NYS laws, as well as strategies for sharing information with out-of-state courts; developing methods to obtain information and testimony from agencies and parties in other states without requiring interstate travel by the agencies and parties; and permitting parents, children, other necessary parties and attorneys to participate in cases that involve interstate placement without requiring those parties to travel interstate. This report will be used to develop recommendations for improvements for procedures to expedite interstate placements.

OCFS has been successful at identifying cross-system areas of need to be addressed, and developing quality training on issues and practices through the use of data. Data shared between OCFS and OCA has led to the co-sponsoring of the annual conference - Sharing Success. Recent Sharing Success conferences have focused on "Family Court and DSS: Giving Adolescents in Care a Voice" and "Collaborating to Improve Outcomes for Families Affected by Substance Abuse."

Since the first CFSR, OCFS has worked extensively with the family court system to improve child welfare outcomes impacted by the legal system. More information about cross-systems collaboration can be found in Section I. These collaborations have influenced legislation aimed at improving safety and permanency outcomes, and have led to joint training opportunities, such as the "Sharing Success" series.

As described above, NYS engages in strong and extensive efforts to include input and consultation with a broad array of stakeholders for the purpose of influencing the broad child welfare agenda, analyzing data, implementing successes and addressing areas in need of improvement. There is a continued need to develop a methodology to capture the volume of information in a consistent manner and disseminate it across-systems in a concise, salient summary so that it can be distributed and acted on efficiently.

Multiple contracts and different fiscal/claiming rules and program reporting requirements for funds from different sources to the same or collaborating programs need to be addressed. A reduction in the duplication of information at the funding level can potentially impact the time that programs spend on administrative tasks and increase time spent with clients.

At the client level, Statewide Assessment Team Committee members reported a need to identify ways to reduce the need for clients to provide the same information to multiple service providers. OCFS and its state partners also need to explore opportunities to reduce duplicate case reporting on clients.



Foster and Adoptive Home Licensing, Approval, and Recruitment

Item 41: Standards for Foster Homes and Institutions.

Has the State implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards?

Policy Description:

NYS has extensive regulations governing the certification and approval of foster boarding homes (FBH), approval of adoptive homes, and the licensing of congregate care facilities. The inspection and work required to certify or approve a FBH or adoptive home are completed by the local district or voluntary agency or adoption agency responsible for the home, while the inspection and licensing activities for congregate care facilities are completed by OCFS Regional Office staff. The foster and adoptive home certification and approval process is designed to provide comprehensive standards for licensure of foster and adoptive homes. Final certificates or approval letters for FBHs, and the licenses and operating certificates for congregate facilities are issued after compliance with all requirements. Approval, rather than certification, is an option for relative foster homes, but the standards are consistent whether the home is certified or approved. Separate regulations exist for adoption approvals.

Prospective foster and adoptive parents must provide an application, which includes information on employment history, qualifications, medical status, including a physical exam, a Statewide Central Register for Child Abuse and Maltreatment database check in NYS and any other state in which an applicant or adult household member has lived in the previous five years, an attestation about criminal history if any, and completed fingerprint cards to check criminal history records in NYS and with the FBI. Once a FBH application has been accepted, a home study must be completed within four months.

During the home study, all members of the foster or adoptive home are evaluated against standard criteria that include health, employment, character, and ability and motivation, and the home is checked against physical plant criteria. Authorized agencies are also required to provide orientation to prospective foster and adoptive parents who have been accepted for a home study on a defined set of categories, including the effects of family breakdown, problems created by separation, the respective roles of the agency, the birth parents and the foster parents, and the nature of the relationship of agency staff to foster parents and children. Finally, before a child is placed in the home, training and placement information must be provided according to a set of criteria defined in regulation. The MAPP training program for foster parents provides another level of review before a family can be certified or approved.

Foster homes must be re-certified or re-approved every year. If a child(ren) is placed in a foster boarding home, regulations specifically require casework contacts with the foster parent.

Licensure of congregate child care facilities requires compliance with a comprehensive set of regulations covering physical plant, fire protection, recreation and health facilities, as well as employee qualifications, health status, criminal history, and Statewide Central Register for Child

Abuse and Maltreatment database checks. Congregate care facilities are inspected against and must be in compliance with, each regulation before an operating certificate is issued.

2001 CFSR Summary:

The 2001 CFSR rated this item as a strength. The Statewide Assessment reported suggestions for improving the standards in child care facilities made by a focus group of OCFS Institutional Abuse specialists that included: strengthening the regulations around programming and daily schedules for children; raising the standards for hiring and training of child care staff; and, more specifically addressing issues that can be problems in facilities, such as policies regarding smoking or drug use by residents. The CFSR final report acknowledged that there are standards and procedures in place that comply with recommended national standards and that the MAPP training is viewed as positively impacting the quality of foster boarding homes.

Factors Affecting Performance:

NYS has established regulations regarding licensing standards for foster boarding homes, adoptive homes and congregate care facilities. These regulations can be found in 18 NYCRR Volume B and B1. There are also policies and guidelines to provide more detailed information.

There is general sentiment that these regulations are too vague and need to be updated to reflect practice today. For example, Round 1 Strategy Coordinators identified that caseworkers need more guidance regarding the approval of relative foster homes and expectations for foster parents. Representatives from CIP felt that if the standards were updated and less vague, there would be less room for subjectivity for approving a foster home. This would also reduce the vast differences in practice between districts, which could be a source of confusion for foster parents that are navigating the system, as experienced by adoptive parents in an adoptive parent focus group.

Training on the standards for foster homes and congregate care facilities varies throughout the State. NYC recently started a training program targeted to homefinders. During this training, homefinders are given the regulations and the opportunity to ask questions to get clarification. They also receive a manual on state and city policies and procedures. At a quarterly homefinders directors' meeting, NYC reviews any updates to the regulations and discusses any issues that may have arisen. This training program provides an excellent opportunity to get all the homefinders in NYC on the same page. Unfortunately, there is no such training for homefinders outside of NYC.

In addition to homefinders, foster parents and caseworkers could benefit from training on standards. Very often, foster parents receive a wealth of information at the beginning of the process and are left to read and digest the information themselves. It has been suggested that follow-up mini trainings be held to address any confusion regarding the regulations. It was also suggested that caseworkers could also benefit from attending a foster parent training session, so they are better aware of the standards to which the foster parents should be held. This may enhance a local district's ability to assess eligibility for foster home approval.



Item 42: Standards Applied Equally.

Are the standards applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds?

Policy Description:

NYS regulations provide that local district staff and authorized voluntary agencies may not finally certify or approve foster and adoptive homes until all regulatory requirements have been met. However, there is a process for emergency certification or approval of foster homes in limited circumstances where the home only needs to meet some of the requirements. All steps in the certification or approval process are tracked through the statewide CONNECTIONS computer system from which the certificate to boarding or foster home approval letter is generated. The CONNECTIONS system also alerts local district staff and authorized voluntary agencies when the certification or approval is about to expire and recertification or re-approval of foster homes needs to occur. Re-approval does not apply to adoptive homes. The same standards are used for certified (non-relative) and approved (relative) foster boarding homes. State Regional Office staff is available to districts and agencies to assist with compliance issues that may arise. OCFS Regional Office staff license all congregate care facilities. Regional Office staff also perform inspections of all congregate care facilities on a regular basis. Fire safety and program inspections are conducted, violations of regulation are cited, and compliance plans are developed and monitored. Corrective action plans required of agencies have focused on training initiatives, increased monitoring of staff activities, procedural changes, and clarifications and enhancements to agency policies and procedures. Regional Office staff investigate allegations of child abuse and maltreatment in congregate care facilities and require and monitor corrective action of agencies where appropriate.

2001 CFSR Summary:

The 2001 CFSR rated this item as a strength. The Statewide Assessment described the standardized policies and procedures that govern the certification and approval of homes and the licensing of congregate care facilities. The 2001 CFSR case review cited that foster parents acknowledged that licensing practices were equally applied across the districts and agencies, but they expressed concern about the following: monitoring was not sufficient to observe unsafe practices in the home; and, regular caseworker visits did not occur consistently. The final report also noted that, despite the standards, there were several concerns expressed about the quality of the foster care homes.

Factors Affecting Performance:

OCFS requires that standards are applied equally throughout the State. The Voluntary Agency Review process conducted by OCFS looks at policies and practices of all voluntary agencies on a regular, recurring basis. However, because New York is state-supervised and county-administered, monitoring of specific cases sometimes presents a challenge. OCFS does investigate any complaints regarding specific child welfare cases and works to resolve them with the involved local district and/or voluntary agency. There is a strong Institutional Abuse function, with staff located in each of six OCFS Regional Offices and specifically charged to

investigate allegations of abuse or neglect in residential care. This function is coordinated through a central unit within the OCFS Home Office to support consistent practice statewide.

