

STATE OF MAINE



Department of Health & Human Services

JUNE 2009 ANNUAL PROGRESS and SERVICES REPORT

Final Report for Child & Family Services Plan for Fiscal Years 2005-2009

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I. Introduction: Final Report for Fiscal Years 2005-2009

Maine's Office of Child and Family Services (OCFS) has made significant progress toward the goals established in the FY 2005-2009 State Plan. Since the 2003 Child and Family Services Review (CFSR), the Office of Child and Family Services (OCFS) has continued to develop goals to improve practice and strengthen its response to the needs of children and families.

Following the 2003 CFSR, the 2004 Program Improvement Plan provided the structure by which the OCFS developed its CFSP. Following the successful completion of the PIP in 2006, the identified goals were of such critical importance for meeting outcomes for children and families that efforts continued to move beyond the PIP targets. Two goals were discontinued (Goals 8 & 18). Goal 8 (*Ensure that each child in custody is placed with a family who is committed to long-term care or provide services to help the child transition to independent living*) was discontinued as Maine OCFS was successful in getting Long Term Foster Care removed from the State statute as we recognized all children, despite their age, need permanency and family connections. Goal 18 (*Increase the timeliness of response to reports of maltreatment in foster care*) was successfully completed and thus discontinued while two goals (14 & 15) were combined into one, Goal 12 (*Increase and enhance caseworker face-to-face contacts with children and parents*) as they were related to one another.

II. Final Review of Progress toward 2005-2009 Child and Family Service Plan Goals

The action steps for each of the goals presented in this plan were for the first two years driven by Maine's 2004 Program Improvement Plan. Once the Program Improvement Plan was successfully completed, action steps were revised and new steps added for 2007-2009. These changes are identified in this review. When the goals were revised in 2007, the numerical order changed. The order in which they are listed for the purposes of this review is consistent with the 2007 revisions however the goal number for the initial plan is also included. These changes are documented to enable the reader to easily understand and follow them.

Goal 1: Improve the quality and timeliness of receiving and responding to reports of child abuse and neglect.

Goal 1 includes five action steps presented in the 2005-2009 Plan:

- Quality Assurance will establish a baseline of first face-to-face contact through review of a random sample of cases.
- BCFS (OCFS) will rewrite policy to reflect shortened timeframes for initial faceto-face contact with children and families.
- Revised policy will be discussed and disseminated with intent of implementations at Statewide Supervisory meetings followed by district staff meetings.
- BCFS (OCFS) will increase the number of safety and child and family assessments to be completed within established timeframes.
- New protocol will address the "respond by" time for face-to-face contact.

Progress through 2007:

• Quality Assurance unit initially established a baseline of 58% of assessments meeting the "respond by date". This baseline was reflective of policy and practice prior to the revised policy implemented in May 2005.

• Assessment policy timeframes were discussed in Statewide Supervisors meetings in October 2004 and January 2005.

• Policy for more timely response was drafted by District staff in early 2005, approved by the Senior Management Team in March 2005 and implemented statewide in May 2005.

• Staff consistently met or exceeded the goals set for the number of safety assessments completed within the timeframes.

• Staff consistently met or exceeded the goals set for the number of Child and Family assessments completed within timeframes.

• Policy for more timely initial face-to-face contact was finalized in October 2005.

• All Alternative Response Program (ARP) agencies were granted access to the MACWIS report module, to enable instantaneous referral of CA/N reports to ARP agencies and to capture ARP documentation in MACWIS.

Goal 1 was revised in 2007 and includes four actions steps:

• Using the new Child Protection Assessment policy, OCFS Child Welfare caseworkers will increase the percentage of assessments in which face-to-face contacts are completed within the specified "respond by" time of 120 hours following the receipt of report.

• Monthly management reports will track district specific data on the percentage of cases in which face-to-face contact decreased within 120 hours of receipt of report.

• OCFS will appropriately assign 100% of all child abuse reports targeting at least 60% to be assigned by OCFS staff and 40% assigned to the Alternative Response Program.

• Community Intervention Programs will follow contact timelines established in their Alternative Response Policy.

Progress from 2007 thru 2009:

• Regarding the policy expectation of face-to-face contact within the 120 hours caseworker compliance averaged around 73% statewide. This ranged from a low percentage of 66% in 12/06 to a high percentage of 82% compliance reached in 3/07.

• • OCFS recognized that children and families deserved a more timely response to reports of child abuse and neglect than the expectation in the revised 2005 Assessment policy. The Child Protection Assessment policy was again revised in September 2007 to set a new standard of initial response to children and families within 72 hours of the report. This included interviewing all alleged child victims and primary caregivers and making at least one home visit within the 72 hour timeframe.

• Since implementation, caseworker compliance with this policy expectation has averaged 73% statewide. A high percentage of 83% compliance was reached in October 2007 and a low percentage was 64% in January 2008.

• Monthly management reports provided to District Program Administrators and senior management contains district specific data on how frequently face-to-face contact occurs within 72 hours.

• OCFS had a goal to appropriately assign 100% of all child abuse reports targeting at least 60% to be assigned to OCFS staff and 40% assigned to Alternative Response program agency. This was exceeded in 2007 with 71% of reports assigned to OCFS casework staff for assessment and 68% of reports assigned in 2008. For the first 4 months of 2009 an average of 73 % of assessments have been assigned to OCFS staff.

• DHHS sent 3211 CPS reports to Alternative Response Program (ARP) agencies during the 2008 calendar year. Of those, 2381 (75%) were opened for ARP services/assessment.

• Effective July 1, 2008, there were numerous contract changes for ARP agencies to better meet the needs of families and children. These included: 30-day timeframes for safety assessments instead of 35 days, three days for initial family contact instead of five days, a maximum of four months of case management services instead of six, and all children are to be screened for referral for children's behavioral health services.

Goal 2: Provide appropriate quality services to families to protect children in their own homes and to prevent removal.

Goal 2 includes four action steps presented in the 2005-2009 Plan:

- Establish a baseline for service provision to families to protect children in their own homes.
- Conduct a statewide needs assessment of services, identify gaps in service areas and develop plans to address these gaps.
- Ensure that assessments more accurately reflect issues related to harm to a child.
- Ensure that Child and Family Plans more accurately reflect issues related to harm to a child.

Progress through 2007:

• Baseline for service provision to children to prevent removal was established by Quality Assurance identification of the percentage this was considered to be strength.

• The Statewide Needs Assessment was completed. This report was reviewed by Senior Management in October 2004 and finalized in November 2004.

• Quality Assurance developed a baseline for the percentage of assessments that accurately reflected issues of harm to a child. That baseline was set at 69% of cases.

• *A statewide supervisory initiative addressing assessments that accurately reflect issues of harm to children, which included training, was completed in June 2004.*

90% of staff received training in Motivational Interviewing skills by September 2004.

• A baseline percentage of Child and Family Plans that accurately reflect issues of harm to children was established by Quality assurance record reviews. That baseline of 60% was exceeded for the first two quarters of the 2004 Program Improvement Plan.

• New staff is trained in the use of Family Team Meetings to more effectively develop case plans that reflect the families needs while ensuring child safety.

• Staff were trained on the Assessment Policy which was finalized in August 2005.

• Domestic Violence Policy was finalized in November 2005.

Goal 2 was revised in 2007 and includes six actions steps:

• Following the Child Protection Assessment, families in need of Child Protective Services will be engaged in a Family Team Meeting to develop a service plan to meet identified needs to increase child safety and decrease risk of removal.

• Upon completion of the Child Protection Assessment, appropriate cases will be assigned to the Community Intervention Programs to provide in-home services to increase child safety and decrease risk of removal of the child(ren) in the home due to abuse/neglect.

• OCFS staff will engage families in planning for services needed to ensure their children's safety.

• OCFS Child Welfare caseworkers or CIP's will meet monthly with family members to assess the need for and the effectiveness of services being provided to increase child safety.

• OCFS will develop a plan for implementing evidence-based practices to improve services to children and families.

• To support the family so the child may safety remain in the home, OCFS will expand the availability of Wraparound services and Intensive Family Preservation by establishing community-based wraparound demonstration sites throughout the state and by piloting an intensive family preservation program.

Progress through 2007-2009:

• OCFS continues to engage family members in planning by arranging a family team meeting, which involves all people in the family as well as any people identified as a support to the family.

• In calendar year 2008, OCFS referred 892 post assessment cases to the ARP agencies to provide in-home services.

• OCFS behavioral health experts presented information related to evidence based practice in district offices statewide. Medication guidelines and training have also been provided to district casework staff.

• • The Wraparound Maine Initiative, based on John Vandenberg's high fidelity Wraparound model, continues to establish itself. In the fall of 2008, this program was expanded to include the Kennebec, Somerset, Washington and Hancock county areas with a second expansion in 2009 providing access to families across the state to this service.

• Some Alternative Response Programs are now providing Family Reunification Services to a select group of families. The Strengthening Families Program, assists families to develop informal supports and is used to teach parents effective and appropriate parenting. From the period of April 1, 2008 through February 23, 2009 117 families were opened for FRP services with 202 children participating. Of these 117 families, 51 (68%) of the families successfully completed the program and 76 children (61%) were successfully reunified. The remaining 42 families and 78 children were still participating in services as of February 28, 2009.

Goal 3: Improve the Office's ability to identify and address key family issues that put children at risk of harm and identify the services and supports that are needed to increase child safety.

Goal 3 includes four action steps presented in the 2005-2009 Plan:

• BCFS (OCFS) will increase the number of cases in which they conduct an assessment to determine service needs that address the risk of harm to a child.

• Community Intervention Programs will increase the number of families to whom they provide appropriate service that address risk after BCFS (OCFS) has completed an assessment.

• Revise policy to address direct face-to-face contact from an assigned caseworker.

• Child and Family Reviews will reflect issues related to risk of harm to the child and will document the efficacy of services used by children and families.

Progress through 2007:

• Policy was revised to clarify expectations regarding how often children and families are to be seen in cases opened for in-home services though CPS.

• Policy revision outlining expectations for seeing children in trial placement for reunification were implemented in May 2004.

• Motivational Interviewing training was provided to staff.

• Family Team Meeting training was provided to staff.

Goal 3 was revised in 2007 and includes five action steps:

• Will assess for signs of safety, risk and danger and provide the level of services required to address identified needs.

• ARP agencies will implement the assessment process and service provision as specified in the Alternative Response Policy.

• OCFS and ARP agencies will utilize the Family Team Meeting process to identify services and supports needed to reduce risk.

• OCFS will develop a plan for implementing evidence-based practices to better serve children and families.

• OCFS will engage and team with families in planning for the safety of their children in accordance with the Child and Family Services Practice Model.

Progress through 2007-2009:

Since 2005, the Child Protection Assessment Policy includes an assessment of signs of safety, risk and danger as a part of the determination of the level of safety of child(ren) in the home.
OCFS continues to engage family members in planning by arranging a family team meeting,

which involves family members as well as other people that are identified as a support to the family.

• During the 2008 calendar year, OCFS has averaged doing 513 family team meetings per month during critical junctures in the case planning process. For ARPs, 1162 family team meetings were held during calendar year 2008. The average number of children serviced per month during that time frame was 1308.

• OCFS was awarded a grant through the McArthur Foundation to provide evidence-based treatment in three clinical sites across Maine. Referral started for this treatment modality in November 2008 and will continue through the two-year grant period.

Goal 4: Decrease the number of placements experienced by children/youth in DHHS custody.

Goal 4 includes five action steps presented in the 2005-2009 Plan:

• Develop and deliver training to assure consistent statewide application of concurrent planning principles.

• Utilize concurrent planning to move cases in a timelier manner.

• Develop foster care recruitment strategies that will provide resources to maintain children in their own communities and provide stability of care.

• Continue retention and support efforts to retain existing placement resources.

• Work with the Institutional Abuse Unit to develop a protocol to address issues that surround removal of a child from a foster home and train BCFS and IAU staff statewide on implementation.

Progress through 2007:

• Concurrent Planning was piloted in Districts 3 & 5, with statewide implementation in October, 2006.

• Institutional Abuse and OCFS assessment protocol was developed and implemented to create a clearer, more consistent, commonly understood process for when a foster home is investigated for child abuse and neglect.

- Annual surveys to foster parents were implemented beginning in 2005.
- Foster and adoption recruitment work groups were functioning in four district offices.
- *Foster and adoptive recruitment strategies were implemented in all districts.*

Goal 4 was revised in 2007 and includes five action steps:

• OCFS will continue to increase the percentage of children placed with relatives through extensive relative searches for children entering state custody and those currently in custody.

• OCFS will continue to increase the percentage of children initially placed in their home communities.

• OCFS will continue foster home recruitment and retention strategies to assure the availability of adequate placement resources so children can remain in their home communities.

• OCFS will continue to increase placements of children in family settings through continued District and State attention, by increasing the focus on finding families for children, utilizing strategies and plans developed by the District Residential and Permanency Review Teams and strengthening the effectiveness and availability of Wraparound to meet the needs of children in family settings.

• Concurrent planning practice will be implemented statewide following a field test of the policy in two identified districts.

Progress through 2007- 2009:

• Since June 2008 the percentage of children in state custody place with relatives has increased from 25.9% to 29.3%. (April 2009 Management Report) This number excludes children on extended care agreements (V9).

• District management conducts residential reviews of children placed in group/residential placements to determine if they can transition to a less restrictive environment. As a result of this effort the percentage of children in group/residential placement has continued to decrease from 13.9% in April 2008 to 10.4% in April 2009.

• As of February 2009 71% of children in foster care reside in their District of origin. Some placements, although out of district, are actually located closer to the birth family geographically then a placement within the district. Also, successful adoptive or relative placements out-of-district are considered preferable to a foster placement in the child's district or origin.

Goal 5: Improve outcomes for children by ensuring that children have the appropriate permanency goal.

Goal 5 includes four action steps presented in the 2005-2009 Plan:

• Use Adoption Opportunities Grant funds to provide services that focus on placing children ages 9-12 in adoptive homes.

- Train supervisors on permanency and the proper use of permanency goals for children.
- Meet with key stakeholders to increase awareness of permanency for children.

• Convene a workgroup to explore subsidized guardianship for relatives and make recommendations for implementation.

Progress through 2007:

• Statewide training was provided to supervisors on the proper use of permanency goals.

• In 2005, a statewide conference was held with critical stakeholders to increase awareness, train and discuss permanency issues for children. The stakeholders included judges, foster parent agency staff, therapists, and OCFS staff.

• Subsidized Guardianship become a permanency option in April 2006.

Goal 5 was revised in 2007 and includes six action steps:

• Continued reassessment for children with goal of APPLA will be documented in the child's Case Plan.

• Reviewing cases with an APPLA goal to identify and establish key relatives and/or fictive kin who will be a connection for the child in adulthood.

• OCFS will continue using data to communicate with the courts and legal community to better inform all involved in the court process to work to adhere to ASFA timelines.

• In the cases of children for whom reunification and adoption has not been achieved, OCFS will evaluate the option of Permanency Guardianship.

• OCFS will continue to educate stakeholders to increase knowledge regarding the importance and urgency of permanency issues.

• OCFS will continue focused efforts to achieve the adoption goal for older youth and children with high needs.

Progress through 2007-2009:

• Legislation was enacted in September 2007 by the Maine State Legislature to remove language in Maine Statute(s) that provided for an option of Long Term Foster Care.

• The Results Oriented Management (ROM) data indicates that Maine achieved permanency through family reunification within 12 months in FY 2008 55.7% of the time, still below the national median, but trending up.

• ROM data indicates that the median length of time for children in Maine to achieve permanency through reunification in FY 2008 was 11.01 months, still higher than the national median but progress has been made in reducing the length of time children are in foster care.

• Ongoing communication has occurred with both District Court and Probate Court judges on timeliness of adoptions. The Maine Justice for Children Task Force, a collaboration between the Judicial branch and DHH and, chaired by the Chief Justice, has developed a timeframe, including all events between termination of parental rights through adoption in the Probate Court. The timeline was a strategy in decreasing time between TPR and adoption. The most recent data profile would indicate a rise in adoptions in Maine,

• ROM data indicates that Maine achieved permanency through adoption within 24 months in FY 2008 in 34.8% of the time, above the national average and just below the 75th percentile. For FY 2009 data (October 2008-March 2009) that number has increased to 42.9%, demonstrating that Maine is now exceeding the 75th percentile (the ACF standard of excellence) in this measure.

• ROM data indicates that the median length of time for children in Maine to achieve permanency through adoption in FY 2008 was 29.6 months, below the national standard for excellence. For FY 2009 data (October 2008-March 2009) indicates that Maine had met the national standard and the 25th percentile with median for children exiting to adoption at 25.46 months.

• Since the inception of permanency guardianship in 2007, a total of 130 children have achieved and maintained permanency through this status. As of April 2009, 27 children have pending motions in District Court for permanency guardianship.

• Although the Adoptions Opportunity Grant-Adoptions Created Through Relationships (ACTR) was de-funded in 2008, this initiative served a total of 82 youth with 55% of those youth achieving permanency.

Goal 6: Increase the number of children who are safely and responsibly reunified with their families or placed with relatives.

Goal 6 includes four action steps presented in the 2005-2009 Plan:

- Implement Family Team Meetings in appropriate reunification cases.
- Train legal and casework staff on methods of paternity search.

• Work with Courts to ensure that court orders contain language to identify steps taken to explore relative resources.

• Implement subsidized placements for relatives and fictive kin.

Progress through 2007:

• *All OCFS staff were trained in Family Team Meeting procedure and policy with a plan in place to train all new staff at new worker training.*

• Legal and casework staff were trained in proper paternity searching processes.

• Court orders containing language to identify steps taken to explore relative resources were written by the Office of the Attorney General and implemented.

- Child Assessment and Plan policy was finalized in August 2005.
- Training on identifying sexual victimization, family dynamics and need for family treatment was provided to all staff.
- Motivational training was provided to all staff.
- Protocol regarding removal of a child from a foster home was developed and staff trained.

• Legislation was passed in 2006 establishing subsidized guardianship as a permanency option in Maine law.

Goal 6 was revised in 2007 and includes four action steps:

• OCFS will increase the percentage of children placed with relatives through extensive relative searches for children entering state custody and those currently in custody.

• OCFS will establish intensive support services for children and families who have been reunified by establishing community-based wraparound in select sites statewide.

• OCFS will support relatives through permanency guardianship.

• OCFS will establish demonstration contracts to increase support services for kinship placements.

Progress through 2007-2009:

• Since April 2008, the percentage of children in state custody placed with relatives has increased from 25.5% to 29.3% in April 2009. This number excludes young adults who have extended care agreements.

• As of April 2009, Wraparound Maine became available in all counties in Maine. Currently 99 families are being served however it is anticipated that 200 families will be served by the summer of 2009.

