Virginia Department of Social Services people helping people

CWAC

September 22, 2020

We're So Glad You're Here!

2

✓ Please keep your lines MUTED (both computer and phone)
✓ Use the CHAT box to interact with everyone
✓ Please type your name and organization in the chat
✓ If your name did not show up and/or you see

your last digits of your phone # listed, let us know in the chat





CWAC September 22, 2020

- AGENDA
- CWAC Charge
- COVID, FFPSA, PIP Updates
- Virginia Prevention Plan Kick off
- Kin-First Culture with a Focus on Service Array, Permanency, Disproportionality, and Engagement
- Plus/Delta



Who is here?





Division Updates



Child Welfare Advisory Committee (CWAC) Charge

<u>**CWAC</u>**: collaborative advisory group working together to achieve system outcomes.</u>

• Child welfare program, policy, training and practice

• CFSP, annual progress reports and other state plans

- Capacity Building and CQI
- Collaboration and Partnerships

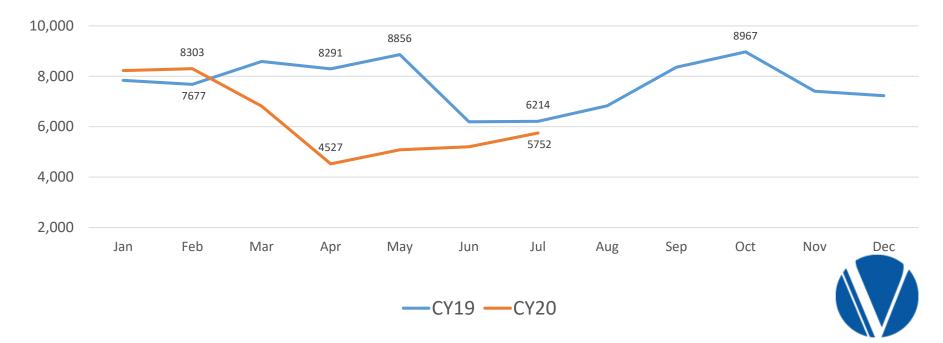


Data Analysis - Hotline

Preparing for back to school increase in calls to the hotline

Prevention	Hotline	Investigation	Family Assessment	Ongoing	Foster Care	
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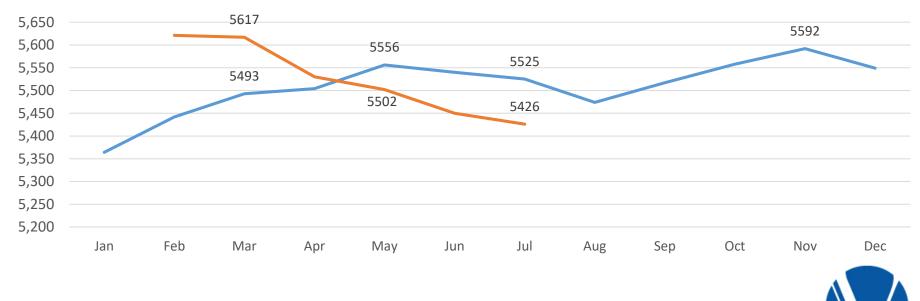
Statewide Monthly Referrals



Data Analysis – Foster Care



Statewide Total Children in Care, by Month (point in time)



—CY19 —CY20

Virginia Plan to Prevent Child Abuse & Neglect

2020 Session Budget Amendment- HB30 Item 354 #10h Page 360

"The Commissioner shall establish a **5-year plan for the Commonwealth to prevent child abuse** and neglect. In developing this plan, the Department shall collaborate with the Department for Behavioral Health & Developmental Services, Department of Health, Department of Education, Family and Children's Trust and other relevant state agencies and stakeholders. This plan shall be focused on primary prevention, be trauma informed, include a public health framework on abuse prevention, promote positive youth development, and be asset and strength based. The plan shall reference and coordinate with any other state plans or programs that deal with issues related to child abuse prevention such as but not limited to teen pregnancy prevention, youth substance use, school dropout, domestic violence/family violence, and foster care prevention. The Commissioner shall convene a work group to assist with developing this plan. The work group shall include, but not limited to, the following stakeholders: Families Forward Virginia, VOICES for Virginia's Children, and the Virginia **Poverty Law Center.** The Commissioner shall report its work to the Governor and the Chairs of the House Appropriations and Senate Finance and Appropriations Committees, and the Commission on Youth by July 1, 2021."

Virginia Plan to Prevent Child Abuse & Neglect



Family First Update

Current Implementation Date January 2021approved by the Children's Bureau (must be implemented by October 2021)

- Looking at feasibility to implement due to COVID delays and funding removed from the budget
- Will make final recommendations in October 2020



Family First Prevention

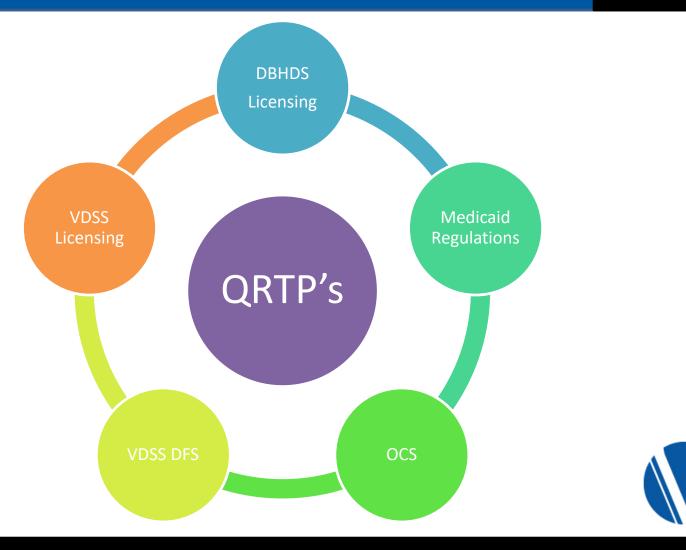
Committed to expanding Evidence Based Providers throughout Virginia October, begin implementing In-home Service alignment (aligning CPS Ongoing Services)