Throughout 2007, OCFS was a key participant in the NYS Committee on Restraint and Crisis Intervention Techniques. This Committee included representation from numerous state agencies, voluntary agency stakeholders, and parents and advocacy groups, and outlined a comprehensive, coordinated set of standards recommended for use in children's service settings that are licensed by OCFS, OMH, OMRDD, and SED. The Committee produced a report to the Governor and Legislature in September 2007, titled Behavior Support and Management: Coordinated Standards for Children's Systems of Care. These standards, according to the Committee Chair, "...incorporate current knowledge drawn from research, practice guidelines and expertise from the multiple fields represented by the Committee...and...underscore the importance of a comprehensive approach to behavior support and management, focusing primarily on prevention and early intervention strategies."²³ The Committee is committed to on-going collaboration to achieve greater clarity regarding more consistent standards and expectations concerning residential care of children.

As part of NYS' 2001 PIP, a strategy was developed to address Safety and Well-Being in Residential Care. In addition to meeting the original deliverables, this workgroup has grown in stakeholder participation and remains a vibrant force in continuing to improve practice and outcomes for children in residential care. A Restraint subcommittee has been the driving force behind the implementation of ARTS, the Automated Restraint Tracking System. It is anticipated that this web-based reporting tool will provide key data in continuing to reduce the use of physical restraints.

Additional accomplishments of this group include issuance in 2005, of a discussion paper on the nature of residential care in New York and a training tool designed to strengthen front line supervision.



²³ New York State. Committee on Restraint and Crisis Intervention Techniques. Behavior Support and Management: Coordinated Standards for Children's Systems of Care. Final Report to the Governor and Legislature. Sept, 2007: 1.

Item 43: Requirements for Criminal Background Checks.

Does the State comply with Federal requirements for criminal background clearances related to licensing or approving foster care and adoptive placements, and does the State have in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

Policy Description:

NYS regulations for criminal background checks exceed federal standards, as they require that any person over the age of 18 residing in the home of prospective foster or adoptive parents submit to a criminal history record check in NYS and with the FBI. Local districts and voluntary child care agencies must provide fingerprint cards and a Notice Regarding Fingerprinting Requirements to prospective foster and adoptive parents and must set up tracking controls to be certain that each person in the household over the age of 18 has been fingerprinted. The fingerprints are placed on “search and retain” to enable notification of any future arrest, as long as the foster home remains open or until the adoption is finalized. For certain categories of crimes, an application for certification or approval as a foster or adoptive parent must be presumptively denied unless the foster or adoptive parent can demonstrate that such denial will create an unreasonable risk of harm to the physical or mental health of the child; and, approval of the application will not place the child’s safety in jeopardy and will be in the best interests of the child. Safety assessments are required by regulation whenever a criminal history is identified. The CONNECTIONS system supports a template for documenting the safety assessment.

OCFS has an Administrative Directive (00-OCFS-ADM-04 Criminal History Record Checks (For Foster-Adoptive Parents)) describing the criminal background clearance process. With input from stakeholders, the need for refinements to the original state statute was recognized and the State enacted new legislation amending the criminal background check law. The State opted out of the Federal requirements for the criminal record background check as of July 2000.

In order to be in compliance with state regulations, each prospective and certified foster and adoptive parent and adult household member must also be cleared against the Statewide Central Register for Child Abuse and Maltreatment in NYS and any other state where they have lived in the previous five years.

2001 CFSR Summary:

The 2001 CFSR rated this item as a strength. The Statewide Assessment noted that, as of February 2001, no criminal record or no reportable record was found in 90.5% of the fingerprints processed. The Statewide Assessment reported that data from a Spring 2000 case review in NYC found that 54% of case records contained the results of criminal background checks for all household members over the age of 18; and, an additional 7% of case records contained results for some, but not all, household members over 18. The CFSR final report indicated that criminal background checks are being conducted according to state standards. Stakeholders agreed that the process was much improved from its initial implementation and some viewed it as a good example of prioritizing and collaboration at the state level.

Factors Affecting Performance:

These regulations were amended in a timely fashion in order to meet the new federal requirements. An administrative directive (07-OCFS-ADM-01) has been distributed to the field to explain the new requirements; however, OCFS has yet to develop training on these new requirements.

Because of the relatively high rejection rate of fingerprints by the FBI, NYC has begun an electronic fingerprinting pilot called Live Scan. This experimental system allows workers to scan in fingerprints, rather than using traditional ink and paper. While this project is in its infancy, anecdotal feedback has been that the number of rejections is greatly reduced. Unfortunately, this project is currently only in NYC and workers do not have the ability to do mobile scans for those unable to travel. These issues may be worked out as the pilot progresses.



Item 44: Diligent Recruitment of Foster and Adoptive Homes.

Does the State have in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children for whom foster and adoptive homes are needed in the State?

Policy Description:

NYS regulations require that agencies have a comprehensive recruitment strategy/plan for establishing a pool of waiting foster and adoptive parents that reflects the racial and ethnic diversity of the children in foster care. Adoption Specialists in the OCFS Regional Offices monitor local district and voluntary agency implementation of foster and adoptive Comprehensive Recruitment Plan requirements and provide technical assistance to local districts and voluntary agencies to determine their compliance with the Multi-ethnic Placement Act of 1994 (MEPA) as amended by the Interactive Adoption Provisions of 1996 and state regulations. Recruitment efforts in each region of the State are tailored to meet the specific needs in that area. In some regions, foster and adoptive parents are trained to be recruiters and use their experience to provide guidance, direction, and consultation to new foster parents. OCFS takes an active role in disseminating information on foster care and adoption through the use of the media.

2001 CFSR Summary:

The 2001 CFSR rated this item as an area needing improvement. The Statewide Assessment noted the Regional Office Adoption Specialists regularly undertake activities to monitor agencies' recruitment activities to promote the generation of a sufficient number of homes that represent the ethnic and racial diversity of children in need of placements. The Statewide Assessment discussed the statewide media strategy developed to recruit ethnically diverse homes, including public education materials that can be used locally on an as-needed basis and a statewide 800-phone number to answer questions and disseminate information. The Statewide

Assessment highlighted the Foster and Adoptive Parent Recruitment and Retention project in which trainers with skills in reaching out to all communities, most particularly minority and previously untapped communities, work with individual agencies to develop a recruitment/retention plan.

An upstate foster and adoptive parent association focus group noted that: more Black and Latino foster/adoptive parents are needed, especially bi-lingual Hispanic families and families that can speak particular Hispanic dialects and have knowledge of specific countries and cultures (e.g., Mexican, Central American, Caribbean); and, caseworkers need more training and awareness regarding cultural differences in areas such as religion, family, discipline, and structure. The Statewide Assessment also noted that one of the major barriers to recruitment has been perceived liability issues, which tend to deter some prospective foster parents. An upstate focus group, comprised of local district and agency adoption staff, noted that: the Adoption Album has been a very helpful service in finding families; having a minority staff person is a successful approach; recruitment becomes especially difficult when the child's ethnic group is underrepresented in the community; and, using churches to recruit can be helpful. A NYC group reported: a need for more Latino foster parents; and, for adoptive parents, more financial aid is needed to meet the needs for special medical and mental health services of the children adopted.

The CFSR case review stakeholders reported that the State is making significant and organized efforts to recruit foster and adoptive parents and cited a number of initiatives, such as media-based recruitment for a specific child. The final report noted that the overall response to the State's recruiting efforts was positive, but there were a number of areas that need improvement. These included: collaboration with state agencies that seem to be competing for the same insufficient pool of therapeutic homes; and, development of a foster care program with the Tribal group where poor recruitment has been affected by insufficient resources and lack of Tribal management of training, home certification, and Tribal reluctance to accept the involvement of outside agencies. Additionally, case review stakeholders suggested: higher foster care rates; the need to examine multiple barriers to being foster parents, such as those applicable to residing in rural areas where there is little or no public transportation; and, review of issues related to proximity in placement, siblings entering care at different times, and delays in conducting home studies. Stakeholders also recommended increasing public awareness through more targeted media activities and recruitment collaboration with other local agencies and associations.

Factors Affecting Performance:

OCFS Comprehensive recruitment plans are in compliance with the Title IV-B plan. OCFS contracts with our partners at the University of Albany Professional Development Program to collaborate on and initiate recruitment related activities. Some activities include providing support for Heart Galleries, working with specific voluntary agencies and local districts to further develop their recruitment techniques, developing a Foster Parent as Recruiter initiative, and providing direct recruitment and retention training.

OCFS also utilizes adoption awareness events, such as the Heart Gallery, to recruit adoptive parents. The Adolescent Services focus group identified that collaborative work with OMH and OMRDD through projects like Bridges to Health and Consolidated Children's Services Initiatives, have made it much easier to find foster and adoptive homes for children with needs

that touch more than one system. New York also allows potential adoptive parents to use non-recurring adoption expenses to facilitate out-of-state visitation. This allows caseworkers to cast an even wider net for potential adoptive homes.