• Out of the 130 children in permanency guardianship, 104children have achieved this status with relatives. (April 2009)

Goal 7: Decrease the length of time to achieve adoption finalizations.

Goal 7 includes six action steps presented in the 2005-2009 Plan:

• Use Adoption Opportunities Grant to facilitate adoptive placements of children age 9 and older.

• Develop and implement recommendations for streamlining adoption paperwork and timelier transitioning of cases from Children Services to Adoption.

• Coordinate recruitment activities with AdoptUsKids, DHHS and therapeutic foster care agency staff.

• Review and revise, as needed, the current home study process.

• Work with the courts to establish policy that will help assure that TPR orders are signed within 60 days.

• Prepare position paper on the impact of open adoptions on the number of adoptions achieved for presentation to the Legislature.

Progress through 2007:

• Adopting Children Through Relationships (ACTR) began working with children and families in two areas of the state.

• *Recommendations to streamline adoption work were developed and implemented.*

• A workgroup was convened concerning open adoptions, which was comprised of a wide range of stakeholders, recommendations were made for policy revisions that more formalized and naturalized the conversations about maintaining healthy birth family connections, rather than legislate open adoptions.

• *APPLA training was provided to all staff.*

Goal 7 was revised in 2007 and includes six action steps:

• OCFS will continue communication with the courts, staff and stakeholders by providing data about the length of time to achieve adoption and discuss factors that contribute to delays in adoptions.

• Using the new home study process, we will increase the number of adoption home studies completed within four months.

• Concurrent planning practice will be implemented statewide following a field-test of the policy in two identified districts.

- Develop time flowchart to set standards for practice in adoption process.
- Continue training and establish kinship search practice using internet search techniques.

• Facilitate compliance with Adoption Case Transfer Protocol to reduce timeframes for transfer of case to adoption and support concurrent activities to expedite adoption.

Progress through 2007-2009:

• The Maine Justice for Children Task Force, a collaboration of the Judicial branch and DHHS, chaired by the Chief Justice, has developed a timeframe, including all events between terminations of parental rights through adoption in the Probate Court. The timeline was a strategy in decreasing time between TPR and adoption.

• The most recent data profile would indicate a rise in adoptions in Maine. Pre-service training continues to be provided to new staff on conducting family team meetings and the benefits of concurrent planning.

• Maine continues to partner with AdoptUsKids, Dave Thomas FoundationWendy's Kids Grant and Downey Side.

• Although the Adoptions Opportunity Grant-Adoptions Created Through Relationships (ACTR) was de-funded in 2008, this initiative served a total of 82 youth with 55% of those youth achieving permanency.

• In the fall of 2008, the home study process was revised to allow for a more collaborative approach with foster, adoptive and kinship caregivers. This collaborative, strength-based approach should facilitate a timelier home study completion.

• Our Results Oriented Management (ROM) data indicates that Maine achieved permanency through adoption within 24 months in FY 2008 in 34.8% of cases, just below the 75^{th} percentile(ACF standard of excellence) but above the national average. For FY 2009 data (October 2008-March 2009) that number has increased to 42.9%, demonstrating that Maine has more recently exceeded the 7^{th} percentile.

(2005-2009 Plan Goal 8): Ensure that each child in custody is placed with a family who is committed to long-term care or provide services to help the child transition to independent living. (DISCONTINUED)

Goal 8 includes five action steps presented in the 2005-2009 Plan:

• Train supervisors on permanency and appropriate use of permanency goals for children.

• Meet with stakeholders to discuss permanency and increase awareness of appropriate permanency goals for children.

• Conduct statewide training for CASA and Guardians ad Litem on appropriate use of permanency goals.

• Implement subsidized guardianship to expand permanency options for children.

• Expand recruitment and retention activities to include satisfaction surveys to foster parents, working with AFFM to identify support activities for existing foster home and augmenting AdoptUSKids National Recruitment Campaign.

Progress through 2007:

• Staff and supervisors were trained on the proper use of APPLA.

• Training on appropriate use of APPLA as a permanency goal was delivered provided to CASA volunteers and Guardians ad Litem.

• Stakeholders attended a statewide conference on permanency consistent with goal of increasing awareness.

• Annual surveys were sent to foster parents; the results reviewed by Management staff and sent on to the districts for further analysis.

• *Permanency Guardianship became a legal option for permanency in 2006.*

In 2007 this goal was discontinued as Maine OCFS was successful in getting Long Term Foster Care removed from the State statute as we recognized all children regardless of age, need, permanency, and family connections.

Goal 8 (Goal 9 in 2005-2009 Plan): Increase the number of children/youth who are in placements that are in close proximity to their family and community of origin.

Goal 8 (9) includes three action steps presented in the 2005-2009 Plan:

• Implement new recruitment efforts designed to address the three greatest needs for community foster home resources in each district of the state.

• Form and maintain a recruitment workgroup in each district of the state to keep the focus on key areas of need.

• Develop practice guidelines for returning children to communities they come from after placement outside those communities.

Progress through 2007:

- The majority of districts increased the percentage of children placed in their home district.
- *Recruitment strategies were implemented in all districts.*

• Practice guidelines were developed for returning children to communities of origin and

incorporated into the revised Selection of Substitute Care Policy finalized in November 2005.

• <u>Family Standards for Foster and Adoptive Care Policy</u> was finalized 8/10/05.

Goal 8 was revised in 2007 and includes four action steps:

• Through the Child Protective Assessment process, identify persons in the child's community who might become placement resources for the child.

• Continue recruitment efforts to establish placements throughout the state.

• OCFS will continue foster home recruitment and retention strategies to assure the availability of adequate placement resources, so that children can remain in their home communities.

• OCFS will continue to increase placements of children in family settings through continued District and State attention, by increasing the focus on finding families for children, utilizing strategies and plans developed by the District Residential/ Permanency Review Teams.

Progress through 2007-2009:

• Since April 2008, the percentage of children in state custody placed with relatives has increased from 25.5% to 29.3% in April 2009. This number excludes children on extended care agreements.

• Increased recruitment efforts have been made to connect with families in local communities for children entering care. Since June 2008, an average of 73.3% of children in state care is placed in their home communities, a slight increase from the previous report period.

• Residential reviews are conducted by District management of children placed in group/residential placements to determine if they can transition to a less restrictive environment. As a result of this effort the percentage of children in group/residential placement has continued to decrease from 13.9% in April 2008 to 10.4% in April 2009. Maine OCFS continues to be recognized for its success in reducing residential placements for children in care.

Goal 9 (Goal 10 in 2005-2009 Plan): Ensure that visitation between parents and children and between siblings is of sufficient frequency to meet the needs of the child.

Goal 9 (10) includes three action steps presented in the 2005-2009 Plan:

• Implement Family Team Meetings in appropriate cases to focus on preserving family connections.

• Seek assistance from the National Resource Center on Indian Child Welfare to explore ways to further enhance the valuable connections between Native American children and their families.

• Expand recruitment efforts to increase the number of placements in close proximity to child's community of origin.

Progress through 2007:

• Staff documentation of Family Team meetings in the MACWIS case narratives enabled performance and quality improvement reviews of the quality of these meetings and who was invited to participate.

• Practice Guidelines were implemented in May 2005 for visitation plans between children in foster care and their parents and siblings.

Goal 9 was revised in 2007 and includes two actions steps:

• Implement the new visitation policy that establishes guidelines and guidance for creating visitation plans for children in conjunction with family members.

• OCFS will promote the philosophy with OCFS staff and the provider and legal community that visitation between family members should occur in the most

natural setting possible with supervision occurring only in situations where the safety of the child is an issue.

Progress through 2007-2009:

• Visitation plans are often discussed with family during family team meeting process. In 2008, the OCFS Community Services Coordinator worked with district staff to monitor usage of the supervised visitation contracts to ensure resources were being used effectively. This resulted in a significant drop in supervised visitation usage as district staff identified visits that could be done in a less restrictive setting and coordinated by friends and relatives.

• Performance and Quality Improvement (PQI) staff and supervisory staff conduct internal reviews of case records to assess for compliance with state policy and federal expectations. The need for supervised visitation is monitored in these reviews and district management has access to reports of these case specific reviews.

Goal 10 (Goal 11 in 2005-2009 Plan): Improve efforts to locate and assess relatives as potential placement resources.

Goal 10 (11) includes three action steps presented in the 2005-2009 Plan:

• Utilize Family Team Meetings to asses all potential placement resources.

• Work with the courts to standardize Court Orders to assure that they contain language identifying specific steps taken to explore relative resources.

• Implement subsidized guardianship for relatives and fictive kin.

Progress through 2007:

• Family Team Meetings were utilized in the review of all children in residential care as well as in the review of any cases where parties were considering that a child might require such care.

• The Attorney General's Office re-drafted orders to specify steps taken to explore relative placements.

• Permanency Guardianship became a legal option for permanency for Maine children in foster care in April 2006.

Goal 10 was revised in 2007 and includes three action steps:

• OCFS will provide ongoing training and consultation to casework staff to promote relative searches.

• OCFS will track percentage of relative placements by district.

• Set a target for 25% of children statewide to be placed with relatives and reassess on an annual basis.

Progress through 2007-2009:

• Since April 2008, the percentage of children in state custody placed with relatives has increased from 25.5% to 29.3% in April, 2009. This number excludes young adults in voluntary extended care.

• OCFS has been successful in meeting its goal around placing 25% of children in care with relatives and reset the goal to 35%.

Goal 11 (Goal 12 in 2005-2009 Plan): More accurately and comprehensively assess the service needs of and provide timely services to children, parents and foster parents.

Goal 11(12) includes five action steps presented in the 2005-2009 Plan:

- Conduct a needs assessment to identify gaps in service areas throughout the state.
- Utilize Family Team Meetings to involve all parties in discussion of service needs.
- Develop and implement policies regarding how frequently children and families in open child

protection and reunification cases shall receive direct face-to-face services from the assigned caseworker.

• Develop and implement procedure for caseworkers to document foster parent inclusion in case planning.

• Develop policy to require that foster parent involvement in case planning, if at all possible.

Progress through 2007:

• A Statewide Needs Assessment to identify gaps in services was completed, reviewed by Senior Management and distributed to District staff and providers in March 2005.

• Policy was developed to specify the content and frequency of contacts required with children and families in open child protection and reunification cases.

• Family Team Meetings were implemented statewide to encourage children and families to actively participate in case planning.

• New Case Planning and Family Team meeting policy requiring foster parent inclusion in case planning was developed.

• The Statewide Supervisory Enhancement Initiative addressed the need to better supervise caseworkers to more comprehensively assess family needs.

Goal 11 was revised in 2007 and includes four action steps:

• OCFS will use data to track the use of family team meetings to develop case plans for children and families, focusing on improvements where they are needed.

• OCFS will establish guidelines on when a critical assessment or evaluation should be conducted to assist in providing the most appropriate and needed services to children and their families.

• Increase the adoptive home recruitment for older or difficult-to-place children.

• Utilize the LEAN process along with assistance from the National Resource Center to shorten time frames from entry into care to TPR and from TPR to finalization.

Progress through 2007-2009:

• Since June 2008, OCFS has averaged 540 Family Team Meetings per month to improve case plan development and implementation.

• In the fall of 2008, the home study process was revised to allow for a more collaborative approach with foster, adoptive and kinship caregivers. This collaborative strength based approach should facilitate for timelier home study completions.

• The available Results Oriented Management (ROM) data indicates that Maine is having more success in achieving permanency through adoption for children in care 17+ months. In 2008 this measure was achieved at 22.4% exceeding the national median of 20.2% and very close to meeting the 75^{th} percentile (ACF standard for excellence) of 22.7%.

Goal 12(combined Goals 14 & 15 in the 2005-2009 Plan): Increase and enhance caseworker face-to-face contacts with children and parents.

In 2007, Goals 14 & 15 were merged into one goal – Goal 12. In the 2005-2010 plan Goals 14 & 15 actions steps included:

• Review established policy on face-to-face contacts with children to assure that all staff understands it.

• Revise CPS policy to establish guidelines regarding face-to-face visits with children in CPS service cases.

- Implement revised policy through unit meetings and ongoing supervision.
- Clarify policy guidelines for parental visits in both in-home and in-custody cases.

• Utilize Family Team Meetings and a strengths-based approach to case planning, service provision, and goal attainment.

Progress through 2007:

• Policy was developed to specify the content and frequency of contacts required with children and families in open child protection and reunification cases.

• *Policy guidelines for parental visits were finalized.*

• Policy focusing on search for relatives was developed and implemented by November 2005.

In 2007, Goals 14 & 15 were merged into one goal – Goal 12 – and included the following three action steps:

• OCFS will continue to follow Child Assessment and Plan Policy, which requires at least monthly contact with the child focusing on child safety, well-being, and permanency.

• OCFS will continue to follow Child Assessment and Plan Policy which requires at least monthly contact with the parents in reunification cases monitoring the safety and well-being of the child; to promote attainment of case goals; and to ensure the parent's needs are being assessed and service needs addressed.

• OCFS will continue to follow the Child Protection Assessment Policy for in home cases to assess family needs and child safety and well-being.

Progress through 2007- 2009:

• In response to federal expectation on children in custody being seen every single month, with the majority in the home, Maine established a series of increasing annual targets. Maine exceeded the first target for FFY 2008. By April 2009 Maine had already exceeded the 2010 goal of 80%, (Maine-87%) almost meeting the 2011 goal of 90%. In addition Maine has consistently met the "majority" measure around contacts being in the home. As of April, 2009 this was met in 83% of the

cases.

• PQI staff and supervisory staff conduct quality assurance reviews of case records to assess compliance of state policy around monthly contacts with all parents involved with child welfare services. Since April 2008 on average 69% of mothers were seen per policy with 40.5% of fathers being seen per policy.

• Child Protection Assessment policy provides guidance to casework staff on monthly contact with all family members involved with in-home service cases.

Goal 13: Improve efforts to involve parents and children in the case planning process.

Goal 13 includes two action steps presented in the 2005-2009 Plan:

• Utilize Family Team Meetings to encourage children and families to actively participate in case planning.

• Quality Assurance will establish a baseline and monitor activity regarding child and/or family involvement in case plans, family plan and family reviews.

Progress through 2007:

• *Family Team Meetings were an ongoing practice statewide.*

• Quality Assurance established a baseline and monitored activity regarding child and/or family involvement in case plans, family plans and family reviews.

• New Case Planning policy and revised Family Team Meeting policy addressed the need to involve parents and children in the case planning process.

Goal 13 was revised in 2007 and includes three action steps:

• OCFS will follow guidelines in the FTM Policy regarding child involvement in FTM's.

• QA will continue to monitor and provide feedback to Districts regarding child and family involvement in case planning.

• OCFS and CIP's will continue to use family team meetings to involve families in case planning.

Progress through 2007- 2009:

• Performance and Quality Improvement (PQI) staff and supervisory staff conduct internal reviews of case records to assess for compliance with state policy and federal expectations. These reviews are disseminated to District management for use in supervisory activities and ongoing training with casework staff.

• Since June 2008 OCFS has averaged doing 540 family team meetings per month to improve case plan development and implementation. For ARPs, 1162 family team meetings were held during calendar year 2008. The average number of children served per month during that time frame was 1308.

Goal 14 (Goal 16 of the 2005-2010 Plan): Improve effectiveness in addressing children's mental health needs.

Goal 14(16) includes three action steps presented in the 2005-2009 Plan:

• Conduct a statewide needs assessment to identify gaps in services and work with providers to find ways to address these gaps.

• Provide training for caseworkers that focuses on identifying sexual victimization, family dynamics and need for treatment.

• Continue work through the supervisory Initiative to provide focus on and practice in developing case plans that more accurately reflect issues related to harm to a child.

Progress through 2007:

• *A Statewide Needs Assessment to identify gaps in services was completed, reviewing by Senior Management and distributed to District staff and providers in March 2005.*

• Training on sexual abuse issues/interventions was conducted in 2005 by Susan Righthand, PhD.

Goal 14 (Goal 16) was revised in 2007 and includes four action steps:

• OCFS caseworkers will monitor mental health needs by talking with providers and caregivers to help assess needs and service effectiveness.

• Utilization review through the Managed Care system will assess service effectiveness.

• OCFS will research evidence-based practices to ensure that the children and parents are receiving effective services to meet identified needs.

• Training of staff, courts, attorneys and treatment providers on evidence-based treatment practices.

Progress through 2007- 2009:

• OCFS caseworkers assess client needs by conducting family team meetings and attending treatment team meetings for the clients they serve.

• *Managed Care has been instituted in Maine and began the process of utilization review effective January 1, 2008.*

• Maine was awarded a grant to develop and provide evidence-based treatment in three sites in Maine to children involved in the Child Welfare System. The service became available in November 2008.

• Case Management for children with Behavioral Health Needs Policy was implemented in October 2008. This policy requires that within 30 days of opening a case for services, the caseworker shall administer a Pediatric Symptom Checklist for children age 4-16. The Pediatric Symptom Checklist is a comprehensive behavioral health screening to assure that needs are accurately identified with the expectation that appropriate services will then be provided.

• In the fall of 2008 court forums were held across the state, which included a presentation on the Child Steps initiative for evidence-based treatment of children involved in the child welfare system. Invited participants included Judges, attorneys, Guardians ad litem, CASA volunteers, Assistant Attorney Generals', PC clerks, DHHS staff and mental health providers working with child welfare clients.

Goal 15 (Goal 17 in 2005-2010 Plan): Improve effectiveness of permanency hearings to promote the timely achievement of permanency for children in foster care.

Goal 15 (17) includes one action step presented in the 2005-2009 Plan:

• Work with the Child Protective Advisory Committee of the Courts to address training for all District Court Judges on permanency options and best practices in conducting permanency hearings.

Progress through 2007:

• District Court Judges attended the Child Abuse and Neglect Conference in May 2005 with a focus on Permanency.

• District Court Judges and the Assistant Attorney General's participated in training around permanency options and best practice in June 2004.

Goal 15 was revised in 2007 and included one action step:

• As coordinated by District Court Judges, OCFS Program Administrators will meet with District Court Judges, lawyers and GALs routinely to discuss the success and challenges of achieving timely permanency for children.

Progress through 2007-2009:

• In the spring of 2007 a presentation on the effect of substance abuse on families and on HIPAA and 42 C.F.R. regulations in child abuse cases was held in each District as part of the court forum initiative. Following the two presentations, the District judge in each court led a discussion with the audience on issues relevant to each district in child protection proceedings. Statewide 433 stakeholders and 23 judges attended the forum. The second forum occurred in the fall of 2007 and addressed how mental illness affects parental capacity.