Working with OCS to align data reporting, CANS, Service Funding and FAPT

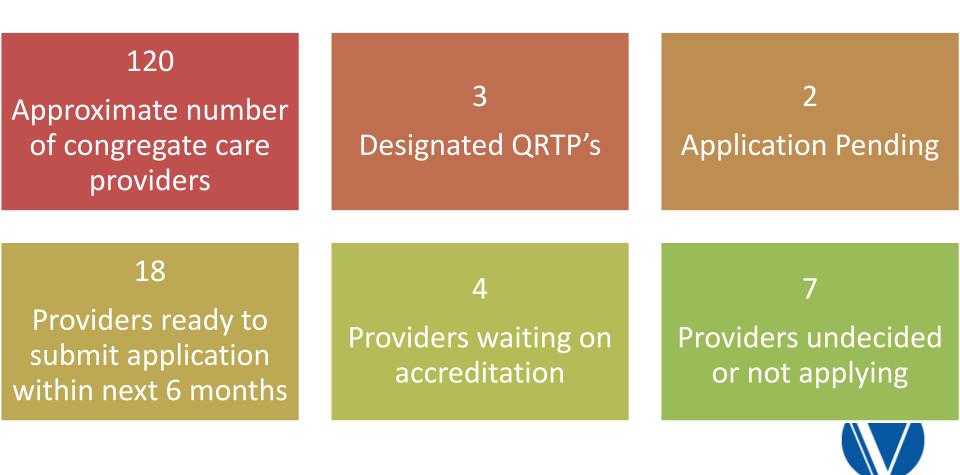


Qualified Residential Treatment Placements (QRTP's)





Providers, by QRTP Application Status



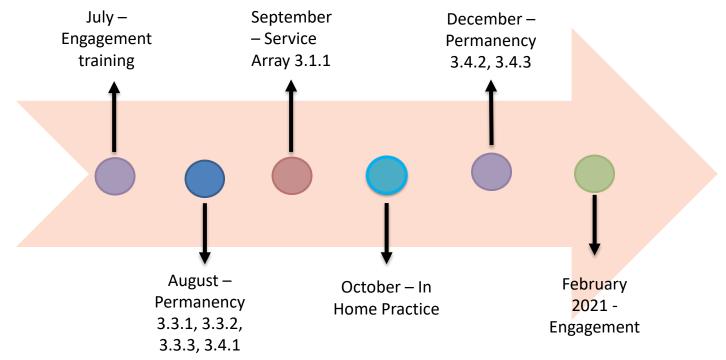
PIP PIP Hurray



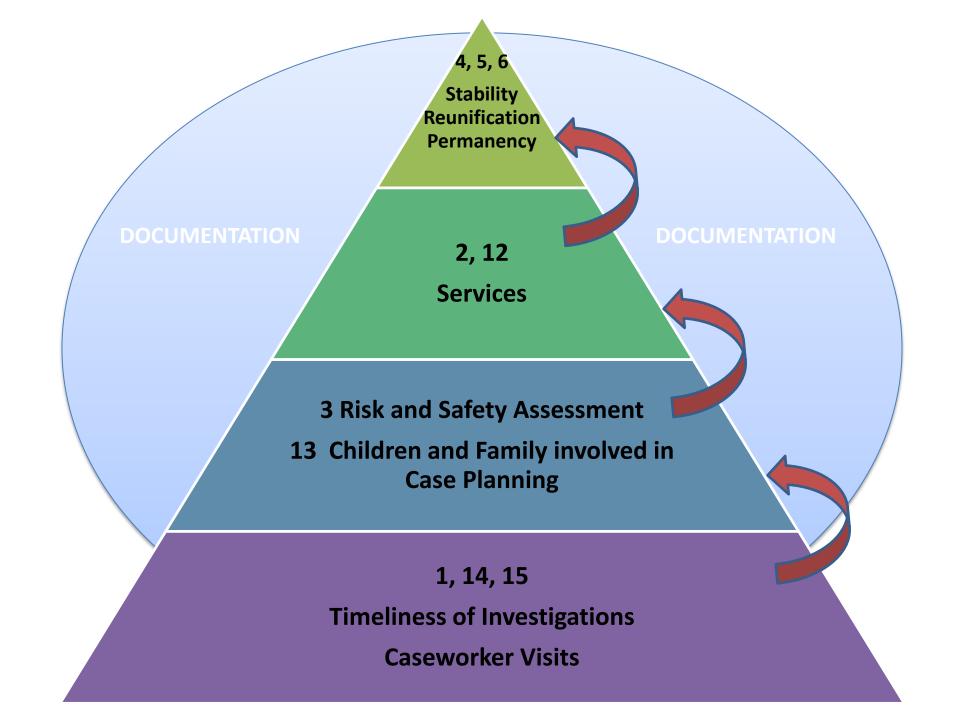
PIP PIP Hurray!!!



PIP Installation Timeline







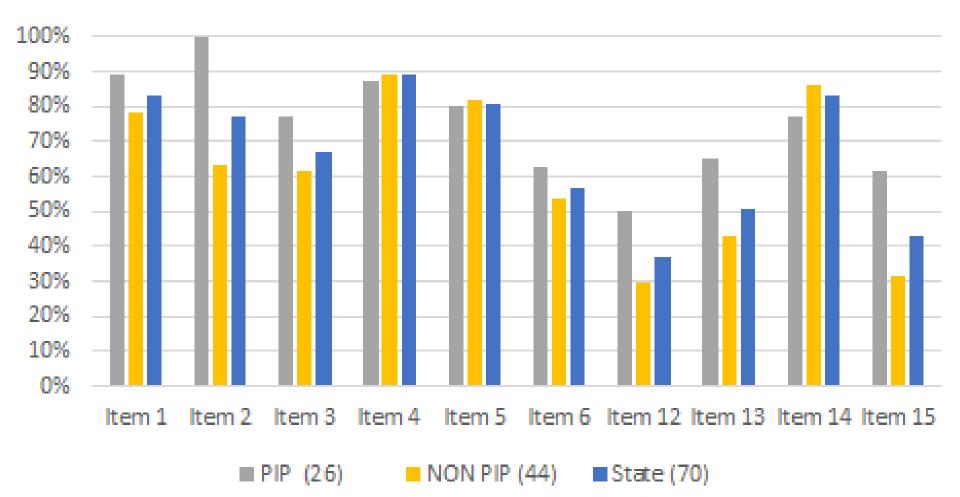
Item 12

Measurement	PIP Baseline ³	PIP Goal⁵	MP1	MP2	MP3	MP4	MP5	MP6	MP7	MP8
1Timeliness of Initiating CPS Reports	77%	88%	68%	70%	74%	71%	72%	70%	76%	83%
2 Services to Family to Protect Child and Prevent Removal /Re- entry	68%	77%	61%	60%	74%	71%	62%	49%	58%	77%
3 Risk and Safety Assessment and Services	49%	56%	50%	59%	59%	59%	60%	54%	51%	67%
4 Stability of FC Placement	71%	79%	61%	73%	86%	70%	71%	77%	80%	89%
5 Permanency Goal	66%	75%	73%	73%	65%	74%	77%	55%	58%	81%
6 Achieving Goal	39%	48%	39%	34%	30%	27%	30%	36%	45%	57%
12 Needs and Services	39%	46%	27%	30%	43%	33%	31%	29%	26%	37%
13 Child and Family Involvement Casse Planning	35%	43%	30%	41%	44%	35%	41%	45%	43%	51%
14 Caseworker Visits with Child	57%	64%	56%	66%	64%	61%	70%	76%	76%	83%
15 Caseworker Visits with Parent	34%	42%	19%	22%	42%	42%	36%	33%	34%	43%