Despite successful efforts to diligently recruit foster and adoptive homes for children in foster care, some barriers prevent efforts from being more successful. Parents from the Adoptive Parent focus group said that a lack of financial resources and service supports for foster parents deters foster parents from becoming a resource for more children or from becoming an adoptive parent. It also prevents them from recruiting other foster parents in their communities. There are also limited resources for agencies to recruit, retain and support foster and adoptive parents, which certainly limit their capabilities.

A lack of sufficient post-adoption funding and services may deter an adoptive parent from adopting additional children. The inability to consistently track the number and characteristics of foster and adoptive parents recruited across the State remains a barrier to the further development of recruitment efforts.

To comply with the Multi-Ethnic Placement Act as amended, OCFS provided guidelines and initiated technical assistance with local districts and voluntary agencies across the State. Local districts and voluntary agencies are responsible for incorporating the standards of the Act into practice so that they are in compliance.

The Adoption NOW workgroup developed the adoption panel review process in order to assess the child-specific barriers to adoption across the State and to identify legislative and programmatic areas that can impact adoption. Adoption panels occur in each of the six OCFS regions. The panel review teams examine local districts' freed children's case files to identify the children's status, to identify child and district specific successes and obstacles to timely adoption, and to make recommendations to rectify obstacles.



Item 45: State Use of Cross-Jurisdictional Resources for Permanent Placements.

Does the State have in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children?

Policy Description:

NYS regulations address ASFA requirements and state that authorized agencies may not delay or deny the placement of a child freed for adoption with an approved adoptive parent on the basis that the approved adoptive parent resides in a state or county different from the agency with jurisdiction of the child. The regulations also include the right to administrative hearings to challenge any denial. In addition, OCFS Regional Office staff monitors the implementation of

foster and adoptive Comprehensive Recruitment Plans and the activities of the voluntary agencies, including reviewing a sample of cases of children waiting for adoption in each agency. The Safe and Timely Interstate Placement of Foster Children Act of 2006 issued regulations that require timely homestudies for cross-state placements. Additionally, OCFS required the same timeframe for cross-county homestudies, as was required by the federal law for cross-state home studies.

2001 CFSR Summary:

The 2001 CFSR rated this item as a strength. The Statewide Assessment noted there are many initiatives in NYS to increase cross-jurisdictional adoptions including: an intra/Internet based system of photo listing and family registry that reaches a broad audience; participation in the Interstate Compact for the Placement of Children (ICPC); teleconferences with local districts and voluntary agencies; policy collaboration with other states; partnerships with local districts in development of policy and practice directives; and the Adoption Monitoring System (AMS) database that provides information to the Adoption Specialists to help with their monitoring activities. The Statewide Assessment noted that focus group participants were concerned about the following: some agencies from NYC are reluctant to place children in upstate rural areas and some rural counties are reluctant to place children in an urban setting; some local districts do not know how to, or do not want to pay for, services from provider agencies in other areas; some smaller county social services districts report that they do not have the money to purchase these services; and, some districts would rather place the child in their own home and provide their own services since this costs them no extra funds.

The CFSR recognized NYS for its efforts to support necessary placements and permanency through cross-jurisdictional processes but noted that the practice presents challenges in trying to achieve permanency goals for children in care. The Adoption Album and the Interstate Compact for the Placement of Children were cited as two key endeavors to help practice conform to regulation and policy. The case review stakeholders and local districts acknowledged that more work needs to be done in addressing issues regarding hard to place children, sibling groups, and cross-jurisdictional placements within the state or with other states.

Factors Affecting Performance:

NYS does have standards for cross-state placement in Section 374-a of the Social Services Law entitled “Interstate Compact on the Placement of Children.” This is also supported by an administrative directive to local districts (85 ADM-22). Some stakeholders believe that OCFS’ regulations are not strong enough in requiring a county to pursue cross-county placements, including the use of POS dollars, when a family is not available within the county, leaving it up to the county as to how vigorously they should pursue an adoptive placement once a child is freed.

Both the NYS Title IV-E Report Sustaining Progress Sustaining Success²⁴ and the Maximus Title IV-E report OCFS Title IV-E Process Analysis²⁵ identified that New York has had difficulty acquiring foster/adoptive home licenses and documentation from other states, despite the Interstate Compact for the Placement of Children (ICPC) process that is in place. Searching

²⁴ New York State. Office of Children and Family Services. Sustaining Progress Sustaining Success. 20 Dec 2006.

²⁵ Maximus Federal Services, Inc. OCFS Title IV-E Process Analysis. Dec 2006

for relative placement options across state lines can also be a challenge depending on how well the other state cooperates. As mentioned in the NYS Title IV-E report, New York would like ACF to issue a directive to all states to share licensure and safety information about interstate placements. CASA Directors and Managers would like New York to do a better job at communication between the NYS ICPC unit and local district caseworkers.

SECTION V

State Assessment of Strengths and Needs

State Assessment of Strengths and Needs

On the basis of an examination of the data in section II and the narrative responses in sections III and IV, the Statewide Assessment Team should respond to the following questions in completing this section:

- 1. Determine and document which of the seven outcomes and systemic factors examined during the Statewide Assessment are primarily strengths, citing the basis for the determination.**

There are many areas of strength in NYS' child welfare system and many cut across all outcomes and systemic factors. The State's strengths and improvement opportunities should be viewed in the context of its tremendous diversity in populations, in cultures, in local governments, and in resources. As a state supervised, locally administered system, NYS' child welfare system benefits greatly by being administered and delivered through agencies close to the local population. It is also challenged to deliver a consistent level of performance by virtue of that diversity and local control of service delivery. The strengths identified are a result of the combined efforts of OCFS leadership, support and supervision and agencies leadership, commitment to continuous quality improvement and dedication to serving vulnerable children and families.

There are areas of strength as well as areas in need of improvement in each of the seven outcomes and systemic factors in the Statewide Assessment, and some are listed as both in this document. The following outcomes and systemic factors include particular areas of strength.

Safety Outcome 2:

Children are safely maintained in their homes whenever possible and appropriate.

Item 3: Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care.

Item 4: Risk assessment and safety management.

- NYS' foster care population continued to decline significantly since the last CFSR, with an increase in 2006 for the first time in more than a decade. This trend is related to the increase in child protective reports, especially in NYC, following high profile child fatalities. There were 36,997 children in foster care at the end of 2002, which decreased to 27,191 children in foster care at the end of 2006. NYS has maintained its commitment to supporting services to families in their home by providing 65% of the costs for preventive services. Significantly more children receive preventive services than foster care services, which was not always the case in NYS and is not always the case in other states.
- Significant work has been done in NYS since the first CFSR to strengthen family engagement practices in the State. Supported by Family Engagement Specialists in each OCFS Regional Office, this work includes implementation of concurrent planning, improved visitation between children and their parents, locating and engaging absent fathers and their extended families, and family meetings. ACS' family team

conferencing through its IOC pilot provides regular and frequent opportunities for families to be active partners in service planning.

- ACS has instituted the 72-hour conference in all of its CPS field offices. The intent and practice of these conferences is to bring families with children at high risk together with a skilled facilitator, the CPS caseworker, family supports if identified, and a preventive service provider if identified at that point. By engaging the family in planning for their children's safety and making clear options and consequences, children can stay at home with managed risk rather than be placed in foster care. Also, family conferencing is the centerpiece of ACS' IOC pilot as the practice model provides regular and frequent opportunities for families to be active partners in service planning. In partnership with ACS and the pilot IOC agencies, OCFS provided safety and risk refresher training for preventive agency staff so they can be vigilant about safety while supporting family functioning, regardless of whether the family was referred by CPS or voluntarily sought services.
- An additional strength is the work being done to reduce physical restraints of youth in residential care. This includes implementation of the Sanctuary model in a number of private child caring agencies, as well as the development of a data system (ARTS) where information about restraints is collected. Feedback is provided to agencies about their performance compared with other agencies and compared to themselves over time. This feedback alone is sometimes enough to trigger an agency improvement agenda. This work reflects a heightened awareness of the trauma that children in foster care have experienced and the need to reduce the effects of that trauma as part of the child's treatment.

Permanency Outcome 1:

Children have permanency and stability in their living situations.

Specifically:

Item 8: Reunification, guardianship, or permanent placement with relatives.

Item 9: Adoption.

Item 10: Other Planned Permanent Living Arrangement.