• In the spring of 2008 the Maine Justice for Children's Task Force sponsored a 2day statewide conference for judicial and court personnel, DHHS staff, parents attorneys, GALs, Assistant Attorney General, service providers and other invited stakeholders in child protection matters before the court. Workshops covered a wide range of areas in child development, including medication issues for

• *children; mental health issues; resilience in child; and permanency for older youth.*

• In the fall of 2008 a round of court forums were conducted with collaboration between the judiciary and DHHS with topics raised by District offices to discuss within the forum

• In February 2009, as part of the CFSR Statewide Assessment, Judiciary and DHHS representatives, including the Chief Judge, Deputy Chief District court judges, parents attorney, foster parent, the Attorney General's Office, Child Welfare Director, Federal Plan & PQI Program Manager and District Operations Manager meet to assess progress in assuring timely written case plans, periodic reviews, permanency hearings, TPR hearings, and notice of hearings and reviews to caregivers.

Goal 16 (Goal 18 in the 2005-2010 Plan): Provide a process for termination of parental rights proceedings in accordance with the provisions of ASFA.

Goal 16 (18) includes four action steps presented in the 2005-2009 Plan:

• Work with the Court Improvement Projects Child Protective Advisory committee of the Courts to address issue of termination of parental rights.

- Increase adoptive home recruitment.
- Review and revise, as needed, current home study process.

• Open Adoption Workgroup will produce a position paper on adoptions for presentation to the Legislature.

Progress through 2007:

- *Recruitment strategies were implemented in all districts.*
- Home study process was reviewed and revised to facilitate more timely completions.
- There was an increase in adoptive home recruitment.

• The Open Adoption Workgroup (highlighted in Goal 7 update) produced a position paper on open adoptions for presentation to the legislature.

Goal 16 was revised in 2007 and includes three action steps:

• OCFS Program Administrators will meet District Court Judges, lawyers and GALs routinely to discuss the success and challenge of achieving timely permanency for children.

• Increase adoptive home recruitment for older or difficult to place children.

• Utilize the LEAN process along with assistance from the National Resource Center to shorten time frames from entry into care to TPR and from TPR to finalization.

Progress through 2007- 2009:

• In February 2009, as part of the CFSR Statewide Assessment, Judiciary and DHHS representatives, including the Chief Judge, Deputy Chief District court judges, parents attorney, foster parent, the Attorney General's Office, Child Welfare Director, Federal Plan & PQI Program Manager and District Operations Manager meet to assess progress in assuring timely written case plans, periodic reviews, permanency hearings, TPR hearings, and notice of hearings and reviews to caregivers.

• Implementation of the recommendations of the LEAN process has been ongoing across the State and these processes have led to more timely permanency through adoption for children in custody.

• Our Results Oriented Management (ROM) data indicates that Maine achieved permanency through adoption within 24 months in FY 2008 in 34.8% of the time, just below the 75th percentile but above the national median. For FY 2009 data (October 2008-March 2009) that number has increased to 42.9%, demonstrating that Maine has more recently exceeded the nation median in this measure.

• The available Results Oriented Management (ROM) data indicates that Maine is having more success in achieving permanency through adoption for children in care 17+ months. In 2008 this measure was achieved at 22.4% exceeding the national median of 20.2% and very close to meeting the 75^{th} percentile (ACF standard for excellence) of 22.7%.

Goal 17 (Goal 19 of the 2005-2010 Plan): Ensure that district offices follow established procedures to provide notification of child court reviews or foster, pre-adoptive and relative caregivers.

Goal 17 (19) includes two action steps presented in the 2005-2009 Plan:

• Each district will create and implement a plan to ensure notifications are being sent in a timely manner.

• QA reviews will monitor progress on this activity.

Progress through 2007:

• Each district created and implemented a plan to ensure notifications are being sent in a timely manner to foster, per-adoptive, and relative's caregivers, with QA reviews monitoring this activity.

• The Pre-service curriculum for foster and adoptive parents addresses the role of foster, pre-adoptive, and relative caregivers in the court process.

• *CWTI developed in In-service training "The Role of Foster Parents in the Child Welfare Legal System" to be offered at least three times/year in three locations. This was implemented in June 2005.*

Goal 17 was revised in 2007 and includes two action steps:

• Continue to ensure that notification of foster, pre-adoptive and relative caregivers of court hearing occurs as specified by law.

• QA will continue to monitor this practice.

Progress through 2007-2009:

• *PQI* staff and supervisory staff monitor whether this occurs through the internal case review process and the case reviews are disseminated to District management and staff for review.

• In a November 2008 query of PQI and supervisory reviews for the review period of November 2007-November 2008, timely notifications were found to have occurred 75% of the time.

Goal 18 (Goal 20 in the 2005-2010 Plan): Increase the timeliness of response to reports of maltreatment in foster care.

Goal 18 includes two action steps presented in the 2005-2009 Plan:

- Develop policy regarding timeframes for IAU response to reports of maltreatment.
- Develop and implement work plan to increase the number of assessment in the IAU.

Progress through 2007:

• *A workgroup developed a protocol regarding timeframes for IAU response to reports of maltreatment.*

• Staff were trained in this protocol with statewide implementation of the protocol in January 2005.

• Child Protective Assessment policy was finalized in August 2005, which provided guidance as to what should be considered in conducting a thorough assessment of child abuse and neglect allegations.

In 2007 this goal was discontinued as goal completed.

Goal 19 (Goal 21 in 2005-2010 Plan): Increase availability of services statewide.

Goal 19 includes three action steps presented in the 2005-2009 Plan:

• Conduct a needs assessment to identify gaps in key service areas and accessibility of services in all parts of the sate.

• Prepare a report on the findings of the needs assessment and make recommendations based on the findings.

• Develop a plan to address findings of the report.

Progress through 2007:

• A Statewide Needs Assessment was completed, reviewing by Senior Management and disturbed to District staff and providers in March 2005.

Goal 19 was revised in 2007 and includes four action steps:

• Continue forums with service providers to assess service needs and effectiveness at the District level.

• The Managed Care system will be contracted to ensure needed service provision statewide.

• Kinship Care services, intensive family reunification, intensive family preservation, and Wraparound services will be developed to meet areas of need.

• Continue to discuss with the Caseworker Advisory Committee and the Foster/Adoptive Parent Advisory Committee members the service gaps they encounter in working children and families.

• Continue to assess service needs through the annual foster parent survey and the youth survey.

Progress through 2007- 2009:

• Managed Care has been instituted in Maine and began the process of utilization review on January 1, 2008.

• OCFS conducts meetings routinely with provider agencies to discuss the needs of child welfare clients. Focus on increasing placements in family settings for children in state care has resulted in the closure of group care facilities in Maine. In addition, the State budget reductions have had significant impact across all areas of service agencies.

• The Wraparound Maine Initiative, based on John Vandeberg's high fidelity Wraparound model, is current active statewide. By the end of the summer of 2009, 200 families are expected to be served at any given time.

• The Community Partnership for Child Protection (CPPC) has been instituted in two Portland neighborhoods. CPPC strongly endorses a local community collaborative approach to keeping children safe and intact in their own homes and in their communities, whenever possible. This initiative has been well received in the Portland area with several other communities expressing interest in developing such a program.

• An annual survey is conducted with Maine's licensed foster parents. Maine also has a very active Youth Leadership Advisory Team (YLAT) that provides input on statewide practice and policy development. In 2008, in preparation for the CFSR statewide assessment, YLAT participated in a series of surveys to assess DHHS performance through the eyes of the youth, in addressing their safety, permanency and well-being.

• Some Alternative Response Programs are now providing Family Reunification Services to a select group of families. The Strengthening Families Program, assists families to develop informal supports and is used to teach parents effective and appropriate parenting. From the period of April 1, 2008 through February 23, 2009 117 families were opened for FRP services with 202 children participating. Of these 117 families, 51 (68%) of the families successfully completed the program and 76 children (61%) were successfully reunified. The remaining 42 families and 78 children were still participating in services as of February 28, 2009.

III. Final Review of Progress by Program Area

Maine Child Welfare Services Reform

Since 2000, the Maine Child Welfare Program has been directed by committed social workers with significant child welfare experience. This leadership has been a key factor in commencing, sustaining, and expanding child welfare reform in Maine. In particular, the vision, convictions, and commitment of James Beougher, Director of the Office of Child and Family Services (OCFS) since 2004, have enabled managers and staff to place more children with families instead of in residential settings, place more children with kin, reform practice in cases of domestic violence, develop statewide high fidelity Wraparound and Family Reunification Services, and establish a network of staff committees for continuous quality improvement.

In 2001, in response to the death of a child in foster care and concerns from legislators and the media, the Department's Commissioner arranged for the services of the Casey Strategic Consulting Group (CSCG) to assist senior Child Welfare managers in reviewing processes and outcomes for children and families with whom DHHS was involved. CSCG provided consultation and assistance to Maine Child Welfare program reform for a four-year period. During this same time period, a larger Departmental merger and three changes of DHHS Commissioners occurred.

With the help of CSCG, senior Child Welfare (CW) managers developed a Beliefs Statement and chartered a Child Welfare Senior Management Team committed to reforming the program. With the assistance of CSCG, a review was conducted which made clear that many Maine children stayed too long in foster care. This review also found that a relatively high percentage of youth were placed in therapeutic foster care and residential care, rather than in family foster homes or with kin. In 2002 the CW Senior Management Team made a strategic plan to work toward processes and outcomes consistent with their Child Welfare beliefs statement. Along with the first strategic plan came increased emphasis on data-driven management toward reform targets. Beginning with the introduction of Family Team Meetings in 2003, CW Senior Management has worked toward strength-based policies and practices to better engage and include youth and families.

In 2003 Maine had its first Child and Family Services Review, which found Maine to be an outlier compared to most other states in its poor performance on achieving permanency for children. The OCFS Child Welfare Service Division successfully completed all 92 action steps of the Program Improvement Plan (PIP) that was designed to address the 2003 Federal Child and Family Services Review findings.

In 2004, the OCFS Child Welfare Service Division began a sustained effort to place more children with families and reduce reliance on residential care. At that time over 26% of Maine foster children were in residential placements. As of April 2009 only 10.4% of Maine foster children were in residential care. During an overlapping time period, the percentage of kinship placements increased from 16% to 29.3%.

In 2005, making a concerted effort to formally move beyond the traditional practice model of the old organizational culture, child welfare senior management engaged staff from all districts in developing a new, strength-based Child Welfare Practice Model. The new Practice Model is consistent with the earlier 2002 Beliefs Statement as well as with the beliefs underlying Family Team Meetings. Also during 2005, key policies were revised to make them consistent with the new Practice Model. Each district took the lead in revising a key policy.

In 2006, as a means of institutionalizing and expanding Child Welfare reform, DHHS Child Welfare Services formally applied for accreditation through the Council on Accreditation (COA). During the next two years, reform efforts largely driven by the accreditation self-study process and the policy, procedure, and practice changes resulting from it.

In 2008, OCFS leaders decided that several factors required withdrawal from the accreditation endeavor. These factors included: funding reductions to contracted agencies that shifted workload to DHHS, reductions to the Cooperative Agreement with the University of Southern Maine, several critical vacancies in the DHHS Central Office, and most importantly, an over-lapping time frame with the 2009 upcoming Child and Family Services Review.

Reform in Maine Child Welfare Services is still very much a work in progress. To the extent that the organizational culture has become transformed, there is evidence of the implementation of the new Child Welfare Practice Model:

- ② Child Safety first and foremost
- ② Parents have the right and responsibilities to raise their own children
- ⁽²⁾ Children are entitled to a safe and nurturing family
- ② All Children deserve a permanent family
- ② How we do our work is as important as the work we do

To the extent that the new Practice Model has taken hold, staff works to engage and empower the family, view parents as partners, and build on strengths to address needs. Caseworkers are more responsive and inclusive, using a team-based approach.

While OCFS is proud of the progress it has made in meeting the needs of children and families in Maine, we also recognize the need for continued improvement. The 2009 Child and Family Services Review affords Maine the opportunity to continue progress. Strengths are highlighted and focus brought to those areas needing improvement.

Current Innovations in Maine Child Welfare Services

<u>The Family Team Meeting</u> has been a cornerstone of Maine Child Welfare practice since 2003. The Family Team Meeting is a process that brings together (a) family (b) interested people (such as friends, neighbors, and community members) and (c) formal resources (such as child welfare, mental health, education, and other agencies). It functions to serve the child and family's achievement of safety, permanency, stability and well-being. The child and family team will brings together the wisdom/expertise of family and friends as well as the resources, experience and expertise of formal supports.

<u>Single system of care for children's behavioral health services</u> – This endeavor has included: analyzing the treatment/support/social services currently purchased by OCFS; deciding which treatment services to purchase or enhance, deciding how to measure outcomes and performance standards; and designing and implementing oversight and monitoring activities through utilization review, performance and quality improvement, outcome assessments, and stakeholder meetings. This integration has benefited children served by Child Welfare Services, as medication reviews and clinical guidance in specific child welfare cases is more readily available.

<u>Future Search</u> – Utilizing *Future Search*, OCFS Leadership has worked to engage community stakeholders in integrated work toward strategic goals. Future Search is a methodology grounded in evidence that action is best achieved when a diverse group of people come together to discover and act upon common ground. Future Search seeks to change the ways in which people, communities and organizations interact with each other. District OCFS administrators, including Child Welfare Program Administrators, have been charged with continuing this work communicating information with their larger communities.

<u>Managed behavioral health care</u> – In the fall of 2007 a contract was awarded to APS, an Administrative Service Authorization Organization that will perform Prior Authorization and Utilization Review functions. This contract is designed to improve the cost-effective management of behavioral health services currently purchased through the State's Office of MaineCare Services and administered by the State's programs in Adult Mental Health Services, Children's Behavioral Health Services, and the Office of Substance Abuse.

<u>Wraparound Maine</u> – Wraparound Maine is a statewide, multi-site initiative for youth with complex needs which complements other collaborative service planning approaches in Maine (Child and Family Teams, Family Team Meetings and Family and Systems Teams). The target population includes school age children and youth with complex needs (and their families), who have multi-system involvement and are either in residential treatment or at high risk of such placement. Wraparound is a process that follows a series of steps to help children and youth grow up in their homes and communities. With help from one or more facilitators, people from the family's life work together, coordinate their activities, and blend their perspectives of the family's situation. Though it may look different across communities, Wraparound should always be driven by the same principles and should always follow the same basic phases and activities. Wraparound Maine was initially piloted in a few districts but has since been implemented statewide with the capacity to work with 200 families.

<u>Family Reunification Program (FRP)</u>: In October 2006, Maine implemented the Family Reunification Program to return children home sooner by providing an intensive array of services to meet the family's individualized needs. The focus of services is to help the family internalize behaviors and skills that strengthen the family system and prevent further out-of-home placements for children. Maine has contracted with six agencies to provide this service in each of the State's eight districts.

<u>Community Partnership for Protecting Children (CPPC)</u>, part of a nation wide initiative, began in two Portland neighborhoods in 2006. In this model, a team forms around the family to give the family support to protect their children and make necessary changes, allow for families to be strengthened, and children to be nurtured, and supported in a safe environment. Since the inception of the CPPC, two neighboring communities have expressed interest in developing such a program in their local areas.

<u>Child STEPs</u> - Evidence-based psychotherapy – In 2008 Maine begun to participate in the Child System and Treatment Enhancement Projects (STEPs) Implementation Model. This model combines clinical training and supervision in evidence based treatments (EBT) with an electronic information system to guide treatment, and adds interventions to address family and organizational factors that are key to success of EBTs. The Child STEPs Project has been implemented in three sites in southern and central Maine.

In 2008 Maine joined the other New England States in a <u>Safety and Risk Assessment Breakthrough</u> <u>Series Collaborative</u> sponsored by Casey Family Services. Five Maine teams receive consultation from Casey and work with national experts to address gaps in policy and practice, with emphasis on engagement with the family. A system of monthly measures will monitor improvement in family engagement and satisfaction, in addition to child safety and well-being.

Child Protective Services Program

Maine's efforts to improve child protective services have been numerous and consistent over the past five years and OCFS remains committed to continuing the pursue excellence and past practice in the next five years.

Maine's screening and response has improved dramatically since the development the 2004 Program Improvement Plan as well as from the 2005-2010 CFSP. At that time, intake staff could take a week to screen the report. District supervisors could take another week to assign or refer it for Alternative Response. Depending on the "respond by" date, the assigned caseworker could take as long as another week to see the child. If referred by the District supervisor for Alternative Response, the contract agency was allowed two weeks to make contact with the family. As part of the Department's PIP, policy was revised to specify investigative face-to-face response to within 120 hours of receipt of the report by the Intake Unit.

In September 2007 the Department initiated an even timelier 72-hour response policy. On 12/31/07, these revised intake and assessment policies (Intake decision within 24 hours; caseworker to see child within 72 hours of intake decision) were issued as final after a 4month phase-in period.

In 2007, a Performance and Quality Improvement (PQI) Unit review of screened out child abuse/neglect reports validated stakeholder concerns regarding consistency and nature of reports designated as appropriate for CPS assignment. As a result, the Child Protective Intake Manager revised the assignment protocol. Intake supervisors now document the basis for their decision that a report is not appropriate for investigation and intake staff makes more collateral contacts to clarify information when reports lack specifics. In addition, policy was revised so that district supervisors could no longer make a "second level decision" to screen out a report found by the Intake Unit to be appropriate for assessment.

Child Welfare senior management directed the PQI Unit to conduct this review on an annual basis to assure that the needs of children and families are being met. The 2008 Intake review found improved documentation of decision-making when reports did not meet the criteria for Child Protective Assessment assignment.

The *Child Assessment Policy* was also revised in 2007 to include the expectation that, for in home service cases, the frequency and type of caseworker's face to face visit with the child(ren) and family should be appropriate to the family's needs and risk to the child and visits should occur at least once a month in the home. More frequent contact with families helps to establish more effective working relationships, allows for a better assessment of safety and well-being, facilitates monitoring of serve delivery, and better enable the caseworker to measure and support the achievement of the agreed upon goals of the family. This policy also guides staff as to the nature and frequency of the reviews to determine if/when the Department's involvement should continue.

In July 2008 Alternative Response Program contracts were revised to include the expectation that children would be seen in three days, substantially the same response timeframe as a DHHS Child Protection Assessment.