PIP Comparison



Measurement 8 Feb 20- July 20

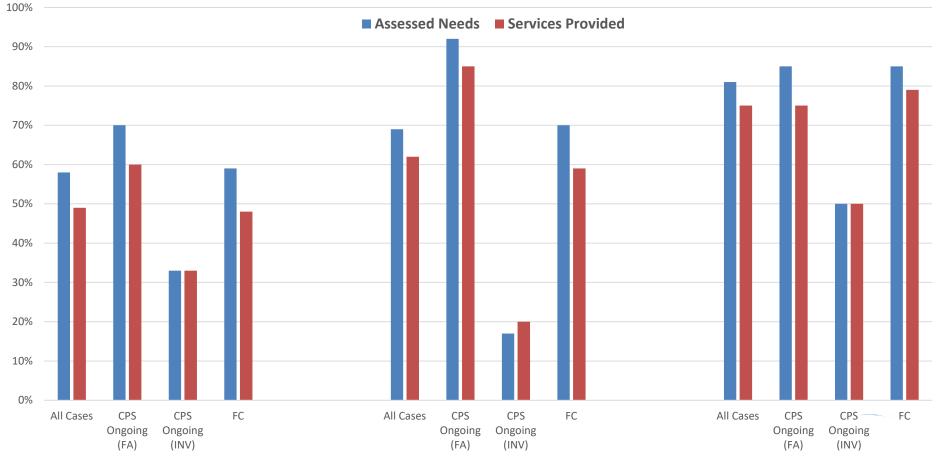




Did the agency make concerted efforts to assess the needs of and provide services to children, parents, and foster parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?



CFSR MP8 Item 12: More Detail



Fathers

Mothers



Collective Thinking



How do you see your role in ensuring children, families, mothers and fathers are assessed for services, referred to, attend and complete services?



5 MINUTE BREAK



Mute
 your line
 Disable
 your
 camera



VIRGINIA

Youth in **Congregate** Care

Data Leaders: Strategic Planning and Performance Measures Workgroup

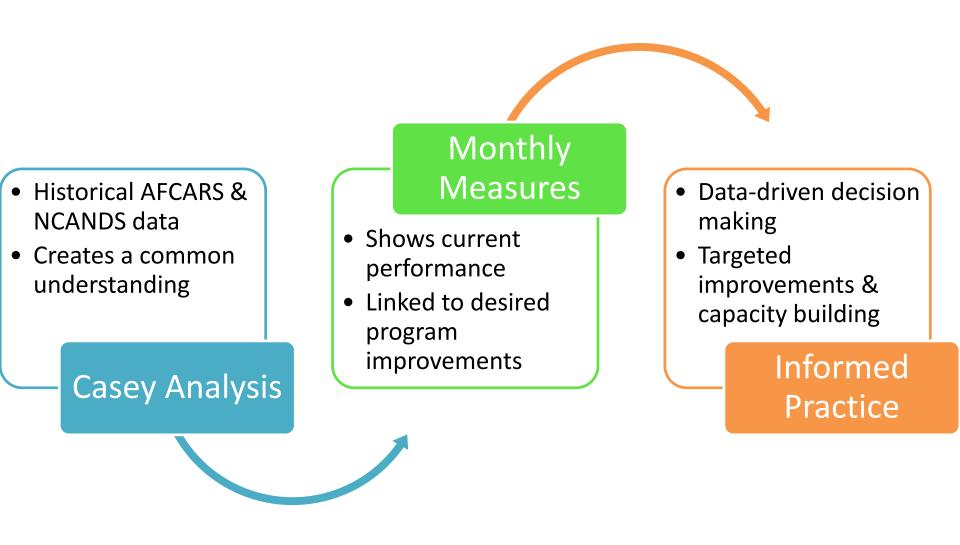
Revised 8/10/2020

safe children strong families

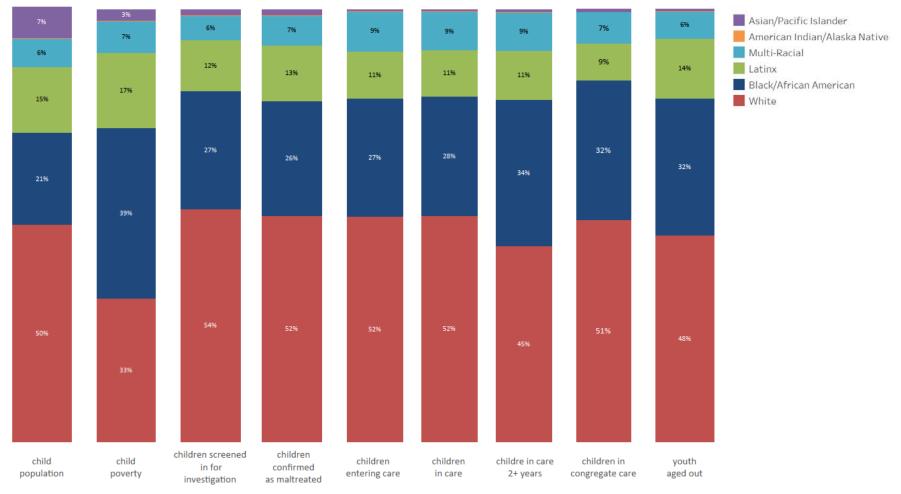
casey family programs

supportive communities

Data Connections



Virginia | Equity in Child Welfare



Data Sources: Claritas and State-Submitted AFCARS files (FY 2019)

5 Outcomes

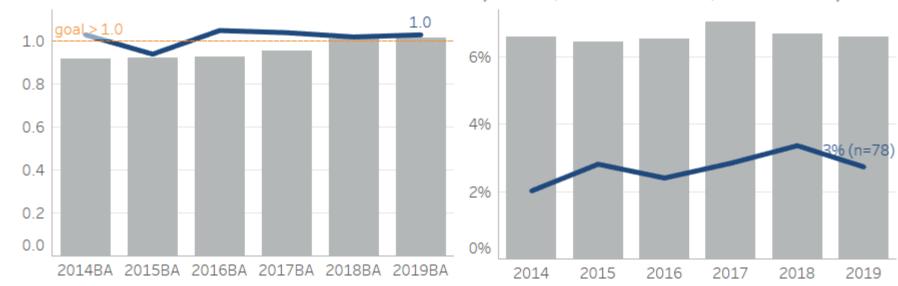
state national

Outcome 1: Increase Exits to Entries Ratio

A ratio of 1 indicates the number of children entering care and the number of children exiting care matches. A ratio above 1 indicates exits exceed entries. A ratio below 1 indicates entries exceed exits.