- There has been a significant strengthening of policies and practices related to adolescents and in particular, permanency for adolescents in New York. A statewide workgroup formed during the first CFSR continues to advance this agenda and to promote permanency for adolescents. "Independent Living" is no longer a permanency planning goal in NYS, in recognition of the importance of permanency and connections to caring adults for every young person leaving foster care. For older youth for whom reunification and adoption are not options, another planned permanent living arrangement (APPLA) with connection to an adult permanency resource is the goal.
- NYS' YIP statewide and regional groups are now firmly established forums for youth in foster care to have a voice and input into policy development.
- A strong partnership between the child welfare system and the courts has been established since the first CFSR to promote permanency for children. This includes quarterly meetings of senior leaders of both systems, as well as monthly meetings among Chief Judge Judith S. Kaye and the Commissioners of OCFS and ACS to promote an adoption agenda, "Adoption Now." The Adoption Now agenda resulted in New York

receiving two consecutive Adoption Incentive awards totaling \$5.4 million since the first CFSR and a federal Adoption Excellence award.

- NYS' Permanency Legislation, passed in 2005, strengthened the system of mutual accountability between child welfare and the courts in promoting permanency for children. Having this strong policy base, with clear expectations for each system in place is a strength, despite current challenges in implementation described previously. Increasing the frequency of Permanency Hearings from once a year to every six months (after the first hearing at eight months), requiring dates certain for Permanency Hearings, and requiring that Permanency Reports be made available to the court and the parties 14 days before the Hearing are significant policy improvements to support permanency for children.
- NYS continues to perform well on the federal measure of stability of placement and on re-entries into foster care. The national standard for CFSR Permanency Composite 4: Placement Stability is 101.5 or higher; NYS' performance as of March 2007 is 108.1. Similarly, NYS' performance in March 2007 on re-entries into foster care of children discharged to reunification was 13.4%, better than the national median of 15%.

Permanency Outcome 2:

The continuity of family relationships and connections is preserved for children.

- When placement of children in foster care is necessary, the practice of placement in the least restrictive environment, placement with kin if at all possible, as well as maintaining a child's continuity of environment are embedded in practice in the State. While not always possible to do so, caseworkers understand the importance of placing children as close to home as possible, maintaining children in their school of origin, and keeping siblings together in placement.
- ACS' requirement that the contract agencies cluster their services and foster homes in the neighborhoods they service has reduced the distance from home for many of NYC's foster children.
- OCFS has an extensive history of and an on-going commitment to providing specific supports through practice papers, training and technical assistance for home finders, foster parent trainers, foster parents, caseworkers, and supervisors on visitation practices and partnerships in parenting so that children's needs for emotional security and connections can be met.

Well Being Outcome 3:

Children receive adequate services to meet their physical and mental health needs.

- While a continuous improvement agenda is clearly needed, especially in regard to increasing the availability of community-based mental health services, a significant strength in this area is OCFS' new Bridges to Health Home and Community Based Medicaid waiver program (B2H). The waiver program will provide all 3,305 participating children with health care integration services and up to 13 additional services to meet their health care needs related to serious emotional disturbance, developmental disabilities, or medical fragility. In addition, another Home and Community Based waiver program operated by the NYS Office of Mental

Health makes supplemental mental health care services available to children in the child welfare system, both those living at home and those in foster care.

- OCFS reviewed hundreds of records of children in residential care in 2005 to assess the degree to which their physical and mental health needs were being met. To provide clarity of expectations and detailed guidance on how to support children's health, OCFS developed, issued, and provided training on a manual for health care providers and case managers.
- Rochester Regional Area Cross-Systems Collaboration: This cross-systems collaboration is devoted to serving children "close to home." Program development has focused on meeting the needs of cross-systems children. If a child needs a service which is not available in the region, a cross-systems committee works to "quilt" a solution so the child can be serviced within the region; in the quilting process each system brings to the table what they can contribute to meet a child's needs. In 2007, a budget request to six state agencies (OCFS, OMH, OMRDD, DOH, OASAS, and SED) has been approved to fund cross systems assessments, training, and parent/child advocacy. The request has been approved, which provides a clear indication of the progress being made to service the needs of cross-systems children in NYS.

Statewide Information System:

- Feedback received from local district and agency staff about NYS' CONNECTIONS system during the Statewide Assessment development, and through other forums reflects both the strengths of the system and ways in which improvement is needed. CONNECTIONS provides a system to document and manage information related to work with children and families, and to save that information for future reference. The automation of the case record provides the capacity to share and jointly contribute to that record across all case workers involved with a family. It also provides immediate access to information by others involved in the case, including supervisors, managers, legal staff, etc.

Recent improvements in the technical infrastructure have made the system more efficient and reliable, while application enhancements have sought to improve the user interface. However, continued improvements in both these areas are necessary to improve efficiency and provide relief to caseworkers. The user interface employs out-dated technology which is cumbersome and difficult to navigate requiring extensive training and expertise to effectively complete system tasks. CONNECTIONS is only partially implemented, with essential information regarding child placement and legal events, eligibility and payment recorded in legacy systems that are not readily accessible from CONNECTIONS.

Quality Assurance System:

- OCFS continues to monitor the delivery of child welfare services through case reviews in each local district at least every four years. Review tools are continually updated to reflect new policies and to provide actionable feedback to districts. Performance issues are analyzed across the counties and as trends are identified, adjustments are made in training curricula to better address specific areas of practice.

- In addition, OCFS has expended considerable effort in increasing the capability of its own staff and the managers of local districts to be able to use available data to understand and track performance. OCFS issued outcome data for every local district every six months during the first CFSR PIP and local Program Improvement Plans were required from each local district and monitored by OCFS' Regional Offices. The Data Warehouse has continually provided training and technical assistance to districts to assist them to use prepared and ad hoc reports.
- ACS continues to monitor contract agency performance and has terminated contracts with agencies identified as under-performing. The development of ACS' new Scorecard outcome measurement tool, in partnership with Chapin Hall Center for Children, shows promise as a further refinement of setting agency-specific baselines regarding performance.
- OCFS recently joined the State Data Center sponsored through American Public Human Services Association (APHSA) and Chapin Hall Center for Children and will be making longitudinal outcome data available to counties as part of performance monitoring and a continuous quality improvement agenda.

Staff and Provider Training:

- NYS is proud of its outcome based training system that provides training to caseworkers and supervisors. It focuses on the development of skills important to enable caseworkers to more effectively meet the needs of families requiring child welfare services. While seen as a strength overall, the need for more adoption training for caseworkers was identified during the Statewide Assessment. An on-going challenge is to strengthen the transfer of learning from the training environment to the workplace.

Service Array and Resource Development:

- A significant strength of NYS' child welfare system in promoting a breadth of services availability is the uncapped funding for preventive services. Established in 2002 and reauthorized in 2007, this funding provides 65% State funding for every 35% of local spending on preventive services, net of federal funds.
- Collaborations between child welfare and other service systems continue to increase the service array in New York. Co-location of domestic violence experts and substance abuse experts in child protective services units in many parts of the State are examples of collaborations that result in better assessment and more targeted service provision to children and families.

Foster and Adoptive Home Licensing, Approval and Recruitment:

- NYS has comprehensive regulations governing the certification and approval of foster boarding homes, approval of adoptive homes and licensing of congregate care facilities. Foster homes must be recertified or re-approved every year and casework contacts with foster parents are required.

- CONNECTIONS foster care facility file functions are viewed as helpful by stakeholders in supporting the foster care and adoptive home licensing process.
2. **Determine and document which of the seven outcomes and systemic factors examined during the Statewide Assessment are primarily areas needing improvement, citing the basis for the determination. Identify those areas needing improvement that the State would like to examine more closely during the onsite review, for example, to explore possible causal factors. Prioritize the list of areas needing improvement under the safety, permanency, and well-being outcomes.**

NYS has identified areas in need of improvement that cut across all outcomes and systemic factors, including the following:

Insufficient caseworker and supervisory staff resources, and high turnover rates in some districts resulting in high caseloads, is consistently identified as a barrier to improving all child welfare outcomes. The Workload Study completed by Walter R. McDonald and Associates in 2006, through a contract with OCFS, found caseload sizes to be too large in most parts of the state in child protective, preventive and foster care. On average, caseworkers spend less than one hour per month in face-to-face time with each family on their caseload. While increased time with families is not a guarantee of improved outcomes, without it quality assessments and individualized service planning are not likely to improve significantly. The 2007-08 State budget provided \$9.7 million to reduce child protective caseloads, in addition to \$5 million in the previous year's budget. The additional caseworkers hired through this money are just now becoming fully trained and taking on full caseloads. Given the tight State budget situation, there have been no additional resources identified to reduce foster care and preventive caseloads.

The backlog in Family Court, especially in NYC, is a serious impediment to improving all outcomes for NYS' children. The implementation of New York's Permanency Legislation in late 2005 and early 2006, which required more frequent Permanency Hearings, coincided with an unanticipated sharp increase in child protective investigations in NYC and some other districts, combining to create the "perfect storm" for high caseloads for child welfare staff and family courts. Significant backlogs continue today. Funding for additional judges is proposed in the 2008-09 budget, but at this time it is unknown whether additional judges will be funded.