The *Child Protection Assessment Policy* was revised in 2007 to give specific guidance around child protection assessment decisions as to when families are in need of child protective services. This policy was designed to reduce recurrence of maltreatment by requiring child protective services in event of:

- Signs of danger, with agreed upon safety plan
- Safety plan failure
- Findings of maltreatment with specific signs of risk that are likely to result in recurrence of maltreatment
- Findings of child abuse or neglect within previous 12 months
- Parental unwillingness to accept services or to change dangerous behaviors or conditions

Maine has made significant improvements in assessing and placing children with their relatives, reducing reliance on "stranger" foster care or residential care. In 2005 the *Relative Placement and Kinship Care Policy* was implemented, providing guidance as to the purpose of relative placements and kinship connections. The policy specifies procedures to identify and screen/assess potential relative caregivers as placement resources, as well as the timeframes for conducting these assessments. In addition, this policy highlights the need for an on-going assessment of relatives. The policy is supported by state law (<u>Title 22, MRSA sections 4005, 4026</u>), which specifies preference for placement of children with adult relatives over placement in non-relative foster care.

Following procedural guidelines, Intake staff tries to obtain information such as names, phone numbers, and addresses of relatives. During initial interviews, child protective caseworkers are expected to ask parents – including out-of-home parents – to identify who might be able to care for their children should they not be able to do so. If a child must be removed and placed in DHHS custody, the child is to be placed with a relative – unless available relatives are explored and ruled out. A home visit and relative placement/kinship care assessment should be completed (this is designed to be done on an emergency basis if necessary) prior to selecting placement for the child.

A primary initiative that has resulted in improved practice through engagement with families and stakeholders has been the implementation of Family Team Meetings. The Family Team Meeting has been a cornerstone of Maine Child Welfare Practice since 2003. This process is one that brings together family, interested people (such as friends, neighbors, and community members) and formal resources (such as child welfare, mental health, education, and other agencies). It functions to serve the child and family's achievement of safety, permanency, stability and well-being. The 2005 policy, in accordance with the Child and Family Services Practice Model, integrates the Family Team Meeting (FTM) into our work. It streamlines the work of teaming (preparation and meetings) into the workflow of engagement, collaborative assessment, planning, and intervention. This policy makes clear when FTMs must be held and who is to be included in the process. The FTM process establishes a team to support the family in a plan of change to increase the safety of the children. This process also enables monitoring from multiple sources. The family becomes accountable to their informal support system, as well as to agency professionals. Ensuring that families have a team supporting them reduces the likelihood that future maltreatment will occur.

In 2006 Child Welfare Services Central Office Management implemented a procedure for a prompt internal review with district staff in event of a child death or serious injury. The purpose of these reviews is to learn, to teach, to challenge, and to probe in order to reflect on the events that occurred to prevent another occurrence. Invited participants include, but are not limited to the District Operations Manager, the Program Administrator, the Director of Child Welfare, the Director of Policy and Practice, the assigned caseworker at the time of the incident, as well as those who had previous involvement. Following the review, the Program Administrator prepares a memo detailing the review, which is shared with a larger audience in order for others to learn from the review and reflect on their own practice.

Children's Services Program

In measuring and improving processes, outputs and outcomes, Child Welfare Management is increasingly data driven. "Hard data to show" has replaced "thinking you know." For district management, performance expectations are tied to reform targets and data is reviewed in rating performance. A Monthly Management Report provides regular information on key activities, such as child protective response time, relative placements, and monthly caseworker contacts with foster children. A Weekly Residential Report provides information on numbers and percentages of children in residential placements, district by district. A central Performance and Quality Improvement Unit provides quarterly quality measures based on monthly supervisory case record reviews. In 2007 this unit conducted an in-house site review of all eight Child Welfare Districts, issuing findings to inform subsequent District Program Improvement Plans.

The success of this data-driven management is best illustrated in the reduction of Maine children living in foster care. Since 2001, the number of children in foster care in Maine has steadily dropped from over 3,000 to less than 2,000.

Children's Services (CS) supervisors and caseworkers work toward specific goals for each child. In some instances, this involves dual planning - working to reunify a child with family and exploring other permanent options if reunification is not possible. At all times, it is work that requires great coordination and professionalism. Children in care have experienced both loss and the trauma of abuse and neglect. The challenge is in meeting each child's needs with as much continuity of care as possible and focus on permanency goals.

Since the last CFSP was developed, Maine had made significant gains in increasing the percentage of children placed in family settings. In 2004, the OCFS Child Welfare Service Division began a sustained effort to place more children with families and reduce reliance on residential care. At that time over 26% of Maine foster children were in residential placements. As of April 2009 only 10.4% of Maine foster children were in residential care. During an overlapping time period, the percentage of kinship placements increased from 16% to 29.3%. This was possible through increased focus on findings families for children, utilizing strategies and plans developed by the District Residential Permanency Review Teams and strengthening wraparound services to meet the needs of children in family settings.

Since 2002, DHHS has focused on increasing kinship care, as relative placements tend to provide better stability. Policy has been developed that requires exploration of all potential kin resources for children starting in the assessment phase and then when children are brought into care. Searching for kin connections is an on-going process throughout the child's involvement with the Child Welfare system. In our policy, the definition of kin includes those "fictive kin", individuals connected to the child through a significant emotional attachment. Our policy also allows caseworkers to assess and approve kinship placements prior to the kin becoming licensed resource providers, which enables us to avoid interim placements in foster homes. Policy expectation is that we assist unlicensed kinship providers to expedite their licensure.

Changes in practice since the 2003 CFSR include:

- Regular Family Team Meetings, which include foster parents
- Improved relative placement policy and steady increase in percentage of relative placements
- At the time of the 2003 CFSR, only 13% of foster children were placed with relatives. That percentage has steadily increased and is now 29.3% (Monthly Management Report April 2009).
- Full implementation of level of care assessments

• More frequent, regular contact between caseworkers and children. Caseworkers now are seeing every child in foster care every month 87% of the time (Monthly Management Report – April 2009).

In 2008 OCFS revised its home study process to allow substantial improvement in the Office's ability to engage resource family applicants as partners in the process. The improved home study process actively engages the applicants and allows them more ability to describe their family's unique strengths, needs, and cultural attributes. In November 2008, the new home study process was incorporated into the revised policy, *Family Standards: Foster and Adoptive Care.* Training specific to the new home study process was provided in each District to staff whose job duties include completion of home studies.

In addition to emphasizing the need for relative and kinship resource searches and placement, Child Welfare Services is committed to supporting kin placements. In 2008, renewable funds were allotted to enhance kinship support services provided to children at high risk of entering foster care. As provision of service under this new program, skilled and experienced staff employed by the provider agency Maine Kids-Kin will provide face-to-face support to kinship parents who are taking children identified as at risk of abuse or neglect and entering DHHS custody.

• Workers will work with kinship caregivers to identify and understand risks and ways to reduce risk so that the children are safe. This will include helping the family identify their strengths and needs in taking on this task of keeping the children safe in their care, as well as helping them to consider potential physical, mental and emotional health issues for the children and themselves.

• The worker will explain the need for safety nets for children and options for legal relationships, and will help the caregiver plan how to build on his or her family's own resources and community resources to strengthen their safety net with additional resources and knowledge.

• The worker will support this effort with information, research, and assistance accessing the resources of the community.

• Workers will work with families during the first six months of placement of the children and provide phone and email support in addition to the face-to-face support.

• Workers will use a protocol to identify physical and emotional risks and identify resources to help the family meet these safety challenges. This will be an individualized, client-driven, strengths-based program.

After participating in this program, caregivers will have the option of continuing to receive services from the worker through Maine Kids-Kin's existing phone-based and support group services.

Expected short-term outcomes of this new service, which has a coverage area of within 25 miles of Bangor or Portland, is an expectation that caregivers will have reduced their isolation: increased their understanding of family strengths and/or needs; and/or increased their knowledge of available resources and/or options for legal relationship; and developed a plan to meet needs.

Expected long-term outcome is that more children will stay with family instead of entering DHHS custody.

While OCFS has made significant improvements in the percentage of placements of children in care with relatives and kin, there is still opportunity to improve in this area. A frequent dialogue with OCFS staff relates to the importance of children maintaining connections with kin, including fictive kin and community.

Increased recruitment efforts have been made to keep new-in-care children in their home communities. Since June 2008, an average of 69.9% of children in state care is placed in their home DHHS districts.

These changes have contributed to improved placement stability. In 2007, Maine achieved the incremental PIP data target for increased stability of placements for children in their first year of foster care.

In 2008, the *Selection of Placement Policy* was revised and highlighted the importance of placing children in care or custody in the home or facility best able to meet their needs and facilitate progress toward the case goal and objectives, using the philosophy of concurrent planning for all outcomes. This policy also highlights the need for careful consideration and assessment when making placement decisions and that the primary resources to be explored first are relative options.

In terms of permanency goals, Maine has made significant improvements in achieving permanency for children in a timely manner both in family reunification and adoptions. The first step in this process was to ensure that children have the appropriate permanency goals and on going assessment of these goals by OCFS staff. In most cases, when a child enters foster care, the Department appropriately determines the permanency goal. Basically, the initial goal must be family rehabilitation and reunification unless the court finds an "aggravating factor" with regard to the parent or finds parental abandonment. During 2006-2007 statewide training for supervisors occurred on the proper use of permanency goal and recognizing when the goals should change. In addition, conferences were held with key stakeholders to increase awareness of permanency goals and permanency issues for children. These included judges, foster parent agency staff, therapists and OCFS staff. In September 2007, the Maine State Legislature removed language from Maine Statute that refers to Long Term Foster Care.

The Maine Permanency Guardianship Program was developed over a period of two years through the efforts of a Workgroup of public and private, child welfare, legal, mental health, Tribal, and community members. Permanency Guardianship became law under Title 22 in 2005, allowing for the District Court, as a dispositional alternative in Child Protection cases, to appoint a Permanency Guardian. This program is intended to provide relatives and other individuals the opportunity to become the permanency guardians of children in the custody of the State or of Tribal authorities in the State of Maine. Permanency Guardianship provides a permanency option to children who might otherwise remain in foster care until the age of majority. This program became operational on April 3, 2006. Over 130 children now have a legally sanctioned permanent family through the Permanency Guardianship program. Although this program has been fully state funded, Maine OCFS will pursue federal funding for guardianship as identified in the 2008 Fostering Connections to Success federal legislation.
<u>The Family Reunification Program (FRP)</u> – Implemented statewide by Maine DHHS Child Welfare Services in 2006, the purpose of this contracted private agency program is to achieve earlier and safer reunification. The Maine Family Reunification program is based on a successful model developed in Michigan. It is designed to serve families whose children have been in Department custody for less than six months and for whom the familial bonds are still very strong. Families in which a serious injury has occurred to a non-verbal child, with no parent taking responsibility, or families in which active signs of danger are still evident would not be considered appropriate for this program.

Reunification of children with their parents is supported by a team of social workers who provide four to six months of intensive in-home service, during non-traditional hours if necessary. During this time, the team assists the family in using its own unique strengths to resolve any continuing jeopardy issues. The team also helps the family to develop a sustaining, natural support system through extended family and community.

A barrier to prompt reunification can occur when families lose their housing because their children are placed in custody of the Department. In November 2008, the United States Department of Housing and Urban Development (HUD) issued notice of funding availability of voucher assistance to provide adequate housing as a means to promote family unification through the Family Unification Program.

In Maine, OCFS is collaborating with Maine State Housing Authority which serves eligible applicants statewide in seeking vouchers under the Family Unification Program. Child Welfare Services is additionally collaborating in the same endeavor with entering into *Memorandum of Understandings* with at least two municipal housing authorities who are applying separately for these vouchers to serve their specific municipal area. The target population for these vouchers is either reunifying families or families at risk of separation from their children previously due to homelessness or inadequate housing.

<u>Youth Permanency Initiative</u> – In 2007, youth attending the Youth in Care conference voiced a need to have a concentrated conversation about permanency. Not having permanency in their lives impacted their ability to form lasting relationships, having educational opportunities that led to higher educational attainment, and the connections that lead to finding jobs, housing, and financial help.

The Maine Department of Health and Human Services asked Muskie School for Public Service at the University of Southern Maine to convene a two-day summit on permanency that included youth in care, caseworkers, Child Welfare supervisors, managers, and others invested in youth achievement of permanency.

The Partnership for Permanency Summit was held on March 20-21, 2008. This summit brought together teams of caseworkers and their supervisors, and at least 10 youth in care from all Child Welfare Districts, including staff from the Central Office at the state agency. Over the two days, teams discussed permanency issues, action plans, and reported their findings to a listening panel comprised of agency, legislative, association, and judicial representatives, including Maine's First Lady, Karen Baldacci and a representative from the Administration for Children and Families.

Due to the success of the first Permanency Summit, a second Permanency Summit was held in February 2009. One of the goals of the second discussion was to deepen the discussion related to youth achieving permanency. Youth were active participants in planning the agenda for the Summit.

In 2009, new policy on Permanency was finalized. This policy clearly states the philosophy of Child Welfare Services that permanency is not just a process, plan of foster care placement, nor is it intended to be a family relationship that lasts only until the child turns age eighteen. Rather permanency is about locating and supporting lifelong family connections. For young people in the child welfare system, planning for permanency should begin with the family's first level f involvement with the Department from initial CPS intervention, and be youth driven, family focused, culturally competent, and continuous until the goal of permanency is achieved.

With the implementation of these programs, Maine has become much better able to reach permanency goals of reunification, guardianship, and permanent placement with relatives. In terms of meeting children's well being needs, Maine has also undergone changes that have positively impacted services as well as access to them.

The merger of Child Welfare Services and Children's Behavioral Health Services within the DHHS Office of Child and Family Services has increased the focus on evidence-based practices and improved management of some high cost services. This has resulted in the increased access to home-based clinical services, the establishment of high fidelity Wraparound programs, and the establishment of Intensive Family Reunification services. In the revised Service Authorization Policy, improved differential guidance is now available as to what type of clinical evaluation is needed in specific situations.

In the fall of 2007 a contract was awarded to APS, and Administrative Service Authorization Organization that will perform Prior Authorizations and Utilization Review functions. This contract is designed to improve the cost effective managmen4et of behavioral health services currently purchased through the State's Office of MaineCare Services and administered by the State's program in Adult Mental Health Services, Children's Behavioral Health Services, and the Office of Substance Abuse.

Numerous data indicators point to successful changes in the organization's processes and outputs. The reduction of numbers of children in foster care and the increase in relative placements are indicators of trends toward increasing success. Changes vary by district but with an improved data management system, senior management will soon be able to easily track district performance in key areas and manage to improve results.

Disaster Plans

Maine developed a comprehensive plan to maintain operations in the event of a disaster. Of key importance is a system that would contain provisions to maintain child welfare operations and a system for caregivers to report their location in the event that they need to evacuate their home. The plan became final in 8/07, entered into policy *Child and Family Services Manual; XIV.D Family Standards Foster and Adoptive Care* and training needs be provided to district staff, the caregiver community and service providers.

Juvenile Justice Transfer

In Maine, children in the care of the child protections system are not transferred into the custody of the State Juvenile Justice System, but remain under the custody of the Department of Health & Human Services unless custody is returned to a parent or to some other guardian.

Foster Care Licensing

Federal law requires that foster homes be licensed in order for a state to receive IV-E funding for potentially eligible children placed in these homes. The authority for licensure is left to the state. OCFS has adopted licensing rules that promote quality out-of-home foster care for Maine's children.

Applicants must meet licensing requirements, for which they undergo Child Protective screenings, both state and federal criminal history, including fingerprint based checks, and checks through the Bureau of Motor Vehicles in addition to a complete home study. The physical facility is inspected for fire safety and other safety concerns. A water test is required if the household does not have a municipal water supply. A full license is issued for two years. A temporary license – not to exceed 120 days – may be issued when a foster family affiliated with a Child Placing Agency moves to allow the continuation of services to the child(ren) currently placed with the family. A conditional license may be issued when an individual fails to comply with applicable laws and DHHS specifies in writing the corrections that must be made. The law provides that a license may be revoked at any time the licensee fails to comply with the law or with rules and regulations. Licenses may be renewed, subsequent to an updated application and assessment of the family and their ability to meet licensing rules and regulations, a site visit, an updated BMV and CPS check and an updated criminal history search.

There are two categories of foster home license: Family Foster Homes for Children and Specialized Children's Foster Homes. To become a specialized home, the primary caregiver must have verifiable experience working with moderately to severely handicapped children. Specialized licenses are only issued for foster homes providing therapeutic foster care either through Maine Caring Families or independent child-placing agencies.

<u>Rules Providing for the Licensing of Family Foster Homes for Children and Rules Providing for the</u> <u>Licensing of Specialized Children's Foster Homes</u> were revised and became effective on December 3, 2007. Among changes to the Rules was the addition of a requirement that at time of application, the applicants shall undergo fingerprinting, in order to allow the Department to submit required fingerprint-based checks of national crime information data bases. With the addition of this requirement, Maine is in compliance with the Adam Walsh Child Protection and Safety Act of 2006, which requires all prospective foster and adoptive parents to undergo fingerprint-based background checks.

Another change to the Rules allows an exception to be made to the requirement that foster care families shall not care for adult boarders or roomers. Added to the already allowable exceptions is the exception to allow the foster family's former foster child to continue residing in the home or return at a later date to live in the home. This change allows youth who left foster care without permanency to return to live in the foster home in which they developed meaningful family connections without being considered a boarder in the home.

Another change in the Rules adds a requirement that foster parents who transport children in their own vehicles shall comply with all State of Maine laws governing motor vehicle operation including current driver license, vehicle registration, inspection, insurance, and use of age appropriate safety restraint systems.

The Rules revisions also included revisions to the on-going training hour requirements. Under the current Rules, foster parents shall participate in at least 18 hours for the licensees' combined hours of training with at least 6 of those hours completed by the secondary foster parent, within the two-year licensing period. Foster parents holding a specialized license must complete at least 36 hours for the licensees' combined hours of training, with at least 12 of those hours completed by the secondary foster parent, within the two-year licensing period.

Adoption

The Office of Child and Family Services has as its primary permanency goal for children reunification in safe and stable birth families whenever possible. When reunification and rehabilitation has not been successful to ensure safety and the Court finds that children cannot be returned to their birth parents through clear and convincing evidence, adoption can provide a permanency plan that ensures a legally sound, safe, and permanent home with nurturing and committed caregivers.

OCFS has made tremendous gains in ensuring that children with a goal of adoption achieve permanency within 24 months of entering foster care. This is evidenced by the most recent ACF Data Profile (12/08) as well as through the Results Oriented Management (ROM) data which is used by OCFS to track federal outcome measures.

Reasons behind this improvement are many and include:

• The 2005 policy revision that created a clear timeline from inquiry to approval for the adoptive resource. This timeline enabled DHHS to render a decision within 90 to 120 days of initial inquiry.