Outcome 2: Decrease Maltreatment Recurrence

Maltreatment recurrence is measured as the percent of children involved in a substantiated incident of maltreatment who experience a second substantiated incident within 6 months, regardless of whether they enter care, receive in-home services, or didn't receive any services



5 Outcomes

state national

Outcome 3: Decrease Re-Entry into Care

Re-entry into care is measured by the total number of children who achieve timely permanency within 12 months and re-enter care within the subsequent 12 months.

Outcome 4a: Increase Permanency within 2 Years

Permanency within 2 years is measured as the % of children achieving *any permanency* within 12 months of entering care + % of children achieving *adoption* within 24 months of entering care



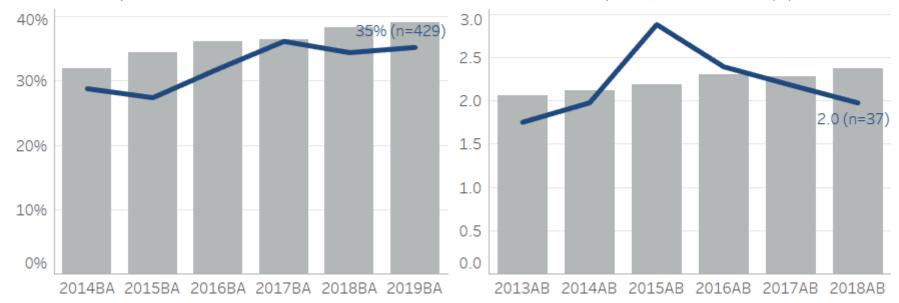
5 Outcomes

state national

Outcome 4b: Increase Permanency for Long Stayers Permanency for Long Stayers is measured as the percent of children in care 24+ months at the start of the year who achieve permanency within the subsequent 12 months.

Outcome 5: Decrease Child Maltreatment Fatalities

The number of children involved in a child maltreatment fatality as reported by states to NCANDS and reported in Child Maltreatment 2018. Rate is calculated per 100,000 children in the population.



Kin-First Culture



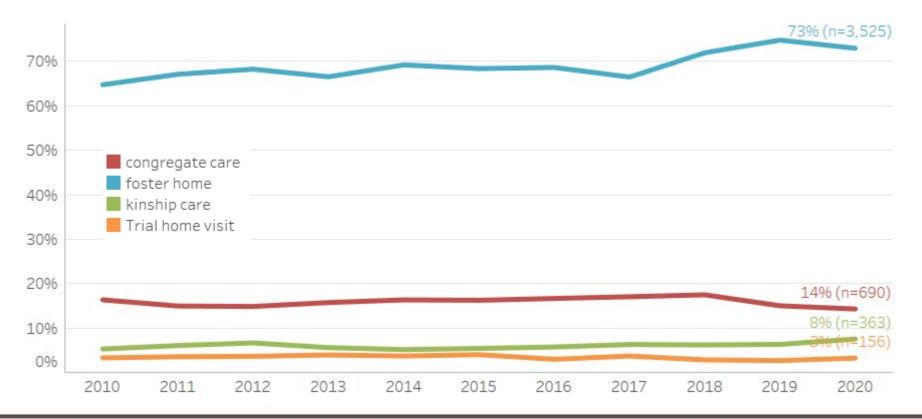
- Families are the experts on themselves
- Driving and included in decision-making
- Opportunity to rely on one another for support





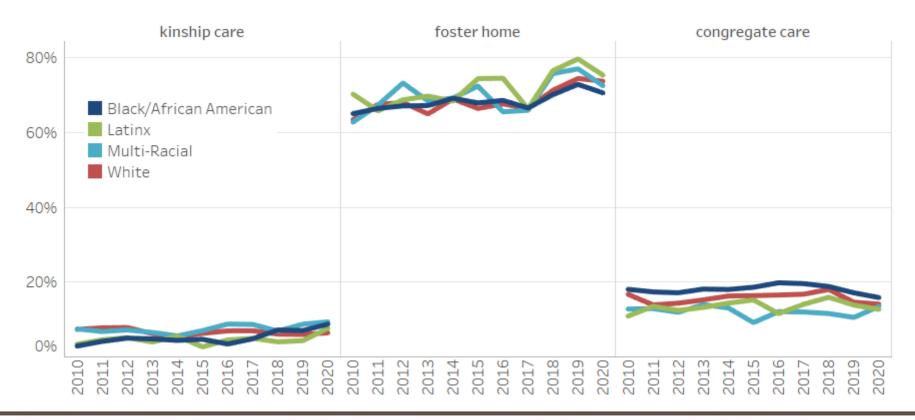
the children that are in care are not placed with relatives at a high rate...

How many children are in care, by placement setting? (ages < 18)



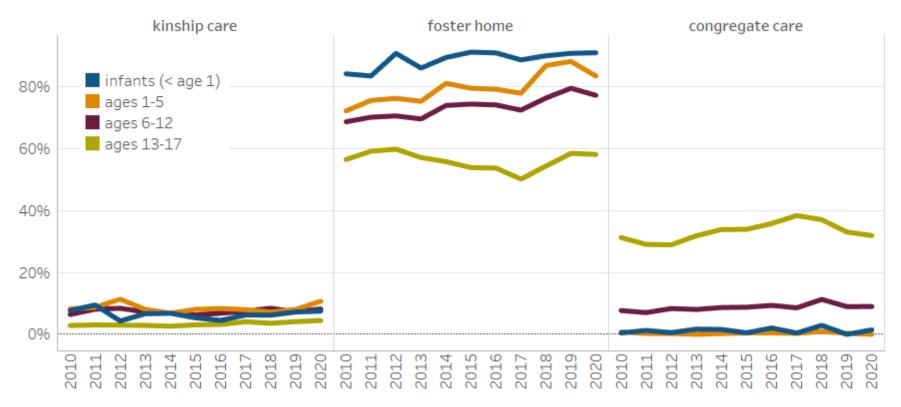
more recently, Black/African American youth have begun to be placed in kinship care at a higher rate...