The following outcomes are areas in which OCFS recognizes the need to focus on improvement efforts:

Safety Outcome 1:

Children are, first and foremost, protected from abuse and neglect.

Item 2: Repeat Maltreatment.

- New York's performance on measures of recurrence of abuse and maltreatment demonstrate a need for improvement in this area. While the federal measure is affected by unrelated issues such as timeliness of investigation determinations, data integrity of matching the names of family members among reports on the same family, and

consolidating investigations (combining a first and second report into one investigation), nonetheless OCFS recognizes this as an area in need of improvement.

In order to better understand the issues behind the performance, OCFS reviewed hundreds of cases to assess the degree to which caseworks and supervisors were appropriately applying the Risk Assessment Profile (RAP) structured decision making process and instrument to support the identification of higher risk cases. Trends in misapplication were identified and work has gone into training staff on avoiding common errors and in appropriate use. In addition, through a work group of OCFS, local districts, and ACS staff, wording changes have been proposed for both the safety assessment and the RAP that should make them easier to understand and to use. Consultation with the National Resource Center for Child Protective Services was very helpful to OCFS and ACS in re-thinking parts of its safety assessment. Used correctly, this protocol supports and guides child welfare staff in assessing future risk and identifying families with the highest risk so they can receive services to prevent recurrence.

Safety Outcome 2:

Children are safely maintained in their homes whenever possible and appropriate.

Permanency Outcomes 1:

Children have permanency and stability in their living situations.

Permanency Outcome 2:

The continuity of family relationships and connections is preserved for children.

- NYS has made great strides in family engagement strategy, but additional work is needed since we know, through quality assurance efforts including monitoring and technical assistance provided by OCFS' Regional Offices, that all caseworkers are not engaging each family from their first contact with the child welfare system. In addition, a continuous improvement agenda is needed to support early, frequent and developmentally appropriate visitation between parents and children, given the documented correlation between frequent visitation and the likelihood of reunification.

Permanency Outcomes 1:

Children have permanency and stability in their living situations.

Permanency Outcome 2:

The continuity of family relationships and connections is preserved for children.

- Better engagement of parents and relatives in planning for their children's care, from preventing foster care placement to adoption to becoming permanency resources, needs strengthening in New York. Caseworkers need to be supported in searching for relatives and working with them once found. Additional information needs to be made available to relatives to help them understand their options, especially in regard to different types of family court proceedings.
- While the data show some improvement in timeliness to adoption in the State, significant improvement is still needed. New York's challenge is to implement strategies that streamline the process while protecting birth parents' rights, resulting in a demonstrated sense of urgency for children in foster care to have permanency. Statewide

implementation of concurrent planning is one strategy that would be helpful. One parent participating in the Statewide Assessment summed the issue up as follows: “You need to hurry up – these are families’ lives!”

- Stakeholders repeatedly raised the need for increased post permanency support services, especially post adoption services. OCFS funds some post adoption programs through a competitive bid process and the new Bridges to Health program is available to children in foster care as they move to an adoptive placement and adoption. Additionally, open-ended 65% State/35% local funds are available for post adoption services but many local districts say they do not have sufficient matching funds for these programs.
- While significant progress has been made in advancing the adolescent permanency agenda in NYS, additional work is needed to promote adoption for adolescents and find permanency resources for every young person leaving foster care who cannot safely return home. The poor outcomes for youth aging out of foster care to “independence” are well documented nationally; connections to family and caring adults are the most critical step to improving outcomes for youth in care. A tracking system is needed in NYS to measure outcomes for youth leaving foster care. Additional funding for implementation of the recently issued federal Chafee regulations would be helpful so NYS can design and develop the system so that it comports with federal requirements.

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

- This was identified as an area in need of improvement but one that the child welfare system cannot achieve in isolation. Some strengths were identified during the Statewide Assessment, including feedback from stakeholders that foster parents have become more involved with the educational planning for children and more children remain in their school district of origin thereby reducing disruption in the educational process. However, the need for a greater focus on the educational achievement of children in the child welfare system was identified, including the need for preparing youth for post secondary educational/vocational opportunities including college. There was recognition that high school graduation, while important, does not prepare youth for earning a meaningful wage to support themselves and their families in the future.

Case Review System:

- The results of the Statewide Assessment show a need for increased parent participation in Service Plan Reviews and the planning process that leads to the development of the service plan. The increased frequency of family team conferences in ACS’ IOC initiative holds promise for increased family participation in NYC.

Service Array and Resource Development:

- Availability of and accessibility to services is problematic in some places and with some types of services. More services, including caseworker contacts with children, parents, and foster parents, need to be available evenings and/or weekends to support working

parents. There are also waiting lists for some services, including mental health services and especially services for children with developmental disabilities. A lack of safe and affordable housing, especially in large urban areas, is a barrier for some families being able to care for their children and to have their children discharged from foster care. Access to appropriate housing is also a barrier to success for some youth leaving foster care as adults.

- 3. Recommend two additional sites for the onsite review activities, using the strengths and areas needing improvement noted in 1 and 2 (the State's largest metropolitan area is a required location). Attempt to select sites in which the issues identified through the Statewide Assessment will be present and observable. Note the rationale for selecting these sites; if there are no issues that require further examination during the onsite review, explain which factors the State considered in site selection (for example, the need for a mix of rural and urban areas or for areas with typical practices). When making recommendations, the State should include all available data, including comparative data for the suggested sites in relation to statewide data, if available.**

In addition to NYC, NYS' largest metropolitan area, OCFS has already reached agreement with ACF that the two additional sites for the CFSR on-site review in May 2008 will be Onondaga and Rockland Counties. Below is a summary of performance data for each of those sites and a brief description of each county.

County Data:

Performance on Permanency Composite 1

	Percent of Children who reunify in Less than 12 months	Median time to Reunification of those children who reunify	Child of N Cohort percent who reunify in less than 12 months	Child of X Cohort-Percent who re-enter care in less than 12 months	Unweighted County Composite Score
Onondaga	66.9%	6.7	53.8%	9.4%	0.22
Rockland	65.9%	9.7	41.7%	6.7%	0.08

Performance on Permanency Composite 2

	Of Children exiting to Adoption-Percent who exit in less than 24 months	Median Time for All Adoptions	Of those children in care 17 or more months as of the First Day of the Year-Percent that exit to Adoption by the end of the year	Of those child in care 17 or more months as of the First day of the Year- Percent who become legally free	Of those children who become Legally Free during a year-what percent are adopted within 12 months of	Unweighted County Composite Score
Onondaga	21.2%	37.7	23.4%	16.4%	49.2%	-0.04
Rockland	56.3%	17.2	23.3%	6.3%	90.9%	0.71

Absence of Recurrence Measure

	Absence of Recurrence Measure 2006	Absence of Recurrence Measure 2005
Onondaga	87%	89%
Rockland	90%	89%

Onondaga County - 2006 Data: During 2006, Onondaga County received a total of 4,178 child protective reports, a decline of 7.6% over 2005 (4,520). The number of children receiving preventive services as of December 31, 2006 decreased 12.9%, to 1,742, down from 2,001 on December 31, 2005. Onondaga County had a total of 437 children in foster care on December 31, 2006. This was a decline of 9.3% (482) over December 31, 2005. Lastly, there were 91 children who were legally freed, with a goal of adoption and not yet adopted on December 31, 2006, an increase of 4.6% (87) over December 31, 2005.

Onondaga Child Welfare Practice and Initiatives: Since the last CFSR, Onondaga revised its preventive services contracts and reduced the number of agencies providing preventive services from 20 down to three. An emphasis on safety and risk has been their focus. The district has been collaborating with other agencies, specifically mental health in providing wrap-around-services to children and families. The district is currently using the Child and Adolescent Needs and Strengths Assessment. They are currently training staff to promote effective, long term family engagement with preventive services, developing a multidisciplinary team of child welfare staff to create consistency in their approach to safety and permanency across all program areas, and improve supervision of staff.

Onondaga County is also one of nine districts planning to participate in the Substance Abuse Collocation project. Additionally, they are participating in the CPS/DV collocation initiative. They have also expressed interest in piloting CPS Differential Response.

Onondaga County's Service Population: On December 31, 2006, there were 437 children in foster care, 91 children freed for adoption with a goal of adoption and waiting to be adopted and 1,742 children receiving preventive services in Onondaga County.

Rockland County – 2006 Data: During 2006, Rockland County received a total of 1,227 reports, an increase of 20.3% over 2005 (1,020). The number of children receiving preventive services on December 31, 2006 decreased .6%, to 482 from 485 on December 31, 2005. Rockland County had a total of 93 children in foster care on December 31, 2006. This was a decline of 5.1% (98) over December 31, 2005. Lastly, a total of 11 children were legally freed with a goal of adoption and not yet adopted on December 31, 2006. This is a decrease of 15.4% (13) over December 31, 2005.