• A significant endeavor to increase adoptions of older children has been Adoptions Created through Relationships (ACTR), a project that was funded by ACF through an Adoption Opportunities Grant to the State of Maine. The purpose of this initiative was to find ways to assist selected youth in foster care in establishing more permanent connections with families/caring adults-the ultimate goal being a legal change in status to adoption. A total of 116 youth were referred to the ACTR program for May 2004 through September 2008 with 82 youth receiving services and 55% of those youth achieving permanency.

• The Department repeatedly has been willing to engage in innovative efforts to improve adoption-related performance, such as the Lean Study, Maine Adoption Guides, Heart Gallery, Adoption Created Through Relationships, policy revision to shorten the time from initial inquiry to home study approval, and Family Standards – which are the same for both licensed foster care and adoption – to end the prior practice of two studies. Both the Adoption Guides Program and the Lean Study have been promising approaches. Compared to the control group, the Adoption Guides Program was more cost effective for families and the families were happier with it. Other promising approaches include child-specific recruitment plans through A Family for ME as well as, (according to many of the 2007 District Self Assessments) the 'Adoption Teas', and 'Meet and Greets' that are held to facilitate matching children with adoptive homes.

The Office of Child and Family Services, Division of Child Welfare Practice Model requires that permanency planning efforts occur from initial Child Protective involvement through a child entering foster care at which time concurrent planning is operational. The agency provides and promotes a range of adoption services to children who are legally free for adoption and to those children's birth, foster, adoptive and kinship families. The number of children who currently require adoption-related services in December of 2008 is 488 – 3 fewer than the previous year, with 339 of those children currently in homes that are either foster homes identifying a wish to adopt or pre-adoptive placements. There are 149 children seeking an adoptive placement that currently have no identified resource, 5 fewer than in 2007. In 2008, 283 foster children achieved permanency through adoption and 64 children through permanency guardianship – over 19% of the total population of children in foster care, a two percent increase over 2007 figures. Additionally there were 98 pending adoptions and 15 pending permanency guardianships that will be counted for 2008, which brings the total number of children in foster care that will achieve permanency for 2008 to 460. This is slightly over 25 percent of the children in care.

Staff now assigned to work toward the adoption permanence goal includes thirty seven adoption specific caseworkers, nine adoption/resource supervisors, and one district office having nineteen permanency workers (reunification, adoption and permanency guardianship) with five permanency supervisors. The Adoption Program still has one Adoption Program Specialist, one Adoption Assistance Financial Resource Specialist, and one Adoption Assistance Administrative Assistant.

Statewide one Financial Resource Specialist and one Adoption Assistance Secretary manage the Adoption Assistance Program of which 3167 children are enrolled. In 2008 there were 234 new enrollee's with152 leaving the program for a total increase of 82 from the previous year. The number of children in the Adoption Assistance program again has surpassed the total number of children in foster care in Maine which is at an all time low of 1832. This represents almost 1000 children less in care than five years ago. The Financial Resource Specialist also manages the 131 children receiving the state funded Permanency Guardianship subsidy.

The Maine Adoption Assistance program supports children and their families through financial subsidies, Medicaid and non-reoccurring adoption expenses. At the time of completing the Adoption Assistance Application and Agreement families are provided with a 15 page Adoption Assistance Handbook, a comprehensive guide to the program which is updated annually. The Division of Child Welfare, in collaboration with the Child Welfare Training Institute also updates and maintains the Maine Post-Adoption Resource Guide. The Department of Education and our partners in Children's Behavioral Health are working to support current updates to provide adoptive families with best practice and evidenced based resources to meet the needs of the children they have adopted. This resource guide, located on the web at www.adopt.org/me and www.cwti.org, identifies services that are available from OCFS and from community providers to families who have adopted both through DHHS as well as through licensed private agencies. Adoption Support Groups are listed in the Guide - some of these are specific to families who have adopted from outside of the country. Recent updates to the Maine State web page have made it more manageable for families to connect to various sites to obtain information about adoption. A link was made to facilitate the use of the Adoption Reunion Registry. Information and resources are also available on the web through our contracted agencies. A Family For ME and Adoptive and Foster Families of Maine. A Department wide effort is in place to update the DHHS website to make it more accessible.

Families adopting from foreign countries may also access information from the web site and can contact the Adoption Program for information.

The Office of Child and Family Services is making every effort to enhance and support practice that complies with the provisions in the Safe and Timely Interstate Placement of Foster Children Act of 2006.

- • Effective use of cross jurisdictional resources to eliminate legal barriers to timely adoptions.
 - To ensure reasonable efforts are made to:

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- b Consider interstate placements in permanency planning decisions when appropriate;
- b Consider in-State and out-of-State permanent placement options at permanency hearings; and
- b Identify appropriate in-State and out-of-State placements when using concurrent planning.

• Monthly caseworker visits are conducted for children in out-of-State foster care placements, which can be made by a private agency under contract with either State to perform those visits through use of Purchase of Service agreements.

• Child specific case plans include current information regarding the health, education and other well being domains of the child.

• Adoption and other permanency plan recruitment efforts include the use of State, regional and national adoption exchanges and electronic exchange systems to facilitate appropriately matched, safe, and timely in-State and interstate placements.

• The child's health and education record is provided to the foster parent or foster care provider at the time of placement and provided at no cost to the child at the time the child is emancipated from foster care.

• Require foster caregivers, kinship providers and pre-adoptive families are informed of the "right" to be heard in "any proceeding" regarding the child.

Legislation has been submitted to Maine's 124th Legislative Session to emphasize the need to explore out-of-state placement options on a routine basis. Significant improvements have been identified in the timeliness from Termination of Parental Rights to adoption in all districts. The focus continues to be on timely permanency for all children.

The Adoption Services underwent a Lean Management Process to specifically address the length of time from Termination of Parental Rights to Adoption Legalization. The improvement plan developed as a result of that process, which identified 15 key areas for focus, has resulted in those improved timeframes. Additionally a new focus on data driven outcomes has facilitated these improvements.

Recognizing the need to improve Maine's rate of placement with relatives, efforts have now increased staff awareness and success in identifying and supporting relatives who can either provide direct care for children who have entered the child welfare system or play other significant and supportive roles in the lives of their kin families. We have addressed barriers to adoption by relative families with a more strength based approach and have supported families to make needed repairs to homes to ensure their safety for the placement of children. Staff continues to use lessons learned in searching for and accessing relatives through technical assistance from the National Resource Centers. We are exploring more cost effective and efficient Internet programs that allow for extensive locating processes for relatives.

IV. Training

Initial Staff Training

Subsequent to the 2003 CFSR, the Department and CWTI agreed to revise the curriculum. This has occurred over a period of four years and has been influenced by DHHS child welfare management reform decisions and turnover in management both in the Department and the University. Despite significant funding reductions in the DHHS

- USM Cooperative Agreement, the initial training of casework staff remains a top priority.

Due to budget reductions in 2007 associated with a reduced IV-E penetration rate, the Department discontinued funding of two field instruction units in Bangor and Portland. These had been developed to recruit and train BSW undergraduates for Child Welfare casework.

For initial staff training, the major changes have been the inclusion of the DHHS Office of Child and Family Services Practice Model, inclusion of reform-related policies, transformation of "job shadowing" into structured field practice, and verification that knowledge and skills are acquired as they are taught.

The Department and the University are completing an evaluation and refinement process to verify the reliability of their Pre-service skills and knowledge testing methods prior to full "high stakes" implementation. The "high stakes" designation indicates that once the process is validated, minimum performance requirements will be established, which trainees need to meet in order to continue in their jobs.

All new caseworkers attend Pre-service Training. Identification of experienced caseworkers who need remedial training occurs through supervision and performance management. Supervisors are required to evaluate specific caseworker competencies as part of the annual performance appraisal process, and to approve an annual employee development plan. In January 2008, all supervisors received training in assessing competencies in performance appraisals through the Child Welfare Training Institute, Muskie School, USM.

Training is required for all new supervisors. Since supervisors are promoted from the ranks of caseworkers almost without exception, this training is reviewed under Item 33, "Ongoing Staff Training."

CWTI provides training to Alternative Response Program agency staff on the Family Team Meeting process. Before the end of the 2009 fiscal year, initial training of alternative response staff will become required.

CWTI has provided training to new staff of the Intensive Family Reunification program; this consisted of four days of core training, three days of Family Team Meeting training and two days of training in Strengthening Families, (evidence-based parenting training). This training will continue for new staff.

Through a period of major Child Welfare reform in Maine, combined with significant personnel change and reorganization in each of their organizations, the Department and the USM Muskie School have successfully improved initial training into an area of strength. This is a testament to an evolving partnership, an improving capacity of the Department to articulate programmatic needs, and motivation on the part of CWTI staff to meet Department needs.

Ongoing Staff Training

The three major shifts during the 2005-2009 CFSP have been (1) increase in training for supervisory staff, (2) increase in training related to children's behavioral health, and (3) some decrease in training opportunities for experienced casework staff, associated with funding reductions in the DHHS-USM Cooperative Agreement.

1. Increase in training for supervisory staff: Since 2004, supervisors have received Supervisory training, utilizing a curriculum developed by Tony Morrison, a child welfare social worker, author and trainer of international renown. This training is based on his handbook, *Staff Supervision in Social Care*. The training empowers supervisors, enhances supervisory ability to address interpersonal barriers and strengths in supervision, and trains supervisors to successfully use constructive criticism.

In 2008, all casework supervisors were trained in the utilization of the annual performance appraisal process to assess and enhance staff competencies. Freda Bernotavicz, USM, Muskie School, provided this.

In 2008, all casework supervisors received training in cultural sensitivity (*Cultural Humility*) from trainers from the University of Michigan. This was made available through the Child Welfare Training Institute.

The 2008-2009 Cooperative Agreement between DHHS and the USM Muskie School contains provisions for ongoing supervisory curriculum development and delivery. This represents a re-tooling of the Supervisory Enhancement Initiative offered by USM, CWTI from 2004 to 2008. This previous initiative emphasized more district specific training and individual supervisory consultation, which as provided by both a CWTI staff member and a DHHS Child Welfare Program Specialist.

- 2. *Increase in training related to children's behavioral health:* The merger of DHHS Child Welfare Services, Children's Behavioral Health Services, and Early Childhood Services into one "office" has created an opportunity to improve training for child welfare staff. New training includes:
- Current Best Practices in Mental Health Treatment. 80 staff received this training.
- Use of Psychotropic Medications with Adolescents. 52 staff received this training.

Both of these training initiatives were developed and delivered by Lindsey Tweed, M.D. Director of Clinical Policies and Practice for OCFS Children's Behavioral Health Services.

3. Some decrease in training opportunities for experienced casework staff: The annual DHHS Child Welfare Services Fall Training Conference, which all staff were strongly encouraged to attend, has been discontinued for budgetary reasons. Also due to reduced funding for training, USM Muskie School no longer has capacity to develop and provide workshops identified through a staff training committee process. At this point, training for experienced staff through DHHSUSM Cooperative Agreement is annually determined by DHHS Child Welfare Management.

Despite the budget funding reductions, the training opportunities offered by the DHHS Staff Education and Training Unit and the USM Child Welfare Training Institute are together still quite comprehensive. An online catalog is available to all staff and all listed training is free for DHHS Child Welfare staff. In addition to the in-service workshop training offered through DHHS and USM, an annual allocation of \$20,000 in the Cooperative Agreement continues to be available for other workshop training for Department Child Welfare staff, as well as for purchase of books and journals.

An additional annual allocation of \$80,000 in DHHS OCFS funds is available to districts for their use in funding training of district staff, securing clinical consultation/monitoring services, or for district foster home recruitment and support activities.

Effective September 2008, staff approved by DHHS management to enroll in graduate degree programs receive 100% tuition reimbursement for one class per semester, not to exceed \$10,000 total for the degree program.

Two field instruction units, which were noted in the 2003 Statewide Assessment, were eliminated in 2007 due to funding constraints. The direct impact from loss of these two units has been minimal.

In Maine Child Welfare Services, the only outsourced full case management is in the Alternative Response Program. DHHS caseworker Pre-service Training is open to these staff members for a fee if agencies choose to send them. Other trainings have been provided to Alternative Response supervisors at times of DHHS Child Welfare practice or policy reforms, such as Family Team Meetings or the revised <u>Child Protection Assessment Policy</u>.

Despite budget cuts, essential training remains available and training is focused on DHHS goals and priorities to meet the needs of families involved in the child welfare system.

Foster Parent Training

The 2003 CFSR found that the Department did well in terms of foster parent training. Since that time, the Pre-service Training curriculum for foster and adoptive parents has been maintained without significant change. Changes in ongoing foster parent training have occurred, though, for several reasons:

1 Since 2007, DHHS budget reductions have required that training be provided at reduced cost. All Toolbox training is now provided by CWTI staff, rather than by contracting with other trainers.

2 Maine's geography – with its distances, weather, and dispersed population – makes online and correspondence courses attractive. CWTI has increased the availability of this type of training in response to the wishes of many resource families.

3 In 2007, the Department responded to repeated requests from foster parents to reduce hourly requirements for ongoing training and to discontinue requiring equal amounts of ongoing training for each foster parent. In most two-parent foster homes, one provider is employed, making it more difficult for both to complete training.

4 In response to an increasing percentage of relative caregivers, CWTI has developed training tailored to kinship care. CWTI now offers an AFFT curriculum tailored to kinship care, which districts may request instead of the standard AFFT curriculum.

DHHS and CWTI strive to maintain a balance between program needs, resource family wishes, and changing demographics of resource families.

During most of the time since the 2003 CFSR, a Cross-agency Collaborative has been maintained among DHHS Child Welfare Services, CWTI, Adoptive and Foster Families of Maine, and International Adoption Services Centre. These stakeholders have one or more key roles in the recruitment, training, licensing, and support of foster and adoptive parents. Although the group became inactive in 2007, the committee is now reestablished due to the urging of the private agencies involved. At this point, the main purpose is to restore communication linkages.

In-service training provides training and support to experienced foster and adoptive parents, assisting them in their professional development, providing respite and recognition and contributing to the retention of trained and effective caregivers. CWTI, in conjunction with Maine Caring Families-the Child and Family Service's statewide therapeutic foster care program-and foster/adoptive parents works to design training to meet core requirement needs and develop curricula responsive to the changing needs of caregivers. Training is offered on 17 topics, including Enhancing Self-Esteem in the Foster/Adoptive Family, Alternative Discipline for Foster and Adoptive Parents, and Promoting Healthy Sexual Development. A variety of training formats and delivery methods encourage increased access/participation in training. CWTI has also developed and begun to offer a series of web-based In-Service training. On-going training is required of all licensed foster parents. Foster parents holding a family foster home license must complete 18 hours for the foster parents' combined hours of training, within the two year licensing period, and foster parents holding a specialized children's foster home license must complete on-going training of at least 36 hours for the licensees' combined hours of training, within the two year licensing period.

Training is also offered for foster/adoptive parents and relative care providers through the OCFS contract with the foster/adoptive support agency, Adoptive and Foster Families of Maine (AFFM). AFFM offers a variety of informal training opportunities through their lending library of books and videos as well as an annual training conference.

Curricula from Introductory and In-Service training are reviewed to ensure continued effectiveness and the training process is evaluated to gather feedback and ensure sufficient transfer of knowledge.

The Adoptive Foster Family Training program issues a "retrospective pre-test" on the last day of Pre-service Training. This test requires students to rank their level of knowledge before and after the class in thirteen crucial areas and then to state, in writing, the most important items learned.

CWTI maintains records of some of the trainings in which the foster parent participates. DHHS SETU maintains records of all training that foster parents complete through them. It is the responsibility of the foster parent to maintain a log of the parent(s) combined hours of household training hours and to provide this log of training hours to the licensing worker at the time of renewal. More flexibility has been allowed as to the types of training that are permitted to count toward training hours. Licensing supervisors may determine whether or not a training in which the foster parent would like to participate is relevant to meeting the needs of the children in care.

Through the Cooperative Agreement between DHHS and USM, a strong foster parent-training program has been developed and maintained. CWTI has successfully minimized the impact of recent budget cuts by utilizing their own staff for ongoing training and increasing the availability of correspondence and web-based training. Foster and adoptive training continues to be an area of strength for Maine.

V. Management Information Systems

In 2005, the <u>Child Protection Assessment Policy</u> was strengthened and the documentation requirements were simplified in MACWIS. In 2006, the <u>Child Assessment and Plan Policy</u> was similarly strengthened with enhancements in MACWIS. Also in 2006, policy was developed on <u>Documentation of Case Management Activity</u>. This policy provides guidance on concise, purposeful case narrative recording. In 2007, the Director of Child Welfare Services and the two District Operations Managers identified case documentation as one of four primary areas of management focus for the year.

Regarding quality of reports, ongoing improvements have continued. Beginning in 2002, the Child Welfare Senior Management Team committed to data-driven program management and quantified strategic objectives. This resulted in clearer articulation of program needs for management reports and better program input to information system staff to improve accuracy. Supported by the Casey Strategic Consulting Group, several Maine DHHS Office of Child and Family Services (OCFS) staff received training from the Chapin Hall Center at the University of Chicago. This training enabled Maine Information System staff to engage in longitudinal cohort data analysis. In 2007, Maine DHHS Office of Child and Family Services contracted with the University of Kansas for use of the Result Oriented Management system to provide CFSR outcome data down to a worker level through a web-based portal. Currently Maine DHHS OCFS is negotiating with University of Chicago's Chapin Hall Center to recommence a data relationship, which was discontinued several years ago due to

funding constraints.

The Child Protection Division of the Attorney General's Office was granted access to MACWIS in 2004.

ACF conducted an AFCARS review of MACWIS in 2005 resulting in a subsequent program improvement plan. Since then, all issues identified in the review and included in the program improvement plan have been addressed and corrected. Maine DHHS is awaiting closure of the plan by ACF.

ACF conducted a Title IV-E Foster Care Eligibility Review of Maine DHHS in 2007. At that time all of the changes made to the automated Title IV-E eligibility module in MACWIS were reviewed. Maine DHHS passed this review. MACWIS-supported procedures, eligibility determination, and documentation were noted as strengths.

In June 2008, ACF conducted their final compliance review of MACWIS. Maine DHHS is now awaiting certification of MACWIS as one of only a handful of states with a completed and federally compliant SACWIS system. For the most part, MACWIS is very stable and is considered one of the most successful systems in Maine State Government.

Technical Assistance

Maine has received technical assistance from:

- Wayne Holder, NRC in 2004 on Child Protective Assessment.
- NRCOI on PQI in 2006-2007
- NRCOI on CFSP in 2008-2009

Research and Evaluation

- Wraparound Maine research to evaluate process and results
- High-stakes Testing research to validate efficiency of process

VI. Recruitment of Foster and Adoptive Families

Each district in the state has formed recruitment/retention committees to focus on the local need for foster/adoptive homes. To capitalize on available resources, the Office has developed the Cross Agency Collaborative to address recruitment/retention issues.