How many children are in care, by placement setting and race/ethnicity? (ages < 18)



older youth are less likely to be placed with relatives and more likely to be in congregate care...

How many children are in care, by placement setting and age at fiscal end? (ages < 18)



Collective Thinking – Breakout Sessions

34

- \checkmark Automatically be moved to a breakout room
- ✓ Presenter will guide the collective thinking
- \checkmark Presenter to report out your group's key ideas
- ✓ After 15 minutes message to return to larger group
- ✓ Each group will have 2 minutes to report out key ideas





As a system, why do we think children/youth in foster family based settings and congregate care settings can't be cared for by relatives/kin?





As a system, why do we think children/youth in foster family based settings and congregate care settings can't be cared for by relatives/kin?

- Breakout Room 1: Bethany/Garrett
- Breakout Room 2: Elizabeth/Craig
- Breakout Room 3: Morgan/Ebony
- Breakout Room 4: Shannon/Nicole
- Breakout Room 5: Tiffany/Christina



5 MINUTE BREAK



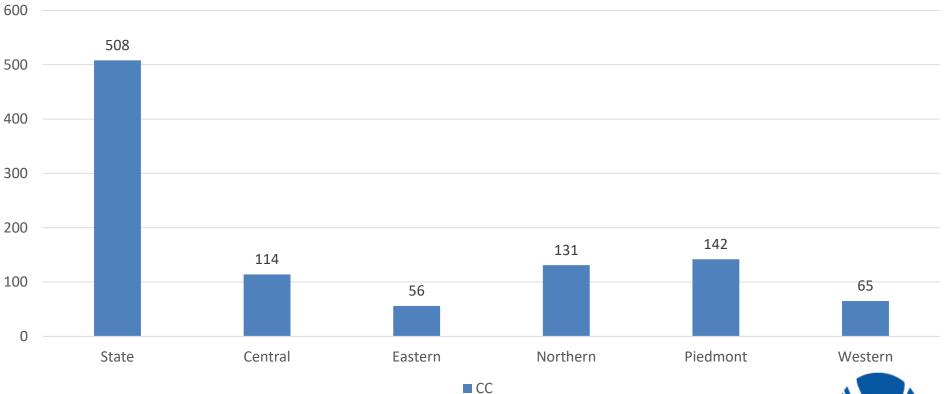
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Congregate Care Placements as of July 2020