Rockland County Child Welfare Practice and Initiatives: Rockland County continues to focus on preventive services for families. The PINS Prevention Unit continues to provide casework services to youth at risk of placement or court involvement with great success. In 2005, 95% of youth receiving these services were diverted from out of home placements, and 88% of the cases avoided additional family court involvement. Relative caregivers participated in the Relatives as Parents Program (RAPP), a Community Optional Preventive Services program that offers services and supports to relative caregivers. Of the 40 families who participated, 100% indicated their satisfaction with the program.

Service Population

On December 31, 2006, there were 93 children in foster care, 11 children freed for adoption with a goal of adoption and waiting to be adopted, and 482 children receiving preventive services in Rockland County.

4. Provide comments about the State's experience with the Statewide Assessment Instrument and process. This information will assist the Children's Bureau in continually enhancing the Child and Family Services Review (CFSR) procedures and instruments.

OCFS believes that the Statewide Assessment process is a key component of improving outcomes. Parallel to the casework process with families, a good assessment of a child welfare system is essential before an improvement plan is developed so there is clarity about the underlying causes of performance where improvements are needed. OCFS sought widespread stakeholder input into the development of the Statewide Assessment. The focus groups that were held, as well as the OCFS staff and external stakeholders who participated in the Statewide Assessment development are included later in this section of the document.

The input of stakeholders revealed few surprises but rather reinforced the areas in which there has been progress and helped bring clarity about those areas in which further improvement is needed. Caseload sizes for caseworkers and backlogs in family courts, for example, were overarching themes heard repeatedly from stakeholders across the State, reinforcing a need for additional resources if significant improvement in outcomes is to be achieved. While getting additional clarity about these issues helps with the assessment process, the solutions are more elusive in a State facing a multi-billion dollar deficit in the upcoming budget year.

Challenges in the Statewide Assessment process include a lack of new resources at OCFS to complete the process and do it well. Staff had to be redeployed from other assignments, leaving some work undone while the CFSR moved forward. Done well, the Statewide Assessment provides the foundation for the development of the PIP and builds momentum for immediately developing and implementing a PIP. However, given limited resources, OCFS must delay development of the PIP until after the on-site review, losing valuable time to begin implementing improvement strategies. It would be helpful if in the third round of CFSR review, states were given flexibility to waive the on-site review and move right to PIP development if the Statewide Assessment is done well.

One additional challenge in the Statewide Assessment format is that the structure of each item and systemic factor limits the state's ability to identify overarching themes and factors that affect all items and factors. Again using the example of caseload sizes and family court backlogs, the state is left to repeat those themes in each affected item and factor. It would be helpful to have a section where such overarching issues, which might include budget crises, class action lawsuits, etc., could be identified as affecting all items.

5. Provide the names and affiliations of the individuals who participated in the Statewide Assessment process; please also note their roles in the process.

Prior to the development of the Statewide Assessment, NYS determined that this CFSR would provide an excellent opportunity to galvanize efforts around improving outcomes in child safety, permanency and child and family well being. In order to be successful in improving outcomes, OCFS is keenly aware of the necessity of inclusion of all stakeholders in the process – from beginning to end. OCFS believes that both the quantity and quality of input received has been successful. It is worthy of note, however, that there are many voices that OCFS did not hear and it is important that as we take our next steps with the PIP, we need to continue to engage those who need our services, even those who may not want our services.

The Statewide Assessment Team (SAT) is comprised of two groups: the SAT Leadership Team and the SAT Committees.

The **SAT Leadership Team** provides oversight in the CFSR process and participates in the CFSR planning calls. This Team will continue in this role throughout the CFSR. The SAT Leadership Team consists of the following OCFS leaders:

Dee Alexander, Federal Legislative Liaison, OCFS, Office of Legal Affairs
 Lillian Denton, Data Warehouse, Strategic Planning and Policy Development
 Jennifer Goldman, CWCS, Office of the Deputy Commissioner
 Rayana Gonzales, Administration Division, Bureau of Budget Management
 Renee Hallock, CWCS, Office of the Deputy Commissioner
 Lee Lounsbury, CWCS, Office of Permanency and Program Support
 Jane Lynch, Deputy Commissioner, CWCS
 Nancy Martinez, Strategic Planning and Policy Development
 William McLaughlin, Strategic Planning and Policy Development
 Susan Mitchell-Herzfeld, Evaluation and Research, Strategic Planning and Policy Development
 Joseph Nitsche, Office of Legal Affairs
 Alan Pfeffer, Office of Legal Affairs
 Sheila Poole, CWCS, Office of Regional Operations
 Edna Mae Reilly, Administration Division
 Joanne Ruppel, Evaluation and Research, Strategic Planning and Policy Development
 Claire Strohmeier, CWCS, CFSR Coordinator
 Andrea Sweda, Administration Division, Bureau of Budget Management

The other SAT guidance group, the **SAT Committees**, consists of seventy-three (73) internal and external stakeholders who brought expert knowledge and experience to focused, evaluative discussions around the CFSR outcomes and systemic factors. The SAT Committees played a vital role in the development of the Statewide Assessment. Their membership and the outcome/systemic factor that they analyzed are listed below:

Statewide Assessment Team: Seventy-three Committee Members

Qualifications: Considerable knowledge and experience in NYS policy and practice related to the child welfare field, specifically the CFSR Outcome and Systemic Factor items.

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

SAT Committee Team Members:

- Glenn Humphreys, OCFS, Albany Regional Director
- Heidi St. John, Saratoga County CPS Supervisor
- Maria Young, Monroe County
- Karen Buck, OCFS, Rochester Regional Office
- Jamie Greenberg, OCFS, Strategic Planning and Policy Development
- Roberta Upadhyay, OCFS, Strategic Planning and Policy Development

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

SAT Committee Team Members:

- Jack Klump, OCFS, Syracuse Regional Director
- Brian McKee, Onondaga Co. Department of Social Services
- Mark Thayer, Onondaga County Case Management
- Linda Lopez, The Salvation Army of the Syracuse Area
- Nancy Kuss, Onondaga County Case Management

Permanency Outcome 1 (Items 5-7): Children have permanency and stability in their living situations.

SAT Committee Team Members:

- Sheila Poole, OCFS, Office of Regional Operations
- Sudha Hunziker, Parsons Child and Family Center
- Pat Beresford, OCFS, NYC Regional Director
- Christine Keisel, NYS Court Improvement Project

Permanency Outcome 1 (Items 8-10): Children have permanency and stability in their living situations.

SAT Committee Team Members:

- Linda Brown, OCFS, Office of Regional Operations
- Frank Woods, NYS Court Improvement Project
- Marian Logan, Albany County Department of Social Services
- Cheryl Larrier, OCFS, NYC Regional Office
- Diana Fenton, OCFS, Strategic Planning and Policy Development
- Janice Bibb-Jones, Faith and Community-Based Initiatives, OCFS, Strategic Planning and Policy Development

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

SAT Committee Team Members:

- Linda Kurtz, OCFS, Rochester Regional Director
- Sue Mustard, Birth Parent and Parent Advocate, Hillside Family of Agencies

- Kerri Barber, OCFS, Albany Regional Office
- Clyde Comstock, Hillside Family of Agencies
- Theresa Donovan, Chemung County Department of Social Services
- Patricia Heaman, OCFS, Rochester Regional Office
- Michael Katch, NYC Administration for Children’s Services
- Brian McKee, Onondaga County Department of Social Services
- Deretha Watterson, Chemung County Department of Social Services
- Mary Auflger, Office of Court Administration, Court Improvement Project
- Bob Resnick, OCFS, Kinship Care Program

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

SAT Committee Team Members:

- Bill McLaughlin, OCFS, Strategic Planning and Policy Development
- Diane O’Connor, Foster/adoptive parent, Advocate
- Rudy Pons, OCFS, NYC Regional Office
- Mike Rivest, OCFS, Division of Juvenile Justice and Opportunities for Youth
- Shauna Clinton, NYS Office of Alcoholism and Substance Abuse Services

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

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

SAT Committee Team Members:

- Brenda Smalls, OCFS, NYC Regional Office
- Mary Skidmore, OCFS, Strategic Planning and Policy Development
- Suzy Sanford, Graham Windham Agency
- Patricia Ronayne, NYS Education Department
- Fred Meservey, NYS Office of Alcoholism and Substance Abuse Services
- Ken Gnirke, NYS Office of Mental Health
- Jim Raucci, NYS Department of Health

Statewide Information System

SAT Committee Team Members:

- Carolyn Glisson, OCFS, Information Technology
- Lillian Denton, OCFS, Strategic Planning and Policy Development
- Michelle Rafael, OCFS, Strategic Planning and Policy Development

Case Review System:

SAT Committee Team Members:

- Michelle Rafael, OCFS, Strategic Planning and Policy Development
- Kathleen DeCataldo, NYS Permanent Judicial Commission on Justice for Children
- Mary Miller, OCFS, Buffalo Regional Director

Quality Assurance System

SAT Committee Team Members:

- Gail Haulenbeek, OCFS, Office of Regional Operations

- Susan Singh, NYC Administration for Children’s Services
- Brian McKee, Onondaga County Department of Social Services

Staff and Provider Training

SAT Committee Team Members:

- Lisa Futtner, OCFS/SUNY Albany Professional Development Program
- Mary Kazmierczak, OCFS/SUNY Albany Professional Development Program
- Kim Stanz, Chemung County Department of Social Services
- Kerri Barber, OCFS, Albany Regional Office
- Bill Marszalek, Northeast Parent and Child

Service Array and Resource Development

SAT Committee Team Members:

- Renee Rider, OCFS, Office of Protective and Community Support
- Judy Richards, OCFS, Children and Family Trust Fund
- Jim Purcell, Council on Families and Child Care Agencies
- David Woodlock, NYS Office of Mental Health
- Nancy Martin, NYC Administration for Children’s Services
- Diane Leske, Council on Families and Child Care Agencies

Agency Responsiveness to the Community

SAT Committee Team Members:

- Larry Pasti, OCFS, Strategic Planning and Policy Development
- Lisa Gordon, OCFS, Child Welfare and Community Services
- Mark Madden, NYS Office of Temporary Disability Assistance
- Janice McNamara, Fulton County Department of Social Services
- Rob Picelell, NYS Office of Alcoholism and Substance Abuse Services

Foster and Adoptive Home Licensing, Approval, and Recruitment

SAT Committee Team Members:

- Renee Hallock, OCFS, Office of the Deputy Commissioner
- Brenda Rivera, OCFS, Adoption Services
- Cheryl Larrier, OCFS, NYC Regional Office
- Patricia Paul, Albany County Department of Social Services
- Mary Hall, St. Christopher-Ottilie
- Kristen Northrup, OCFS, Legal Affairs Unit
- Carol Van Volkenberg, SUNY Albany, Professional Development Program

The Statewide Assessment was developed using the following process:

1. **Input from the field:** OCFS received information from individuals that represented all domains; their comments have been woven throughout the Statewide Assessment. Input was received from the following groups of stakeholders:
 - Over 35 focus groups and interviews representing family court judges and referees, tribal nations, foster and adoptive parents, grandparents, youth, CASAs, birth parents,

- Statewide Permanency Planning Team, Citizen Review Panels, CPS caseworkers and supervisors, family court clerks, Round 1 CFSR PIP Strategy coordinators and workgroups, Court Improvement Project, Local Social Service directors and commissioners, and Crime Victims Boards. (See Appendix A for complete listing.)
- Foster Youth Survey: 1,342 survey respondents (youth over age 14 in foster care).
 - A review of relevant white papers and policy documents.
2. **OCFS compiled information** pertinent to each Outcome and Systemic Factor, including:
 - Policy descriptions
 - Data and summarizing charts
 - Focus group, interview and survey summaries
 - Description from the 2001 CFSR Statewide Assessment, Final Report and PIP.
 3. **The Thirteen (13) SAT Committees met** and reviewed the information prepared in Step 2. Using that information and their own expertise, evaluative discussions occurred. The evaluative SAT Committee discussions informed the response to each Outcome and Systemic Factor included in the Statewide Assessment.
 4. **Displayed Thinking (Storyboarding) Event:** Input culminated with a “Storyboarding” event at OCFS in January 2008. This event provided information represented in response to the first question in Section V.

Two representatives from each SAT Committee reported the top strengths and areas for improvement from their Outcome or Systemic Factor discussion. This event was attended by approximately 50 stakeholders, including OCFS employees representing all regions of the State, birth parents, local district staff including ACS, voluntary agency staff, and staff from the Court Improvement Project. The OCFS Commissioner attended part of the session and OCFS was pleased to welcome representatives from the ACF regional office.



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Appendix A Focus Groups, Surveys, Existing Documents

Focus Groups

- Adolescent Services and Outcomes Workgroup. “Adolescent Strategy Workgroup: Child & Family Services Review Focus Group”. 27 Nov. 2007.
- Albany Regional Office (Region IV ARO). “Region IV Directors of Services; Child & Family Services Review Focus Group”. 6 Dec. 2007.
- Albany Regional Office (Region IV ARO). “Region IV Foster Care Supervisors; Child & Family Services Review Focus Group”. 14 Dec. 2007.
- Albany Regional Office (Region IV ARO). “Region IV CPS Supervisors; Child and Family Services Review Focus Group”. 28 Nov. 2007.
- Capital District Adoption Strategy Group. “Adoption Strategy Coordinators: Barriers and Successes; Child and Family Services Review Focus Group”. 4 Dec. 2007.
- Capital District Adoptive Parents Support Group. “Recruitment, Licensing, Training...Child and Family Services Review Focus Group”. 3 Jan. 2008.
- Capital District Grandparents Support Group. “Child & Family Services Review Focus Group”. 8 Jan. 2008.
- Court Appointed Special Advocates (CASA). “Statewide CASA Team Child and Family Services Review Focus Group” 3 Dec. 2007.
- Court Appointed Special Advocates (CASA). “Ulster County CASA Directors & Managers; Child and Family Services Review Focus Group”. 2 Dec. 2007.
- Court Improvement Program. “Court Appointed Special Advocates (CASA) and the Office of Court Administration (OCA) Child & Family Services Review Focus Group”. 13 Nov. 2007.
- Department of Probation and Correction Alternatives (DPCA). “Juvenile Delinquency Diversion Rule Revision Workgroup; Child & Family Services Review Focus Group” 4 Dec. 2007.
- Eastern Citizen Review Panel Meeting. “Input for the Child & Family Services Review Statewide Assessment Focus Group”. 7 Dec. 2007.
- Genesee County Family Court. “Family Court & Service Providers; Success & Barriers to Permanency: Child & Family Services Review Focus Group”. 8 Jan. 2008.

Monroe County Family Court. “Permanency & Well Being Successes & Challenges: Child & Family Services Review Focus Group”. 3 Jan. 2008.

Native American Family Services Commission. “Tribal Feedback Child & Family Services Review Focus Group”. 15 Nov. 2007.

New York City Family Court. “Family Court Judges: Permanency; Child & Family Services Review Focus Group”. 19 Dec. 2007.

New York Partnership for Family Recovery. “In Depth Technical Assistance (IDTA) Summary of Focus Group Findings” (approx. 23 youths interviewed in four focus group sessions held April 19, 23 & 24, 2007). 18 June 2007.

New York State 5th Judicial District. “Family Court Judges; Services, Permanency & Adoption Successes & Barriers: Child & Family Services Review Focus Group”. 15 Nov. 2007.

Niagara County LDSS & Family Court. “Permanency Success & Barriers: Child & Family Services Review Focus Group”. 6 Dec. 2007.

NYS OCFS Interview with Nine Youths in Foster Care. “Northeast Parent and Child, and the Jefferson County Children’s Home Youths’ Child and Family Services Review Focus Group”. 14 Jan. 2008.

NYS OCFS Program Improvement Plan (PIP) Strategy Coordinators. “Recurrence, Absence of Abuse and Permanency: Child and Family Services Review Focus Group”. 11 Dec. 2007.

NYS OCFS. “CFSR Statewide Assessment Displayed Thinking (Storyboarding) Session”. 17 Jan. 2008.

OCA Chief Court Clerks and Deputies. “Association Seminar; Permanency Successes & Barriers: Child & Family Services Review Focus Group”. 26 Oct. 2007.

Oneida County Area Foster Parent Group. “Permanency: Child & Family Services Review Focus Group”. 15 Nov. 2007.

Oneida County Stakeholders (Court Improvement Plan). “Permanency & Well Being: Child & Family Services Review Focus Group”. 28 Nov. 2007.

Rochester Regional Office (Region II RRO). “Region II Parents Group; Experiences with CPS: “Child & Family Services Review Focus Group”. 24 Jan. 2008.

Safety & Risk and Strategy Workgroup. “Timeliness & Recurrence: Child and Family Services Review Focus Group”. 11 Nov. 2007.

Southern Tier Domestic Violence/Crime Victims Board Coalition. “Barriers to Keeping Children Safe in DV Situations, Child and Family Services Review Focus Group”. 12 Dec. 2007.

Statewide Permanency Planning Team (SPPT). “Safety & Permanency: Child & Family Services Review Focus Group”. 29 Nov. 2007.

Syracuse Collocation Group. “Safety, Risk & Permanency: Child & Family Services Review Focus Group”. 29 Nov. 2007.

Syracuse Regional Office (Region III SRO) Directors/Deputy Meeting. “Family Engagement & Visitation: Child and Family Services Review Statewide Assessment Focus Group”. 6 Dec. 2007.