Participants representing the Office of Child and Family Services, Child Welfare Training Institute, and Adoptive and Foster Families of Maine meet monthly to discuss issues related to retention and recruitment, as well as training needs of resource families.

Maine has made substantial gains in placement of children with relatives. Although many of these begin as unlicensed placements, a concerted effort is made to encourage unlicensed caregivers to become licensed providers. Some of the steps undertaken to facilitate the move toward licensed status for these kin providers are the revision of the home study process to make it a more family-friendly engagement process; the ability to waive pre-service training for kinship families; and the provision of physical plant improvement funding to assist relatives with making necessary home repairs or improvements to bring the home into compliance with required standards for licensing.

Community recruitment of families locally is conducted in all districts to increase opportunities for children to be placed in their home communities. Each district office has used a variety of contacts to make the community more aware of the need, such as appreciation events for foster, adoptive, kinship families on a regular basis. Practice is now consistent statewide in the utilization of a preliminary informational meeting, of a single initial application; joint education/training sessions and there is consistency in the screening process to determine eligibility standards. A single format is used both by agency caseworkers and contracted staff to produce an in-depth home study that gathers consistent and valuable information on family history, background, relationships and values and motivation to adopt, provide permanency guardianship, kinship care or foster. Changes have been made to streamline the home study to make it more consumer-friendly and indicative of family's strengths, needs and culture.

Child and Family Services, continues its contract with International Adoption Services Centre, Inc. (IASC) and its recruitment entity, A Family For ME. The Office of Child and Family Services has placed more emphasis on an outcome based relationship with this agency since having begun contracting for home study services in 1996. Due to budget constraints home studies are now completed by the state agency staff. Maine DHHS continues to contract for specific services with IASC and A Family For ME:

Recruitment of foster, kinship, permanency guardianship, and adoptive families: An effort to
develop foster/adoptive and kinship families who reflect the racial, ethnic, national origin and
cultural composition of the children in our care. A Family for ME has developed a
comprehensive recruitment campaign that includes providing an informative standard packet
of information for adoptive and foster families, Thursday's Child bi-weekly TV recruitment,
radio and newspaper ads, visibility in all regional districts, Teen Meet and Greets, adoption
parties that bring families and children together in a relaxed and friendly atmosphere and
informational booths at a variety of community events.

A Family For Me is the identified *Recruitment Response Team for Maine* for the national AdoptUSKids campaign and has been an active partner in regional and national work sessions sponsored by AdoptUSKids.

IASC and AFFME have developed a cooperative agreement with a professional photographer and have over the past 4 years photographed waiting children both for photo listing purposes and for the "Heart Gallery" project. This has been a successful project placing children in adoptive homes as a direct result of their exposure in this tasteful venue. A Family for Me has also produced a televised campaign targeting older youth in care that was produced with Maine foster youth as participants, that has continued to be televised.

Maine, through the efforts of A Family For ME, was successful in an application for a *Wendy's Wonderful Kids* Recruitment Grant. This is a signature program of the Dave Thomas Foundation for Adoption, which is designed to meet the most significant need of agencies across the country – more resources to adequately and aggressively recruit adoptive families. This project funded a recruiter to engage in child specific recruitment efforts.

The OFCS Adoption Services program and AFFM have begun collaboration on a project to develop an adoptive and foster care recruitment and retention program with Maine's faith based organizations.

In compliance with the Multi-Ethnic Placement Act, Child and Family Services supports and promotes interstate placement of children and supports those placements through entering into Purchase of Service Agreements with private agencies both in state and out to provide the supports and supervision to facilitate safe and stable adoptive placements.

OCFS works within the Interstate Compact on the Placement of Children (ICPC) and the Interstate Compact on Adoption and Medical Assistance (ICAMA) to assure adoptive families are appropriately assessed and are provided the adoption assistance and medical coverage required meeting their needs.

VII. Adoption Incentive Bonus

Maine has not received Adoption Incentive Funds since 2004.

VIII. Children Adopted from Other Countries

The state takes responsibility where needed for children adopted from other countries, including activities intended to serve children entering state custody as a result of the disruption of a placement for adoption. The DHHS Office of Vital Statistics reports that the number of children adopted from other countries by Maine families during the calendar year 2007 was 166. In 2008 there were 66 foreign-born adoption processed.

During 2008, there were three disrupted foreign adoptions that resulted in the children entering DHHS custody. Now that Children's Behavioral Health Services (CBHS) is under the Office of Child and Family Services there is much greater communication and collaboration to assist families who have adopted children from other countries and are experiencing difficulty. CBHS is able to provide case management services that are designed to prevent disruption/dissolution in those cases.

Maine's private adoption agencies make every effort to replace a child from a disrupted or dissolved adoption into another family within the agency or with another private agency so that the child does not have to enter DHHS custody.

The Office of Child and Family Services (OCFS) contracts with Adoptive and Foster Families of Maine (AFFM) to provide support services to foster, kinship, permanency guardianship and adoptive families. Families that have adopted from out of the country are treated the same as other families and are eligible for all the support services provided by AFFM. Support services include: support groups, resource library, business discounts and periodic newsletters.

Maine OCFS publishes a brochure, <u>A Guide to Adoption Services in Maine</u>, annually that provides information on all licensed private adoption agencies as well as OCFS District Offices. This brochure provides information on selecting an agency for adoption and post adoption services

Efforts continue to support and promote adoption, kinship placement and permanency guardianship to enhance permanency options for children and to assure that no child leaves foster care without a lasting, permanent adult relationship. Our Practice Model states: "All Children deserve a permanent family."

IX. Monthly Caseworker Visits with Foster Children

Maine has a fully implemented SACWIS system (MACWIS) which stores all of the data required to track monthly caseworker visits. This data is provided to management and district Program Administrators through the Monthly Management Report. District Operations Manager meet regularly with District Program Administrators to review the data and support full compliance. The requirement for monthly contact is clearly stated in policy revised in 2005: <u>Child & Family Services</u> <u>Policy Manual; V.D-1 Child Assessment and Plan.</u>

In order to track compliance around the new caseworker monthly contact expectations, Maine built a MACWIS report that automatically generates data regarding caseworker monthly face-to-face contact with at least the majority of visits occurring in the child's place of residence. This report is available to staff and provides both district specific and statewide information.

Based on Maine's baseline data, which included runaways, the following target percentages were established toward the goal of 90% compliance by October 2011:

- Baseline- 2007: 47%
- FFY 2008: 60%
- FFY 2009: 70%
- FFY 2010: 80%
- FFY 2011: 90%

Maine exceeded its FFY 2008 target by 13% with the total of children seen every month at **73%**. As of April, 2009, Maine has already exceeded its FFY 2009 target by 17% with **87%** of children seen every month and 83% of those seen in the home.

X. ICWA

Maine's Office of Child & Family Services, Child Welfare Division works closely with Maine's tribal community to ensure ICWA compliance, foster positive partnering relationships, ensure child welfare staff are trained in ICWA and address any problems/successes as they arise. The Child Welfare ICWA liaison meets with the tribal child welfare representatives approximately every other month. These meetings are staffed by the Muskie School of Public Service, University of Southern Maine.

Maine has four federally recognized tribes with five locations: the Penobscot Nation, the Aroostook Band of Micmacs, the Houlton Band of Maliseets, the Passamaquoddy Tribe at Pleasant Point and the Passamaquoddy Tribe at Indian Township. The Penobscot Nation and the Passamaquoddy Tribe have a tribal court and are therefore able to take custody of tribal children without the need to have the child enter the custody of the state of Maine. However, due to lack of resources the tribes do not always request a transfer to tribal court when a Native child not living on the reservation may be coming into care. The Aroostook Band of Micmacs and the Houlton Band of Maliseets do not have a tribal court, they utilize the State of Maine District Court system.

A great deal of work has been done in conjunction with the tribes during the past five years to improve relations, better educate state child welfare staff on ICWA and help state child welfare personnel to understand the spirit of ICWA in addition to ensuring its legal compliance. DHHS caseworkers receive ICWA training and as part of the initial CPS assessment they ask the family if they have any Native American heritage. The District Court Judges also ask questions regarding Native American heritage at court proceedings. The tribes are notified if there is Native American heritage in the assessment. In addition, prior to going out on an assessment, if there is known Native American heritage the identified tribe is invited to participate in the initial visit as well. This has been monitored through our performance and quality improvement process.

DHHS recognizes homes that have been licensed/approved by the tribe as a fully licensed foster home. If the family is a relative or unlicensed placement, the family is considered for possible placement option, as is the case with all children entering DHHS custody. DHHS will pay the unlicensed placement rate and work with the tribe and the family to help them become a licensed resource. We will accept a home study conducted by the tribe and will coordinate with them as the family moves through the DHHS licensing application and approval process.

DHHS works with Native families, as we work with all families, to prevent the removal of a child from the home. This includes an assessment of the situation and providing services to lower the potential risk of child abuse and/or neglect. In ICWA cases the caseworkers also involve the tribe in planning for the family. The tribe is not only considered a "third parent" in ICWA cases but they offer a distinct set of services and supports for families. DHHS also tracks the status, demographics, characteristics, placement, and goals for all children in foster care as well as provides appropriate services to prevent removal and promote family reunification if children enter state custody. This is done for all children we serve, including Native children.

The following is a summary of the events that have occurred and the work that has been done during the past five years.

2005:

1 Child & Family Services developed a Practice Model to guide our service delivery. This model was discussed with the tribes and their input was sought before the Practice Model was finalized.

2 Family Team Meeting policy and practice was changed to clarify tribal participation. Tribal child welfare staff are automatically invited to any Family Team Meeting regarding Native children.

3 Tribal representatives were invited to and attended the Child Welfare Symposium in May 2005. This symposium, which was attended by DHHS staff, Tribal Child Welfare staff, Judges, GALs, AAGs, parents' attorneys and representatives from the provider community, focused on permanency and finding families for older youth.

4 Child & Family Services began the Residential Review Process to focus on finding families for children and identifying the children in group/residential settings that could be placed in a family setting. Information was solicited from tribes regarding what facilities effectively met the needs of children, worked well with the community and families, met the child's educational goals, and moved children toward permanency.

5 At the request of the Maine Legislature Health and Human Services Committee, the DHHS Commissioner's Office formed five workgroups to look at Children's Reform. The workgroups were: reforming treatment, reforming residential services, reforming community intervention programs and home-based services, integrating case management, and full case-full court. There was tribal representation on these workgroups.

6 Child & Family Services began to develop a subsidized permanency guardianship option for children in care. The tribes were very involved in the development. This option fits better with the tribes approach to customary adoption instead of terminating parental rights.

2006:

1. The Permanency Guardianship workgroup continued to meet to work on the guidelines and subsidy. The current legislative session changed the law to include permanency guardianship as a disposition in court hearings. Child welfare cases in tribal court are also eligible for this disposition and the subsidy for the family.

2. Pre-service for newly hired Child & Family Services child welfare caseworkers includes a section on ICWA. In 2006, for the first time this section was conducted by tribal child welfare representatives. The training was well received and has continued.

3. This session of the Maine State Legislature, the 122nd Legislature Second Regular Session, formed a committee to study state compliance with the federal Indian Child Welfare Act of 1978. The committee included members of the Maine State Senate and House of Representatives, Tribal Child Welfare Directors and a Tribal Chief, the AAG's office, DHHS representation, and a District Court Judge. The committee's consensus was "…that Maine's compliance with ICWA has improved tremendously in recent years. In particular, it appears that fewer children are being removed from

Indian homes. There is an improved relationship between tribes, the Department of Health & Human Services (DHHS) and the Office of the Attorney General with respect to ICWA issues." The committee did made recommendations on areas where further improvements could be made. These included: ICWA training for DHHS and contract agencies, update and develop agreements between the state and tribes, recruit Indian foster families and placement options, outreach for non-Indian foster families, examine the successful model of agreement with the Houlton Band of Maliseets. These issues will be worked on in both the meeting held with the Tribal Child Welfare representatives and the DHHS, OCFS-ICWA liaison as well as in District meetings at the local level. 4. There was tribal representation on the Program Improvement Plan (PIP) steering committee. This committee was meeting monthly and was comprised of representatives of DHHS, the provider

community, legal community in addition to tribal representation. 5. On March 30, 2006 an ICWA Summit was held. This Summit was planned by the Tribal Child Welfare representatives and the OCFS – ICWA liaison in response to the tribes request to meet with the District Program Administrators to discuss ICWA issues and enhance relationships. As the planning continued and it was recognized how far our working relationships had progressed the focus of the Summit was expanded to include how Maine could become a model for Tribal-State Collaboration regarding ICWA. Present at the Summit were Tribal Child Welfare Directors of Maine's four tribes, members of the tribal child welfare staff, representatives from Maine's state court system, AAG's office and a representative of the Administration for Children & Families in Boston as well as the OCFS Director of the Division of Public Service Management, the Child Welfare Deputy Director and the Director of Policy and Practice, Program Administrators, Assistant Program Administrators and members of the Child Welfare Senior Management Team. The Summit focused on how to build on the positive working relationships, the strengths and challenges regarding ICWA and how to make Maine a model state for Tribal-State relations. Many issues and solutions were presented and work is ongoing. The summit received very positive reviews, with the participants to meet again in six months to insure that the ideas put forth and agreed to are implemented.

2007:

1 On October 31, 2006 the second ICWA Summit was held. This Summit expanded on work done at the first Summit in March 2006 and was again planned by the Tribal Child Welfare representatives and the OCFS – ICWA liaison. Participants in this Summit included those invited to the previous Summit Tribal Child Welfare Directors of Maine's four tribes, members of the tribal child welfare staff, representatives from the court, AAG's office and a representative of the Administration for Children & Families in Boston as well as the OCFS Director of the Division of Public Service Management, the Child Welfare Deputy Director and the Director of Policy and Practice, Program Administrators, Assistant Program Administrators and members of the Child Welfare Senior Management Team. The attendance at this Summit was expanded to include members of the Judiciary. The Summit began with a panel of former tribal youth in care from both the state and tribal systems. This provided a focus for the day and again challenges and areas to focus on were identified. The areas discussed were: ICWA knowledge and application; Tribal – State Collaboration; Permanency and Services; Resources and Funding; and Placement.

2 In addition the work of the previous year continued including the PIP Steering Committee, conducting the pre-service training and meetings with the Tribal Child Welfare representatives, the ICWA liaison and the staff person at the Muskie School of Public Service, University of Southern Maine.

2008:

1 Training conducted by the tribes for Child & Family Services child welfare staff was expanded this year beyond pre-service. Training was scheduled for each district office to reinforce ICWA, the law and its practice, for staff.

2 The PIP Steering Committee was reorganized to the Child & Family Services Review (CFSR) Steering Committee to help us prepare for the upcoming CFSR.

3 Work began on an ICWA policy, which will be finalized in 2009. Although Maine has incorporated ICWA throughout its policy, for example it addresses the invitation to and attendance at Family Team Meetings in the Family Team Meeting Policy and licensing of tribal homes in the Family Standards Policy. However, there needs to be one policy staff can refer to when they have a case involving a Native child. This policy will address all areas pertaining to ICWA and will make it clearer for staff, both state and tribal child welfare staff, what the specific policy expectations are regarding ICWA.

4 Work was begun by the tribes on a reconciliation project funded by the Andrus Foundation. The state is participating as requested by the tribes and after work is done within the tribal community the reconciliation work will be expanded to the historical relationship between the state and tribes regarding child welfare issues.

Maine's child welfare staff and tribal child welfare staff have worked collaboratively to improve both the state – tribal relationship and practice regarding ICWA cases. This work has been beneficial not only to the Native children served but to state staff as well in helping them be aware of and respectful of the many cultures in our state. This work will continue and we look forward to continued enhanced collaboration with Maine's tribal communities.

XI. CAPTA Accomplishments

In 2007 Maine Office of Child and Family Services established policy to set improved timeframe expectations for intake screening and assessment of reports of child abuse and neglect. An outside time limit of 24 hours is set for Child Protective Intake to receive all reports and send to the District Office for assignment. Data analysis indicates most reports are sent to the District offices within 2-4 hours. The child victim and critical case members must be seen within 72 hours. A power point training has gone to all staff on the policy and implementation guidelines to meet the 72 hour requirement. From 4/084/09 this standard was met an average of 74% of the time.

Efforts continue to improve in the use of multi-disciplinary teams to enhance investigations. Law enforcement, the medical examiners office and DHHS collaborated on developing a protocol for investigating Maine's cases of Sudden Infant Unexplained Deaths (SUID) using the national SUID protocol. Representatives from each agency attended training on this national protocol in 2008 with subsequent trainings having been presented in Maine utilizing this protocol.

In 2008, the DHHS developed a plan for each of its eight districts to conduct multidisciplinary reviews of cases immediately following a child death or serious injury. These reviews have started in some districts and will expand statewide in 2009. The intent of these reviews is to allow for immediate response to practice issues and facilitate real time learning experiences.

Monthly management reports are prepared and distributed to the District offices where it is possible to track all reports of child abuse and neglect from intake through final disposition. This technology allows for intrastate information exchange and greatly supports program management and improvement. Data tracking has improved face to face contacts and identified where additional supports are needed to enhance district specific performance.

Maine continues to train all child welfare staff in motivational interviewing and the facilitation of family team meetings. Policy outlines specific decision making points where a Family Team Meeting (FTM) is required to be held. The District Operations Managers support the assessment of the quality and outcomes of FTM processes in each district.

The Office of Child and Family Services has identified a specific Program Specialist position to support the continuity and spread of the Community Partnerships for Protecting Children (CPPC). The Portland community has strongly endorsed this local approach to keeping children safe and intact in their own homes and in their own communities, wherever possible. This is a neighborhood-directed initiative that promotes integrated resources and financial support infused into the community. Beyond the two current established sites that have been well received by the community, another Portland neighborhood has developed a site and South Portland has built a community center in which CPPC is housed with a DHHS caseworker on site. Work has begun to develop sites in Bangor and Lewiston, the other two more urban communities of Maine.

XII. Child Death and Serious Injury Panel Report

Currently, the Child Death and Serious Injury Panel is working on a combined 2007-2008 report which is expected to be disseminated in the fall of 2009.

XIII. Child Welfare Waiver Demonstration Project and Adoption Opportunity Grant

<u>Maine Adoption Guides Project</u> – In 1998, Child and Family Services sought and was approved for a Title IVE Waiver Child Welfare Demonstration Project that allowed Child and Family Services since the beginning in 1998, to expend funds in the area of post-legalization adoption services, not normally covered by Title IV-E funding. The partnership of the Maine DHHS, Casey Family Services and the University of Southern Maine developed the Maine Adoption Guides Project, (MAGS) to serve post adoption families to minimize dissolutions and improve the well being of children in adoptive families. We at OCFS continue to assess capability to provide post adoption services following the model of the MAGS project that support the following core principles:

• The dynamics of a family created by adoption are different from the dynamics of a family created by birth.