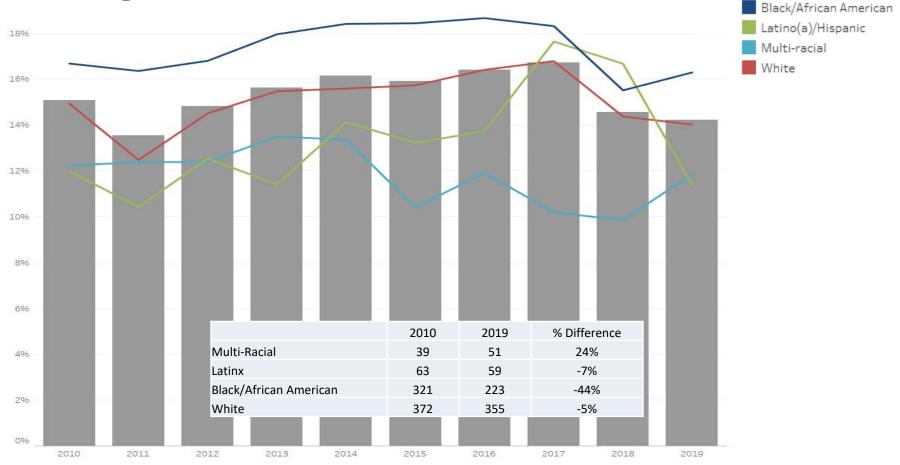


Congregate Care Placements – July 2020



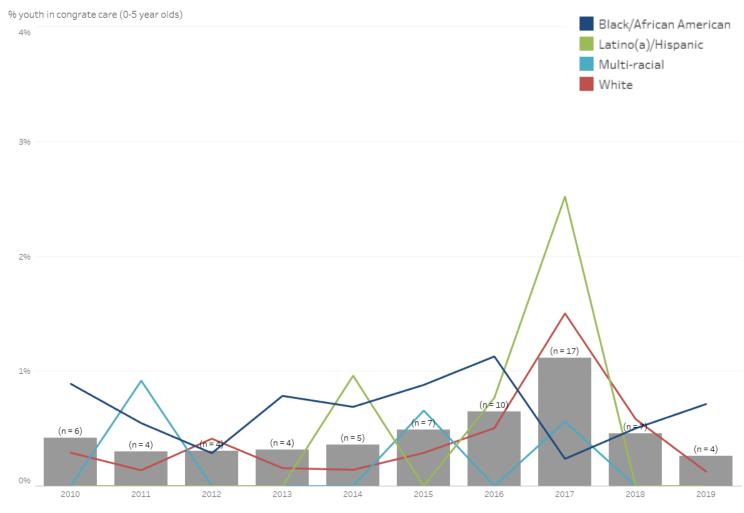


Virginia | Youth in Congregate Care by Race/Ethnicity Youth ages 0-17

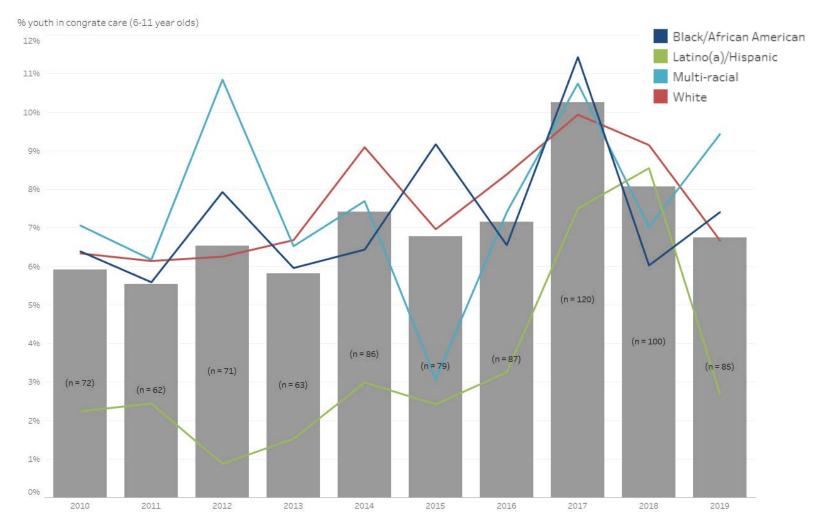


*includes groups with 30 or more children

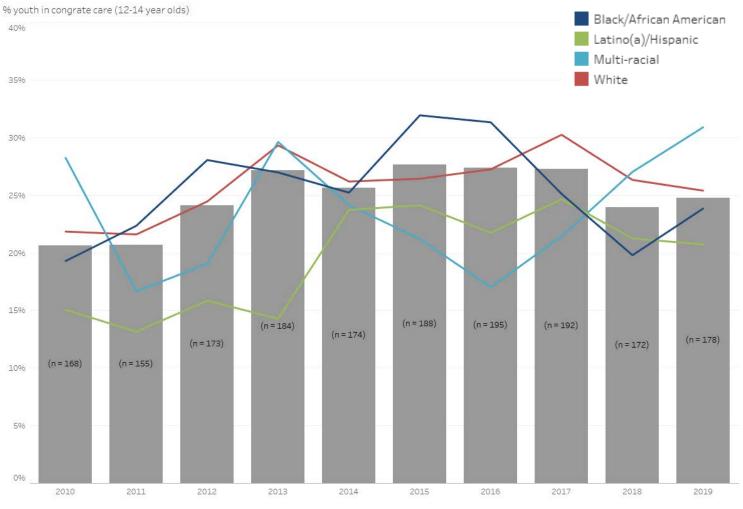
Virginia Children in Congregate Care | 0-5 year olds



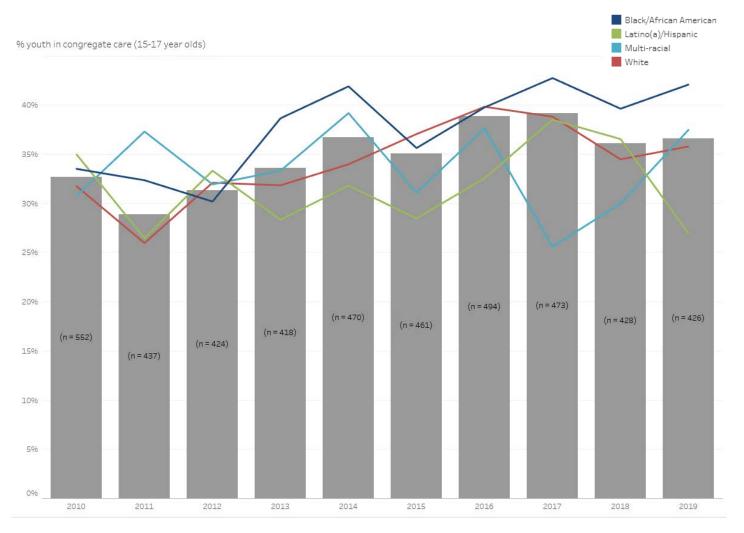
Virginia Children in Congregate Care | 6-11 year olds



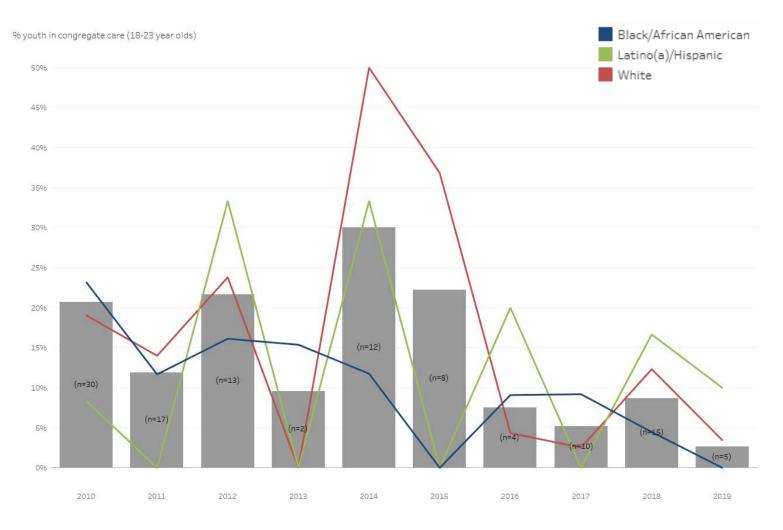
Virginia Youth in Congregate Care | 12-14 year olds



Virginia Youth in Congregate Care | 15-17 year olds



Virginia Youth in Congregate Care | 18-23 year olds



Collective Thinking – Breakout Sessions

45

- \checkmark Automatically be moved to a breakout room
- ✓ Presenter will guide the collective thinking
- ✓ Presenter to report out your group's key ideas
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As a system, why do we think different racial/ethnic groups are experiencing different outcomes?







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- Breakout Room 1: Bethany/Garrett
- Breakout Room 2: Elizabeth/Craig
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- Breakout Room 5: Tiffany/Christina



Next CWAC Dates

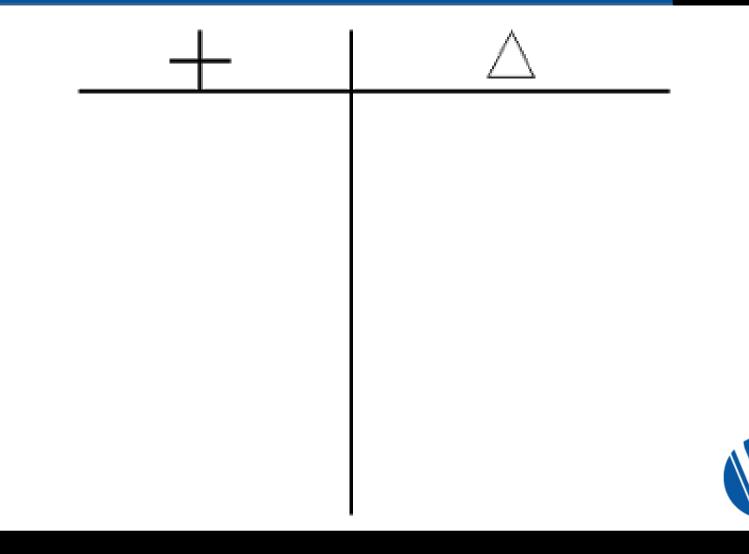




Wednesday June 23, 9am to Noon

Plus / Delta











Child Welfare Advisory Committee (CWAC) Meeting Minutes

September 22, 2020

CWAC Charge

• Ebb and flow has changed of the expectations of the CWAC meetings over the years. To level set, CWAC is an advisory group: we are looking for people to provide input on increasing system outcomes such as CFSP and CFSR; aligning training, policy and practice; capacity building and using data; collaboration and partnerships. Together we can identify the root cause of what is going on and how to improve it.