The Children’s Village (NYC). “Birth Parents Interviews: Child & Family Services Review Focus Group”. 22 Jan. 2008.

Surveys

Center for Development of Human Services (CDHS). “Foster Parent Survey”. 2004.

NYS OCFS. “Survey for Youth Currently in Foster Care in New York State”. 14 Jan. 2008.

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Buffalo Regional Office (Region I BRO) and Rochester Regional Office (Region II RRO). Youth Speakout Event. “Youth Speakout Report.” 27 Oct. 2007 at Monroe County Community College.

Carrión, Gladys, Esq. Commissioner, NYS OCFS. “Strengthening Partnerships: Message from the Commissioner”. OCFS Family Newsletter. Nov. 2007.

Carrión, Gladys, Esq. Commissioner, NYS OCFS. “Testimony on Agency Priorities and Budget Requests”. 25 Oct. 2007.

DeCataldo, Kathleen R., Esq. and Carroll, Karen, Esq. “Adoption Now: A Joint Initiative of New York’s Courts and Child Welfare System”. Child Welfare League of America. 2007.

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New York State Child Welfare Court Improvement Project (CIP). 2006 Court Improvement Project Annual Report. 1 Aug. 2007.

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New York State Citizen Review Panels for Child Protective Services in New York City. 2006 Annual Report and Recommendations. 28 June 2007.

New York State Citizen Review Panels for Child Protective Services. “Partnering with Parents: An Approach that Puts Parents in the Driver’s Seat.” 2007 Annual Report and Recommendations.

New York State Committee on Restraint and Crisis Intervention Techniques. “Behavior Support and Management: Coordinated Standards for Children’s Systems of Care.” Final Report to the Governor and Legislature. Sept. 2007.

New York State. OCFS. Title IV-E Workgroup. Sustaining Progress, Sustaining Success. 20 Dec. 2006.

New York State. OCFS. Title IV-E Workgroup. Sustaining Progress, Sustaining Success: Compliance with Title IV-E Court Related and Non Court Related Eligibility Requirements. (Training DVD Script). October 2007.

New York State. OCFS. White Paper Report. Keeping Siblings Connected: A White Paper on Siblings in Foster Care and Adoptive Placements in New York State. June 2007.

New York State. OCFS. Adolescent Services and Outcomes Guidance Practice Paper. April 2006.

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Stashenko, Joel. "Pilot Plan Puts Social Workers into Brooklyn Family Court." New York Law
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Youth Speakout Event. Youth Speakout Summary. 22 Aug. 2007 at Herkimer County
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Appendix B Acronym Key

ACS:	New York City Administration for Children’s Services
ADM:	Administrative Directive Memorandum
AFCARS:	Adoption and Foster Care Reporting System
AFSA:	Adoption and Safe Families Act
AMS:	Adoption Monitoring System
APA:	NYC ACS Agency Program Assistance Department
APHSA:	American Public Human Services Association
APPLA:	Another Planned Permanent Living Arrangement with a Permanency Resource
ARTS:	Automated Restraint Tracking System
ASAP:	Alcoholism and Substance Abuse Provider
ASRN:	Adolescent Services Resource Network
B2H:	Bridges to Health Home and Community Based Medicaid Services Waiver
BICS:	Benefit Issuance and Control System
BOCES:	Board of Cooperative Educational Services
BSW:	Bachelor of Science in Social Work
CA/N:	Child Abuse/Neglect Reports
CAC:	Child Advocacy Center
CAR:	Comprehensive Adoption Report
CASA:	Court Appointed Special Advocates Assistance Program
CASAC:	Credentialed Alcoholism and Substance Abuse Counselor
CCRS:	Child Care Review Services
CCSI:	Coordinated Children’s Services Initiative
CDHS:	Center for the Development of Human Services
CFSR:	Child and Family Services Review
CHAMP:	Child Abuse Medical Provider Network
CIP:	NYS Court Improvement Project
CIPP:	Children of Incarcerated Parents Program
CMAP:	Case Management Automation Project
CMS:	U.S. Dept. of Health and Human Services Center for Medicare and Medicaid Services
COFCCA:	New York’s Council on Family and Child Care Agencies
CPS/DV:	Child Protective Services/Domestic Violence Collaboration Project
CPS:	Child Protective Services
CQCAPD:	NYS Commission on Quality of Care and Advocacy for Persons with Disabilities
CRP:	NYS Citizen Review Panel
CVB:	NYS Crime Victims Board
DDST:	Denver Developmental Screening Test
DMR:	Disproportionate Minority Representation
DOH:	NYS Department of Health
DPCA:	NYS Division of Probation and Correctional Alternatives
DV:	Domestic Violence

EQUIP:	NYC ACS' Evaluation and Quality Improvement Protocol
ETV:	Education and Training Voucher
FASP:	Family Assessment and Services Plan
FBH:	Foster Boarding Home
FCA:	Family Court Act
FES:	Family Engagement Specialist
FFP:	Federal Financial Participation
FFY:	Federal Fiscal Year
FPLS:	Federal Parent Locator Service
FTC:	Family Treatment Center
GIS:	Government Information System
GPS:	Group Preparation and Selective Model Approaches
GPS ₂ /MAPP:	Group Preparation and Selective Model/Model Approach to Partnerships in Parenting Training
HFNY:	Healthy Families New York Home Visiting Program
HHS:	US Department of Health and Human Services
ICPC:	Interstate Compact for the Placement of Children
ICWA:	Indian Child Welfare Act
IDTA:	In-Depth Technical Assistance
IEP:	Individual Education Program
IL:	Independent Living
INF:	Informational Letter
IOC:	NYC Improved Outcomes for Children
JD:	Juvenile Delinquent
LDSS:	Local District Social Services
LGBTQ:	Lesbian, Gay, Bi-Sexual and Transgender and Questioning Group
LTS:	ACS' Legal Tracking System
LUC:	New York City Legal Tracking System/UCMS/CONNECTIONS Data Share Project
MAPP:	Model Approach to Partnerships in Parenting
MAPS:	OCFS' Monitoring and Analysis Profile
MDT:	Multi-Disciplinary Team
MOU:	Memorandum of Understanding
MST:	Multi-Systemic Therapy
MSW:	Master of Science in Social Work
NAS:	Native American Services
NCANDS:	National Child Abuse and Neglect Data System
NCSACW:	National Center on Substance Abuse and Child Welfare
NYC:	New York City
NYPWA:	New York Public Welfare Association
NYS:	New York State
NYSWEC:	New York State Social Work Education Consortium
OASAS:	NYS Office of Alcohol and Substance Abuse Services
OBT:	Child Welfare/Child Protective Services Outcome Based Training
OCA:	NYS Office of Court Administration
OCFS/BT:	OCFS Bureau of Training

OCFS/CWCS:	OCFS Division of Child Welfare and Community Services
OCFS/DJJOY:	OCFS Division of Juvenile Justice and Opportunities for Youth
OCFS:	NYS Office of Children and Family Services
ODS:	Operational Data Store
OFT:	NYS Office for Technology
OMA:	On-going Monitoring and Assessment
OMH:	NYS Office of Mental Health
OMRDD:	NYS Office of Mental Retardation and Developmental Disabilities
OPDV:	NYS Office for Prevention of Domestic Violence
OTDA:	NYS Office of Temporary and Disability Assistance
PAMS:	NYC ACS Provider Agency Measurement System
PES:	ACS' Program Evaluation System
PHR:	Permanency Hearing Report
PINS:	Person in Need of Supervision
PIP:	Program Improvement Plan
PRP:	Primary Resource Person
RAP:	Risk Assessment Profile
RAPP:	Relatives as Parents Program
ROS:	Rest of State
SACWIS:	State Automated Child Welfare Information System
SAMHSA:	Substance Abuse and Mental Health Services Administration
SCR:	Statewide Central Register for Child Abuse and Maltreatment
SED:	NYS Education Department
SILP:	Supervised Independent Living Program
SIRS:	NYS Student Information Repository System
SPA:	Safety and Permanency Assessment
SPLS:	State Parent Locator Service
SPOA:	Single Points of Access
SPPD:	OCFS' Strategic Planning and Policy Department
SPPT:	Statewide Permanency Planning Team
SPR:	Service Plan Review
SSPS:	Statewide Services Payment System
STARS:	Statewide Training and Registration System
SUNY:	State University of New York
TANF/EAF:	Temporary Assistance to Needy Families/Emergency Assistance to Families
TANF:	Temporary Assistance to Needy Families
TFBH:	Therapeutic Foster Boarding Home
TPR:	Termination of Parental Rights
UCMS:	Universal Case Management System
UCR:	Uniform Case Record
UCS:	Unified Court System
WMS:	Welfare Management System
WRMA:	Walter R. McDonald and Associates
YAP:	Youth Advocacy Program
YIP:	Youth in Progress