• Adoption is life-long and its impact creates unique opportunities and challenges for families and communities.

• The adoptive parent or parents are viewed as the expert on their child.

• Families deserve providers statewide that serve adoptive families with an awareness of adoption specific needs of families and competencies in adoption practice.

• Adoption is mutually beneficial to parent, child and society. Society is responsible for supporting and aiding integration and preservation of adoptive families.

Adoption Opportunities Grant – Child and Family Services applied for and were awarded an Adoption Opportunities Grant in October 2003. This project is collaboration between Maine Department of Health and Human Services, Connecticut Department of Children and Families, Casey Family Services in both states, and the University of Southern Maine—this project demonstrated and evaluated the weaving together of two approaches in support of children and their families.

Adoptions Created Through Relationships (ACTR) intended to increase the number of adoptions of older children ages 11 to 17 in foster care who are legally free for adoption or for whom adoption is an established goal. The core of the project was an intervention that consisted of two complimentary approaches that are considered best practice with this population: (1) family team conferencing - Family Team Meeting (FTM) in Maine and Life Long Family Ties (LLFT) in Connecticut, and (2) clinical services and therapeutic supports to facilitate attachments between the child and their new family. At the end of September 2008, a total of 116 youth had been referred to the project and 34 have moved to a permanency status of either adoption (33) or permanency guardianship (1).

Child and Family Services contracts with Adoptive and Foster Families of Maine to provide retention and support services for adoptive, kinship and foster families. AFFM provides training and guidance to support families throughout the process of fostering and adoption. Specific services provided by AFFM include:

- Training programs annual conference
- Allegation support
- Support groups and mentoring
- Resource Library
- *Family Ties* Newsletter features waiting children in each monthly edition
- Holiday parties
- Camper ships identified
- An annual statewide conference
- Mentoring

Staff from AFFM have been active partners in supporting the numerous adoption related events. The *Family Ties Newsletter* is a valuable resource or all adoptive families and provides a venue to share information from DHHS when there are issues we need to inform the community about. DHHS staff participates in the annual conference sponsored by AFFM and find this an opportunity to hear directly from foster and adoptive families about their concerns. AFFM also holds an annual event at Ft. Knox, a state park to recognize foster, adoptive, kinship and guardianship families.

XIV. Chafee Foster Care Independence Program and Education and Training Voucher Program

Combined Final Report for 2005-2009 and 2009 CFIP Plan The Maine Department of Health and Human Services submitted an application and State Plan for Federal Fiscal Years 2005 - 2009 under Title IV-E of the Social Security Act, Sections 471, 472, 474, 475, and 477 and Title I, Improved Independent Living Program, Public Law 106 - 109, the Chafee Foster Care Independence Act of 1999, and the Education and Training Voucher Fund Program. This is a summary of the accomplishments and progress during Federal Fiscal Years 2005-2009.

The goal of Maine's Chafee Independent Living Program is to ensure that every youth referred to its Youth Transition Program has the opportunity to receive assistance to prepare for a healthy, productive life in order to transition successfully to adulthood. Services provided encompass a broad range of supports and skill development opportunities to prepare young people to live "interdependently" in the community as young adults.

Description of Eligible Population of Youth in Foster Care Served:

a. Youth, age 16 or older, for who foster care maintenance payments are being made with Title IV-E funds.

b. Youth in foster care at least 14 years of age but under age 16 may participate in YLAT, attend the annual Teen Conference, and receive the quarterly YLAT newsletter.

c. Non-Title IV-E eligible youth, age 16 or older, who are in foster care under the custody of the state.

d. Youth under age 21, who were in foster care under the responsibility of the state on, or after their 16^{th} birthday. This population is included in the state's overall planning for discharge and aftercare services (Voluntary Extended Care).

e. Youth who are between the ages of 21 and 23 who are working to complete their post-secondary undergraduate degree will be served by assisting with their educational costs in accordance with the guidelines under the Education and Training Voucher fund program.

f. Youth who enter the Maine DHHS permanency guardianship program between the ages of 13 and 18 become eligible for Chafee funded independent living program services upon their 16^{th} birthday and continuing to age 21. Youth who come under the permanency guardianship program who are between the ages of 13 and 16 may also be served as described in item "b" above.

g. Youth who enter the Maine DHHS permanency guardianship program between ages 13 and 18 are eligible for post-secondary education funding support upon their 16th birthday through the federal Education and Training Voucher fund program (ETV) under the current ETV guidelines.

h. Youth who are involved with the Jim Casey Youth Opportunities Initiative Opportunity Passport Program may be served using Jim Casey funds up to the age of 24. This will include a number of youth who have transitioned out of care.

The Maine Department of Health and Human Services does not discriminate in services provided to older youth in care by the Chafee Independent Living Program with regard to race, sexual orientation, religious affiliation, or any other factor that might prevent an older youth in care from receiving the benefit of program services. The goal is to provide every older youth in care, particularly those youth after age 18 and up to age 21, every opportunity to benefit from the services made available by Chafee and ETV funding.

Overview of Strategies to meet the needs of the Eligible Population:

As part of its Chafee Independent Living Services, transition planning with young people is based on a comprehensive assessment of their strengths and needs, a planning process that demonstrates active participation of young people and their supports, and a transition plan that meets the individualized needs of youth for life long connections with a caring adult.

Maine continues to serve those youth eligible for Youth Transition Services primarily through seven Youth Transition Workers (previously called Life Skills Workers), through a contract with the University of Southern Maine's Muskie School, and through contracts with treatment foster care and residential care providers.

Six of the seven Youth Transition Workers are assigned to DHHS district offices statewide and work directly with Child Welfare casework and supervisory staff in their respective offices.

During FFY 2005-2007, Chafee Foster Care Independence Program funds were expended to:

Help youth explore and find their permanency options and connections before they leave care.
Increase and enhance educational achievement, vocational and employment skills, and the

academic knowledge of older youth in foster care. (Supplemental postsecondary education financial support is now funded out of federal Education and Training Voucher program funds)

• Improve and enhance the leadership skills of older youth in care related to employment preparation, employment maintenance, and career planning.

• Increase the knowledge and practical functioning of older youth in care by helping them learn daily living skills, effective problem solving and informed decision making skills.

• Expand resources available to youth in their community as they transition out of foster care to adulthood and help youth connect to their community and to live interdependently in the community.

• Increase our older youth in care's knowledge of how to access and utilize an array of services and informal resources in their community.

• Promote open communication between older youth in care and adults and encourage a partnering relationship that offers mentoring opportunities for youth in care, which may lead to permanent lifelong connections for youth with a caring adult.

• Encourage and promote meaningful and productive communication between older youth in care and Department management staff. (e.g. Youth Leadership Advisory Team activities, etc)

• • Expand the capacity of Departmental staff, foster parents, group care providers, and other adolescent service providers to assess the life skills strengths and needs of youth in care to enable them to acquire the skills necessary to function as young adults in the community.

• Develop a sound basis for Departmental policy, programs, and practice related to preparing older youth in care for a productive life after they leave Departmental care.

Since 2005, Maine has been working to ensure that each district gets the most effective and consistent services for youth transition services. In December 2007, the Office of Child and Family Services Youth Transition Program underwent a re-organization. The six district-based Youth Transition Workers, who previously had been supervised regionally, are now supervised by the Youth Transition Specialist from Central Office while remaining physically located in their assigned district. It is hoped this change will facilitate greater standardization of services and staff expectations across the State. These workers had been meeting monthly and this newly formed unit continues this practice.

Since early 2008, district Youth Transition Workers are also assigned responsibility for completing assessments with youth to identify their strengths and needs related to transition to adulthood. Additionally, they have begun to more routinely participate in the youth's Family Team Meetings, they continue to provide support and life skills services as part of the youth's case plan, and they advocate for permanent connections for older youth.

One of the seven Youth Transition Workers provides Quality Assurance oversight to contracted agencies by conducting on-site reviews of all group and residential care providers with respect to their provision of independent living services to older youth in care. Since 2005, every contracted agency has been reviewed. These on-site reviews consist of records review and some interviews with individual youth in these programs.

A number of treatment foster care agencies and group and residential care agencies continue to provide "congregate" and "scattered site" apartment services for youth in care between the age of 17 and up to the age of 21. Congregate living and scattered site apartment programs now exist in the major cities of the state and in some of the more rural areas of the state as well.

Most of the youth in care who are living in these apartments are either in their senior year of high school, or are in college. With impending proposed changes to the Medicaid Rehab Option, Maine is currently looking at ways to best serve this population in the future in the absence of independent living programs

Contracted treatment foster care, group and residential care providers had been trained to use the Ansell Competency Based Assessment System (CBA) in their transitional independent living preparation work with youth in care. Some of these providers have been using the Ansell-Casey Life Skills Assessment and planning tool (ACLSA) through Casey (<u>www.casey.org</u>.). In the past few years, Residential Standards and expectations for congregate care providers were developed. It is anticipated these will go into effect in the coming year, along with a shift to performance based contracting for providers of this service.

Youth exiting foster care at age 18, and up to age 21, also have access to continued medical coverage through the state's MaineCare (Medicaid) program. Youth are required to file an application for coverage, however, most youth who aged out of foster care at age 18, or continue in voluntary extended care after age 18, qualify for continued medical coverage based on eligibility limits using the current federal income poverty guidelines.

Progress Made: Chafee Act Provisions With Respect to the Native Americans in Maine:

Tribes and Bands have defined their service population as being youth between the ages of 14 and 21 and are youth who are under tribal or band care and responsibility. Chafee funds of \$8,000 per each tribe and \$4,500 per each band are available.

The Houlton Band of Maliseets continues to submit renewal agreements to DHHS for provision of life skills services for their youth. The Aroostook Band of Mic Macs, the Passamaquoddy and Penobscot Tribes did not return signed agreements during that timeframe.

To further collaboration between the Tribes, Bands and DHHS, the DHHS ICWA Coordinator continues to meet with the Tribes and Bands as part of Maine's ICWA Workgroup. In February 2008, this group agreed that the newly hired Youth Transition Specialist should join these meetings as a way to improve collaboration efforts between the Tribes, Bands, and DHHS. DHHS welcomes the opportunity to further enhance our communication, planning, and service delivery to meet the needs of tribal youth and will continue these efforts through 2009.

Additionally, Tribal youth and Tribal professional representatives continue to participate in the Maine Youth Transition Collaborative Advisory (formally called the Maine Youth Opportunities Initiative) Board.

Collaborative Efforts with Federal, State and Community-based Agencies:

Maine is involved in a number of collaborative efforts at the state level:

Since 2004, the *Maine Youth Transition Collaborative* (formerly called the Jim Casey— Maine Youth Opportunity Initiative), has been establishing lasting partnerships with public and private organizations and the business community. This Collaborative allows older youth in care to bank up to \$1,000 a year and have that amount matched. Currently there are approximately 150 youth actively enrolled in this program.

The objectives of MYTC meet the DHHS Office of Child and Family Services' reform goal that all older youth in care will have adequate life skills and lasting community and permanency connections in place when they leave care. The Jim Casey Youth Opportunities Initiative site review team came to Maine in January 2007 and was impressed with how well Maine was doing with respect to the goals of the initiative.

A Memorandum of Agreement between the DHHS Office of Child and Family Services, the Department of Labor, Bureau of Employment Services, and the Program Manager for the Maine Youth Opportunities Initiative was signed in February 2005. The intent of the agreement was to work more collaboratively and closely to ensure that teens and young adults in care were receiving the full benefit of the services offered. The Department of Labor had developed increasing opportunities for older youth in care to participate in apprenticeship programs. A representative from Department of Labor participates on the Maine Youth Transition Collaborative Advisory Board as well.

The Interdepartmental Committee on Transition (ICOT) is an Interagency Committee established by the Legislature that supports Maine youth with disabilities transition to adult life. This organization oversees special education and transition services programming and issues and provides transition trainings in schools, statewide data collecting, and works closely with the Department of Education. The current Youth Transition Specialist will continue to work with this committee.

The Maine Reentry Network Steering Committee is a Department of Corrections grant project to assist youth and young adults with reentry into the community from juvenile and adult facilities. The current Youth Transition Specialist will continue to work with this committee.

Central Maine Inclusive Schools Advisory Group meets quarterly. This is a large group of special education staff, school administrative staff, DOE and DHHS staff and other agencies who are focused on removing educational barriers when youth transfer schools, and developing creative solutions for issues that come up for at risk youth in schools. The current Youth Transition Specialist will continue to work with this committee.

Juvenile Justice Advisory Group (JJAG)-meets monthly to oversee several federal juvenile justice grant program and to serve as advisors to the Governor and State Legislature related to juvenile justice issues and proposed laws. Some members also review grant proposals and oversee numerous Department of Corrections contracts for prevention and intervention programs. Dan Despard, Director of Child Welfare Services was appointed by the Governor to serve on this committee following the retirement of the previous Chafee Independent Living Program Manager.

Friends of Youth in Care Network: A project started by the Youth and Community Engagement Team from the Muskie School of Public Service in collaboration with DHHS. The network's goal is to improve resources available to youth transitioning to adulthood in the areas of education, employment, community connections, housing, permanency and mental and physical health care.

Phoenix Scholastic Society Steering Committee: The Phoenix Scholastic Society, based in the Greater Portland area, is a community of Fellows that brings together, as friends, youth and people who care about them, to support their higher education aspirations. The group is a collaborative effort among local colleges and universities, agencies, and committed adult volunteers to assist youth achieve their personal dreams of higher education.

Teen Pregnancy Prevention Committee: Workgroup to design training workshops for agency and community organizations pertaining to teen pregnancy.

Housing Support for Older Youth in Care:

The Maine Chafee Independent Living Program has set aside up to 5% of its annual Chafee funding allocation to use for apartment security deposits, apartment rent, dormitory room and board, and other apartment living expenses for those youth age 18 who choose to remain in the voluntary care of the Department up to the age of 21.

In general, however, the money provided to support housing arrangements for young people in extended voluntary care (V-9) has been provide by DHHS, Office of Child and Family Services, budgeted state funds.

The availability of federal funds through the Education and Training Voucher Program (ETV) has made it possible to support the room and board costs of former youth in care over the age of 21 and up to age 23. Each year a couple of students who are attending college have benefited from room and board support for costs not covered by other sources of financial aid using ETV funds.

When young adults, ages 18-21, are supported in independent housing arrangements, DHHS works to balance expectations that these older youth gradually assume more of the financial responsibility for their living costs, while not creating financial hardship or undue stress for the youth in meeting their obligations for their extended care (V-9) agreement. Additionally, the youth's DHHS caseworker and/or Youth Transition Worker provide support and guidance to be successful in this type of arrangement.

DHHS recognizes that not all older youth in care are ready to manage this kind of living arrangement at age 18; therefore, a variety of apartment living programs, including more day to day supported living arrangements, are available to meet the needs of all our older youth who are continuing in care after the age of 18.

Youth Leadership Development Activities:

Through a Cooperative Agreement, Department of Health and Human Services has maintained an on-going partnership with the University of Southern Maine Muskie School to support youth leadership. Through this Agreement, Youth Transition Workers and Muskie staff supports youth participation in leadership opportunities throughout the year.

Since 1998, OCFS has routinely sought guidance and insight from youth leaders in the Youth Transition Advisory Team (YLAT) to inform child welfare policy priorities. Maine's successful youth engagement model is founded on these characteristics: youth-driven decision making and input; adult support; a youth-friendly environment; and opportunities to complete meaningful tasks that influence the design and development of youth services and to learn and use new skills.

The young people involved in YLAT (ages 14-21) are currently or were formerly in the custody of the Department of Health and Human Services. Membership is voluntary and each young person determines his/her own level of commitment to monthly meetings and events.

Through YLAT, youth are able to participate in leadership activities in many ways. Youth leaders often engage in identifying the needs of youth in care and proposing creative solutions. Youth leadership roles have been identified in a way that combines the activities and opportunities of both YLAT and Maine Youth Opportunities Initiative for any youth. Youth receive stipends for these leadership activities: Presenter/Trainer; Meeting Facilitator; Youth Researchers; Grant Oversight; Advisory Committee Members; and Policy/Legislative Advocacy.

The adults involved in YLAT are recruited by youth and adult members. Adult members are typically caseworkers, social service providers, group home staff, Guardians ad litem, mentors, Americorps*VISTA volunteers, and social work interns. Significantly, over the past ten years, many of the youth who have "aged out" of foster care have transitioned their role as a youth member to an adult partner, supporting current YLAT members in their youth leadership and advocacy.

Youth meet in their District YLAT teams nine times a year to share experiences, participate in skill building activities, discuss youth issues related to being in the child welfare system, identify child welfare policy and practice priorities, identify needed resources, oversee small grant awards, and have fun.

Three years ago, the Maine State Legislature established a Legislative Youth Advisory Board to advise them with respect to issues that impact the lives of children and young adults in Maine. This is the first board of its kind in the country. A YLAT youth leader continues to be a member of this board. This had led to the enactment of two pieces of legislation that improved the lives of children and young adults in care.

In addition to the local District team meetings, youth gather together for regional and statewide events:

• Regional YLAT teambuilding kick-offs in the fall, where youth and adult partners are involved in training, teambuilding, and priority setting.

• • • The annual Youth Summit in February, where 35-100 youth and 20-90 OCFS staff engage in teambuilding, establishing statewide youth priorities, and meeting with agency, administrative, and state policy makers. While these summits have built leadership capacity, the past two have focused specifically on improving permanency outcomes for older youth in care.

• The Teen Conference in June where 130+ youth focus on leadership and skill building training, committee work, and meeting with policy makers.

• By February 2009, Maine held two statewide *Youth Permanency Summits*. The summits hosted teams from each of the 8 OCFS Districts and Central Office. In 2008 each District sent a team comprised of up to 10 OCFS staff (casework, supervisor and administrators) and 10 current or former youth in care. In 2009, this was expanded to include community stakeholders. Maine plans to continue this important work in 2009. Following the second permanency summit, these district teams

have met again to continue work at the local level to promote youth permanence in their districts.

Over the past five years youth have also been provided with a number of outdoor and adventure based opportunities. Trips varied in length from one day to up to four days. Youth Transition Workers co-lead trips using a number of different adventure-based program service providers. Examples of day trips include skiing and snowboarding (including lessons) and deep-sea fishing. Longer trips have included dogsledding, cross country skiing, mountain biking, kayaking, hiking/work projects, technical rock climbing, and canoe trips. Adventure trips are seen as an effective way to develop relationships with the youth; to discuss their educational, career, and employment plans as well as other issues that they are struggling with.