Data Analysis during COVID

- Preparing for back to school increase in calls to the hotline, at this time we thought students
 would go back to school, but they did not. We've had a significant decrease in calls in
 March/April and now it is going up over the past couple months. The summer shows a usual
 downward turn. We are creating strategies to work with schools and partners about identifying
 signs of abuse and neglect.
- Foster Care: These numbers have drastically declined, although we don't want youth in foster care, they are following the trend of the CPS calls. We are having youth discharged back to family and permanency. We are looking at a record number of adoptions this year 840 were adopted during the last fiscal year.

Virginia Prevention Plan Kickoff

- Virginia Plan to Prevent Child abuse and neglect: we have kicked off the Virginia Comprehensive prevention strategic planning. We are required by GA to submit a plan by 6/30/2021. We are looking to expand prevention throughout Virginia (primary, secondary, and tertiary). We have planning teams made up of 40 different partners and state agencies.
- Kick off meeting in August; steering committee to plan strategies from Sept- Dec.; aggressive timeline, we would like everything to be completed by April so we can submit it to the GA in June and implement in July.

State Office Update

• We are building up prevention at the state office. We previously had 2 positions dedicated to prevention which made it challenging. We have hired an Assistant Director to head Prevention and Protection (prevention and CPS). New Assistant Director is Elizabeth Lee.

Family First Update

- Current implementation date of January, 2021 was approved by Children's Bureau; must be implemented by October 2021. We are looking at making a final recommendation over the next couple weeks through Three Branch, Emails, E-Blast and additional communication to make sure everyone is updated.
- Expanding EBS providers to include training

- Oct. we will look at implementation of In-Home alignment, big thank you to the In-home workgroup
- Working with OCS to align data reporting, CANS and FAPT
- Quality Residential Treatment Placements (QRTPs) continue to work on this part of implementation, working with Medicaid, licensing, OCS to align practices (3 designated at this time: VA Home for Boys and Girls, United Methodist Family Services, and Youth for Tomorrow)
- Data on where QRTP providers are at this time: 120 approx. number of congregate care providers

Deputy Commissioner Update

- Nannette shared the alignment of prevention efforts from primary through tertiary prevention
- Recognize the adoption efforts
- Prevention rollout- acknowledge the work that everyone is putting into this, collaborative effort
- Recognizing data work, 3 data analysist on board, we need to get to the root cause of things, so more analysis will be provided to help with decision making and improving outcomes

PIP Update

- Recognizing great work that everyone has done surrounding the PIP. 10 items that we have focused on in safety, permanency and child wellbeing. We have completed 8 of the 10 items. We have been working on this since April of last year. Lots of progress for Team Virginia. This will continue through February 2021. We are going to be the first state to pass the next CFSR!
- Taxonomy: We need to do things sequentially to achieve outcomes
- Morgan Data: we have met 8 of the 10 items. There is still work in item 1: timeliness of initiating CPS report and item 12: needs and services of parents, children and foster parents
- Feb 2020-July 2020: 70 cases were reviewed, 26 came from the PIP agencies and 44 came from non-PIP. We want to make sure this work continues and doesn't stop at the end of the PIP.
- Item 12: is broken into 3 sections we look at assessing the needs, providing services to children, parents and foster parents. We make the connections with visits, family visitation, case planning, assessing needs and services provided
- All ongoing cases were opened from a CPS case or family investigation. Data shows that more work needs to be done with those CPS cases that were opened from an investigation
- Kristin: this is where the In-Home redesign will help address some of these barriers. We will focus on In-Home implementation over the next 6 months. All of our work will align together to address the In-home piece
- Larger Group Collective Thinking Question: *How do you see your role in ensuring children, families, mothers and fathers are assessed for services, referred to, attend and complete services? Some themes from the chat:*
 - Providing guidance to agencies; stable, well-educated/trained workforce and advocate for adequate staff resources; partnering with community stakeholders – identify needs/gaps/barriers in services (i.e. transportation); study/document positive impact of service assessment and referrals on long-term self-sufficiency of children/families; training in Substance Use Disorders issues, identifying/including fathers in services; provide services that families identify they need; services are available and easily accessible; documents reflect what we belief regarding family engagement, supervisors holding staffings with workers to make sure that all family members are equally

engaged and serving as support systems to the family who should prescribe what's important and helpful to their family; ongoing assessment of services to ensure best fit; service providers adapting practices to meet unique needs of families; families are often asked to identify supports, but not always helped to figure out how to utilize them. How can we help extended family and the community help the family? Using toots such as the genogram and ecomap to guide our discussions with families to help identify natural supports and to understand who the families are and what their needs are; examining our practices and policies to ensure they are equitable and inclusive of our diverse communities; From federal perspective - make sure there is a dear understanding on how federal funds can be used to support services for families; how can we encourage people to see themselves as "mandated supporters"?

- Kristin highlighted a couple comments from the collective thinking: Kim's comment about the federal funds. We will utilize PSSF funding and see how they align with CSA services. We are spending time understanding how these two funding sources can come together to complement one another
- Nannette says focusing on our bias when working with families and how it takes a village to help our families.

Casey Data Connections

- Ben reviewed data from AFCARS Federal reporting for foster care and adoption; NCANDS reporting for CPS
- Equity in child welfare: Looks at child population in Virginia as a whole; The other columns look at other aspects; Ideal world the data would be 21% across the continuum, but there are disparities among the Black/African American population
- Casey developed 5 outcomes; We want to think internally as TEAM VA not comparing to National average
 - 1: Increase Exits to Entries Ratios: Ratio of 1 lets us know as many children coming into our system are leaving.
 - o 2: Decrease Maltreatment Recurrence: 3% which is low, good news
 - 3: Decrease Re-Entry into care
 - 4: a- Increase Permanency within 2 years
 - 4: b- increase permanency for long stayers
 - 5: Decrease child maltreatment fatalities
- This data shows where we've been, where we are stagnant and where we would like to go

Kin-First Culture/Kinship Data

- Garrett explained what kin-first culture means: Families are the experts on themselves; they are driving and included in decision making; and they have the opportunity to rely on one another for support
- Ben data: The children that are in care are not placed with relatives at a high rate. How many children in care, by placement setting: Kinship 363, Foster Care 3,525 and Congregate Care 690
- Rise in Black/African American youth who have been placed in kinship care, older youth are less likely to be placed with kinship providers
- Kristin: We will be utilizing the PIP to focus on looking at and finding family members to ensure these connections. We want to get away from using the term "diversion" and focusing more on

keeping youth with families and in their communities and establishing supports to help them. We are looking at including kinship culture in the court processes this is part of the PIP. We need to focus on bringing the data up when it comes to kinship care. We will continue to use Safe Measure to capture this data.