Program Goals Update:

During Federal Fiscal Years 2005-2009, the focus has been on four major program goals:

Goal 1: Expanded and effective services for older foster care youth that includes greater availability and access to a continuum of services and activities that enable youth to adequately prepare for leaving foster care and live interdependently in the community

Objective 1: To fully integrate the Jim Casey Youth Opportunities Initiative into the DHS districts statewide, making the community connections needed for our older youth in care to make a smoother transition out of care and into their community. This work will happen over the next three years as part of the JCYOI grant and will be sustained after that through September 30, 2009. The objective is to build a sustainable statewide support system for the benefit of all older youth in Maine transitioning out of care.

In April 2007, Maine developed a sustainability plan as a collaborative effort of the public and private partners involved. Key focus areas are:

• <u>Opportunity Passport</u>TM - a matched savings program that enables youth to save for assets, such as vehicles, housing, micro-enterprise, education, or health care costs

• <u>Youth Leadership and Engagement</u> – the Youth Leadership Advisory Team (YLAT) approach ensures that youth in care are involved in reform and advocacy at all levels of the child welfare system.

• <u>Community Engagement</u> – the Collaborative actively seeks ways to engage the community in supporting youth through increased personal, family, and community connections.

The Jim Casey Youth Opportunities Initiative site review team came to Maine in January 2007 and was impressed with how well Maine was doing with respect to the goals of the initiative.

Objective 2: To continue to utilize the district's independent living program staff to act as consultants for agencies and programs providing independent living preparation services thereby enhancing their ability to provide quality services for older youth in care. This will occur on an ongoing basis for FFY 2005-2009.

This was strengthened in 2007, with a reorganization of the program. Staff expectations have been made more consistent and Youth Transition Workers are being seen as part of the Youth's team.

Goal 2: Integration of preparation for adulthood concepts and activities into the casework practice of all staff who work with older youth in the care of the Department.

Objective 1: To implement the recommendations made to our district administrative and casework staff as a result of the recently completed statewide survey of independent living program services being provided by district staff and contracted agency staff. This will be done in view of the Bureau's reform goal of 100% of youth transitioning from care will have adequate life skills and good community connections as they transition from care. Implementation of recommendations will begin in October of 2004. Quality Assurance Managers will also continue to oversee the quality and content of the youth's life skills assessments and independent living case plans on an ongoing basis.

During this time there has been a greater focus with staff on the needs of older youth—related to youth transition and permanency. Youth consultation has grown, including training of staff and prospective foster and adoptive parents to the needs, conditions and hopes of youth in care.

Objective 2: To conduct the 14th annual Teen Conference for independent living program youth, foster care caseworkers, care providers, and others who work with youth who are transitioning out of care and into the community. The 14th Annual Teen Conference is scheduled for June 24, 2004 at Colby College in Waterville, Maine. The Teen Conference will be planning and conducted each year through FFY-2009.

This conference has occurred yearly as part of the DHHS Cooperative Agreement with USM. On average, 120 youth participate each year. Youth have provided feedback each year that this conference has been helpful, particularly workshops that explain college opportunities and the Department's Voluntary Extended Care Program. Youth have also expressed appreciation for having time to connect with one another throughout the day; see friends they haven't see in a while, and learn from others' experiences. Keynotes by youth in care or former youth in care have also been very well received.

Objective 3: To continue to offer specialized independent living and youth development training topics in the training curriculum available through the Child Welfare Training Institute each year through the Fall of 2009. Training will be available for foster care providers, group and residential care providers, and Department staff. Consult with staff from the University of Southern Maine Muskie School, the Department's management and supervisory staff, and the care provider community with regard to selection of training topics will occur on a yearly basis through FFY-2009.

Youth have continued to provide a valuable training experience for caseworkers and care providers through panel presentations. Great efforts have been made to assure that systems providers clearly understand the issues faced by youth in care to strengthen service delivery.

Goal 3: Enhance and maintain quality services that adequately prepare youth in foster care for transition from care to self-sufficient adulthood.

Objective 1: To continue to include youth in the child welfare planning process. Youth will be represented on the Child Welfare Advisory Committee for FFY 2004 through 2009. To continue to utilize the Youth Leadership Advisory Team to provide information to Departmental staff and community service providers regarding the needs of youth in care. The YLAT "Speaker's Bureau" presentations will be planned and conducted through the YLAT Coordinator on a regular and ongoing basis through FFY-2009.

OCFS continues to seek guidance and insight from youth leaders in the Youth Transition Advisory Team (YLAT) to inform child welfare policy priorities. Youth are involved in policy and legislative design as well as the leaders in ideas for summits for youth. YLAT provides feedback directly to staff and OCFS leaders each spring as part of their YLAT agenda. In addition, youth currently and formerly involved in YLAT are active participants on various collaborative workgroups both in the district offices and as part of central office administrative efforts. Youth are given many meaningful opportunities to teach and provide valued feedback about their experiences in the child welfare system. Child Welfare administrators are committed to listening to the voices of all youth in foster care. Objective 2: To work with the Administration for Children and Families and their consultants to identify independent living program outcome measures with a focus as to how these outcomes will accurately measure the youth's successful transition out of care. Outcome measures will be identified with progress reported on measures for each FFY 2004-2009 as part of the National Youth in Transition Database that is currently nearing implementation.

NYTD final rules were published in 2007. Maine intends to comply with this new regulation and is beginning work to assure compliance.

Goal 4: Effective communication and partnership with, and among youth, state departments, community agencies, interested businesses, and individuals.

Objective 1: To continue to meet with representatives of other state departments, representatives from community agencies, members of the business community, and individuals on an ongoing basis for FFY 2004-2009 to improve access to independent living preparation services for older youth in foster care.

Maine is involved in a number of collaborative efforts at the state and local level as outlined earlier.

Objective 2: To continue publication of the Independent Living Program's youth leadership newsletter on a quarterly basis and to continue work on the youth leadership website (www.ylat.org) on an ongoing basis for FFY 2004-2009.

YLAT produced a quarterly newsletter through 2006. Many youth in care contributed to articles about resources and experiences of youth in care. In 2007, this newsletter was developed into a bi-annual magazine and expanded in content and size. This was distributed through 2008; however, due to budgetary constraints, funding was eliminated for this activity after that point.

With the newly formed "New England Youth Collaborative" in 2007, it is hoped this collaborative will begin a New England wide periodical for youth in care. Maine youth would

FFY Allocati	on	# Youth Served	1	Chafee	
FFY 2004		380		\$ 771,350	
FFY 2005		403		\$ 771,257	
FFY 2006		449		\$ 750,357	
FFY 2007		350		\$ 597,003	
	New	Continuing	Total		
Fiscal Year	Participants	Participants	Participants	ETV Expenditures	
both receive this and contribute content to it.					

Summary of Youth Served and Chafee Allocations:

In March 2004, adolescents ages 16 to 18 comprised 19.31% of the total population of children in the custody of the Department (569 aged 16-18, with a total of 2,740 children

in custody up to age 18).

By December 2008, adolescents ages 16 to 18 comprised 21.72% of the total population of children in the custody of the Department (444 out of a total of 2,044 children in custody up to age 18). While in FFY 2008, the Chafee Allocation to Maine was reduced to \$ 565,888.

Education and Training Voucher Program

Older youth in care are well supported by the Chafee Foster Care Independence Program in Maine for the pursuit of post-secondary education and specialized vocational technical job training programs.

Historically a considerable amount of Chafee funds had been budgeted and expended for older youth in care for post-secondary education and job skills training programs. These funds were used to supplement other forms of non-loan federal student aid that young people applied for through the Free Application for Federal Student Aid (FAFSA) as well as scholarships from various other resources. For example, each year, at least one of our students has qualified for a full four-year Orphan Foundation Scholarship.

The availability of ETV funds beginning in 2003 has been of great assistance to students in the private post-secondary institutions. Our overall plan for the Education and Training Voucher (ETV) program funds continues to be using these funds for students who may be attending post-secondary educational institutions out-of-state or in-state, students who are attending a tuition waiver institution or students who might be attending a specialized job skills training program and who have a remaining financial need.

ETV funds will be extended to any student with a post-secondary education financial need, including any older youth in care who was adopted after the age of 16. We serve all categories of former youth in care up to age 23, and there are no identified statutory or administrative barriers that prevent DHHS from fully implementing the ETV program in Maine.

In consultation with the Life Skills Worker (Youth Transition Worker) and district staff who know the young person well, the Chafee Independent Living Program Manager (Youth Transition Specialist) approves the youth's eligibility for ETV funds and makes the final determination of their ETV allocation need under the guidelines of the ETV program. These expenditures are tracked separately from other expenditures under the CFCIP.

Our specialized Chafee Life Skills Workers are very well connected with any youth who is planning for attending a post-secondary education, or job skills training program. They also have well-established links with secondary education counselors, officials, and other support persons for the benefit of the youth that they work with. Life Skills Workers will continue to provide in-person assistance to the youth for completion of required college applications, tests, and how to complete the various financial aid forms. They also help the youth locate housing, child-care, and tutoring, if needed.

The determination for ETV eligibility for funds will follow the same process being used currently for our older youth in care for determining their eligibility for Chafee funds for their post-secondary education program:

- All youth in care are expected to apply for federal FAFSA funds and for the foster care tuition waiver, if applicable.
- They must apply for various scholarships as well. Once any of these non-loan forms of financial assistance have been determined to be available for the student, the remaining level of non-loan financial assistance needed is determined.
- I Once this information has been gathered and is available, a determination of the amount of ETV funds to be awarded will be made.
- A student must maintain good academic standing with a GPA of at least 2.0, or what is considered a satisfactory level of academic performance at their specific institution, in order to remain eligible for ETV funds.

By maintaining this type of eligibility and award system, we are able to assure that the total amount of educational assistance to a youth provided by ETV funds, in combination with any other federal assistance programs, does not exceed the total cost of attendance. It also avoids duplication of benefits under the ETV program and any other federal assistance program.

Older youth in care in Maine continue to be directly involved with their Life Skills Worker (Youth Transition worker), caseworker, foster parent, or group care provider, in making plans for attending a post-secondary education program.

Each summer post-secondary education institutions and financial aid offices in Maine receive letters that identify the young person in voluntary extended care (V-9) status with the Department of Health and Human Services who will be attending their institution in the fall. This is done to explain the billing process for those students to better assure a smooth process for young people.

Utilization of ETV funds:

FFY Allocati	on	# Youth Served		Chafee
FFY 2004		380		\$ 771,350
FFY 2005		403		\$ 771,257
FFY 2006		449		\$ 750,357
FFY 2007		350		\$ 597,003
	New	Continuing	Total	
Fiscal Year	Participants	Participants	Participants	ETV Expenditures
FFY 2004			89	\$179,350

* Preliminary data for 10/1/07 - 3/31/08

Maine also has a foster care tuition waiver program for up to 30 freshman students per academic year to attend one of the state university system schools or one of the state community colleges. This waiver is supported by state funds as these post-secondary schools systems have agreed to absorb the cost of the waiver within their operating budgets. There are more than 15 college campus locations for youth to choose from among these schools.

Once a freshman student has qualified for the waiver, they have up to 5 years of waiver eligibility to complete their undergraduate degree provided they remain a student in good academic standing. In 2007, Maine's Tuition Waiver law was amended to expand the program by adding to the field eligible youth to also include youth who had been adopted from foster care, or youth who are currently under permanent guardianship.

Additional legislation that will benefit youth in foster care in successfully completing their high school education was enacted on September 20, 2007. Public Law <u>Chapter 451</u> "An Act to Implement the Recommendations of Task Force to Engage Maine's Youth Regarding Successful School Completion" is the result of a Governor's Task Force formed to address educational disruption for youth. The purpose of this legislation, also known as the "Maine Department of Education Diploma", is to provide a student residing in the state of Maine, who has experienced "education disruption" and is not able to meet the graduation requirements of his or her local school unit, an opportunity to graduate.

State Match

During FFY 2005-2009, the State continued to provide the 20% state matching funds as required by the Chafee Foster Care Independence Program and the Education and Training Voucher Fund Program. The State match includes the value of Maine's tuition waiver to more than 100 students annually (new and returning) and state funds which are not currently being used as match for other federal funding sources.

Responsible State Agency

The State's Independent Living Program, as set forth by the Chafee Foster Care Independence Act, is administered by the Department of Health and Human Services; the State agency that also administers the Title IV-E Program in Maine. The employer identification number for the Maine Department of Human Services is 1-01-600-0001A6. The Department of Health and Human Services, as set forth in its 2005-2009 State Plan and Application continues to administer youth transition services directly, or by supervising the administration of these programs in the same manner as other parts of Title IV-E. The State's Independent Living Program will also administer the Education and Training Voucher Fund Program.

The Department of Human Services agrees to cooperate in national evaluations of the effects of the Chafee Independent Living Program's services.

The information is the same as recorded on Attachment C, <u>State Information on the Independent</u> Living Program, which was appended to the FFY-1994 Application and State Plan.

Please see Attachment A, "Checklist for Preparing the CFCIP State Plan, Federal FY's 2005-2009. <u>ASSURANCES</u>

Please see Attachment B as part of the ACF - Chafee Foster Care Independent Living Program additional certification requirements.

The State assures that:

- 1. Title IV-E, Section 477 Chafee Foster Care Independence Program funds will supplement and not replace Title IV-E foster care funds available for maintenance payments and administrative and training costs, or any other state funds that may be available for Independent Living programs, activities, and services,
- 2. The Department will operate the Chafee Foster Care Independence Program in an effective and efficient manner,
- 3. The funds obtained under Section 477 shall be used only for the purposes described in Section 477 (f) (1),
- 4. Payments made, and services provided, to participants in a program funded under Section 477 as a direct consequence of their participation in the Chafee Foster Care Independence Program will not be considered as income, or resources for the purposes of determining eligibility of the participants for aid under the state's Title IV-A, or IV-E plan, or for the determining of the level of such aid;
- 5. Each participant will be provided a written transitional independent living plan that will be based on an assessment of his/her needs, and which will be incorporated into his/her case plan, as described in Section 475 (1);
- 6. Where appropriate, for youth age 16 and over, the case plan will include a written description of the programs and services which will help the youth to successfully prepare for the transition from foster care to interdependent living;
- 7. For youth age 16 and over, the dispositional hearing will address the services needed that assist the youth to make the successful transition from foster care to interdependent living;
- 8. Payments to the State will be used for conducting activities, and providing services, to carry out the programs involved directly, or under contracts with local governmental entities and private, non-profit organizations,
- Funds will be administered in compliance with Departmental regulations and policies governing the administration of grants, 45 CFR, Parts 92 and 74, and OMB Circulars A-87, A- 102, and A-122, including such provisions as Audits (OMB Circulars A-128 and A-133) and Nondiscrimination (45 CFR, Part 80) and;

Certifications

The certifications shown below will be certified by the Department's Commissioner as part of the submission of the Title IV-B Child Welfare Plan to be submitted before the end of June 2001.

- 1. Certification Regarding Drug-Free Workplace Requirements (45 CFR, Part 76.600).
- 1. Anti-Lobbying Certification and Disclosure Form (45 CFR, Part 93).
- 2. Debarment Certification (45 CFR, Part 76.500).

Attached are also the additional certifications (Attachment B) required for the Chafee Foster Care Independence Program as signed by the state's Chief Executive Officer's designee.

XV. Performance & Quality Improvement

Historically, the Office of Child and Family Services has recognized the need for strong quality assurance oversight and has dedicated staff to that activity. These activities have included monthly case reviews, reviews of client recipients appealing substantiated findings of child abuse and neglect as well as special projects as requested by management. OCFS has recognized the need to strengthen its QA/QI process and the decision was made to redefine the role of its staff currently assigned to those duties, as well as develop a program whereby staff at all levels own the performance and quality improvement duties whereby it becomes a process vs. a unit of people. This process included supervisory peer reviews, District site reviews modeled after the Child and Family Services Reviews, and the development of District and State Performance & Quality Improvement (PQI) Committees as well as maintaining the unit of staff assigned to PQI activities.

In January, 2007 the caseworker supervisors started conducting peer review within their own District office. Supervisors were assigned one review per month in order to allow for a thoughtful, accurate review of a case. The District PQI Specialist randomly chose the cases that were reviewed. Supervisors completed their review within a month period and submit it to the PQI coordinator in the District who reviewed for consistency and reliability. The final reviews were disseminated to the Program Administrator as well as the peer being reviewed. Although there was District variance as to how these reports are shared with caseworker, the expectation was that this occurs in order to provide feedback to individual workers in order for practice to improve. These reviews were also to be used in District management meetings to share the trends and patterns found in each District.

In order to be successful in creating change within the organization, OCFS recognized the value of engaging staff at all levels. This new focus invites all levels of staff that do the work to be involved in creative solutions to an identified issue. The venue that was developed to facilitate this is the District PQI Committees. The District committees are comprised of a representative of each office unit as well as management who can either approve ideas/solutions or push them to the next level, which is the State level team. The State level team is comprised of the facilitators of each District team as well as the Senior Management Team. This is a process that is worker driven with the feedback loop being a critical element in order for this process to be successful. It is expected that each committee will, at a minimum, meet quarterly. Overall this process has been successful in terms of engaging with staff and creating solutions to barriers that impact District practice. PQI Committee minutes are generated at each meeting, both at the District and State Level. Those minutes are submitted to the Federal Plan & PQI Program Manager and are posted on the OCFS PQI Shared Drive, which allows for the sharing of creative solutions as well as those that were not successful. These committees were included in the development of the CFSR Statewide Assessment as several survey's were disseminated to the groups for specific information that was believed to be in their prevue.

OCFS maintains its unit of staff dedicated to Performance and Quality Improvement, with a PQI Specialist housed in each District but supervised by a Central Office Program Manager. This unit continued to review randomly selected cases on a monthly basis, review and provide feedback to the supervisory group on their reviews, and act as PQI coordinators in the PQI Committees. In the spring of 2009, after careful consideration of the data being provided from the monthly case review, the decision was made to discontinue those reviews as the data was inconsistent with other data measures. The PQI staff will be available to provide more District specific consultation through working on special reviews that could provide the District more relevant information for that district in its efforts to improve outcomes. In addition, this unit will be the core team as OCFS resumes the site review process that was conducted in 2007. The unit will also continue to conduct an array of statewide special projects in order to provide senior management with qualitative data on areas of concern. The PQI unit conducted several of these projects in order to provide qualitative data in the CFSR Statewide Assessment. This group will also continue to gather data that is communicated to the District measuring identified indicators that are developed, particularly as the Program Improvement Plan is developed and quarterly updated required.