- Other comments re: kin-first culture: looking at disparity/bias in court system how do we develop kin-first culture in the court system?; some kin experience more barriers b/c they are not "perfect", we need to capture data on youth diverted from foster care and placed with kinship providers via custody, removal, CHINS and delinquency petitions consider the work that may have been done prior to placement in FC; children shouldn't have to enter care just so kin can get assistance; Even with the placement of d1verst0n, the disparity exists in services offered to those children and families; The problem with diversion is not only the lack of data, but the lack of due process for these "voluntary removals" and clear pathways for reunification with the parent
- Collective Thinking Breakout Session Question: *As a system, why do we think children/youth in foster family based settings and congregate care settings can't be cared for by relatives/kin?*
 - Group 1: Systems barriers- approval process, citizenship process, youth having to enter foster care in order to qualify for assistance; practice issues – struggle w/having the front end conversation; culture of apple doesn't fall far from the tree, financial support for families, need for community based solutions; empowerment of families by providers
 - Group 2: Similar as to group before, concerns around support and training, collaborating with community partners, not valuing the strengths of families, engagement, funding barriers, working knowledge of available financial supports, child care, create a culture where families are in the know of supports and options, acknowledging trauma of separation and removal, emphasis on child wellbeing and family connections, supporting workforce
 - Group 3: Adapting to a "whatever it takes" to support kinship family strategy, local agencies and communities knowing how to utilize funds be creative, removing our own bias and expectations in decision making, gaining the support of the courts, having expectation that agencies are looking and placing with kin, financial support; relatives and barrier crime alleviate this prior to coming into care;
 - Group 4: The system needs to be culturally sensitive, background checks and requirements are barriers, workers do not trust families to care for children, families do not trust the system or know how to navigate the system, services are not available or presented to families, we need to do out of the box thinking to support kinship families
 - Group 5: families in other states and counties trying to become approved, utilize fictive kin, focus on kin first culture, understand that the kinship caregiver may be the best option for the child, internal bias of what a family "should" look like, barrier crimes, financial concerns in providing for the child; with older youth, family has invested year and is exhausted making planning challenging; system gives additional barriers
- Kristin: Genogram tool will be released in the spring, a lot of what was said above is "technical pieces". Kinship is a cultural change, if we want to see things change we need to look at values, attitudes and beliefs (adaptive) to create this culture. We need to get on board to determine what our beliefs and values are and how can we align to improve the kinship system, how to we align this to meet our family's needs? We come from different missions, values, beliefs, funding sources, how can we bring this all together?
- Nannette: When she worked at Fairfax they created a Kinship Care Unit to support kinship care providers, and provide case management to these families. She talked about a training in how

different it is to working with kinship caregivers and the culture. She would like to see a Kinship family center to include faith based groups, providers, businesses to create advocates for kinship providers. This goes beyond the child welfare system.

- Em: One of the things that has come up a lot how can we provide more financial assistance to
 relatives so that youth do not have to enter the foster care system in order to receive services?
 General Assembly approved TANF child-only, extra \$200 per child it's a supplemental payment
 to support relatives who take custody of children in order to prevent them from entering foster
 care. Process has not been established and will relay to the field once it has been.
- Gail Davidson recommended looking at our Practice model and guiding principles, it was developed in 2008. What are our values and beliefs as a system? Link to Practice Model: https://www.dss.virginia.gov/about/practice.cgi

Congregate Care Data

- Ben shared data on youth in congregate care by race/Ethnicity ages 0-17; what is happening with our racial and ethnic groups, where are the disparities? Date reported from 2010-2019
- Collective Thinking Breakout Session Question: *As a system, why do we think different racial/ethnic groups are experiencing different outcomes?*
 - Group 1: racism within the child welfare system and in the community (ie. Redlining) the role of the criminal justice system, youth entering foster care through court services, history of disparity, reoccurring beliefs of "what makes a good family", systemic racism, practice standpoint= when do we decide to bring in law enforcement to assist with a family and what is that impact on the family and community, EBS models may be tested in privileged communities so how does that translate in working with families of color or low income
 - Group 2: examining systemic racism and the current landscape, considering housing, education and criminal justice system, they are all connected. Looking at power, control and autonomy, linkage to trust and identifying solutions, gatekeepers of trust in the communities, collaborating for better outcomes, unpacking implicit bias
 - Group 3: influenced by things going on in our country, impact of policies/practices that don't benefit our children and families of color; CASA and state agencies across VA are having these conversations; we are now looking at data and reflecting on results, VHBG has looked at their own bias when it comes to children they accept, discharge rates, who is going to families, likable vs unlikable children, availability of kinship placements
 - Group 4: We shouldn't be asking why but acknowledging we have different outcomes across the systems as a result of the racial trauma experienced, personal bias, cycles of dis-investment that would need to be made within different systems to see change; limited resources
 - Group 5: families that cannot pass the barrier crimes, one agency is reviewing their current data, implicit bias, to include worker level and court level, law that are currently in place, maybe rethink and develop a new practice model, uneven justice system
- Kristin interested in the localities that are completing the "blind referrals". She would like more
 information on the research and study. We are doing literary review on blind referrals. We want
 to make sure we understand what we are talking about, how it impacts the system and how we
 would like to move forward. How can we challenge ourselves and grow? We need to continue to
 have these conversations and explore the data

- Next meeting dates, moving to Wednesday mornings! March 24 and June 23, 9am to Noon. Brenda will send out calendar invites; please let her know if you did not receive it (b.sampe@dss.virginia.gov)
- Comment about seeing where CWAC feedback goes how the feedback provided is being used to update and change practice? Kristin – used to update and inform our strategic plan (Child and Family Services Plan <u>https://www.dss.virginia.gov/family/cfs_plan.cgi</u>)
- Plus/ Delta for today's meeting:

Plus

- Nice to be virtual and not have to travel
- Breakout sessions were well-facilitated
- The breakout questions were good
- o Honest conversations in the breakouts
- Helpful to use data to guide discussions
- o Better presentation on data; data was helpful and revealing
- Loved the visualizations of data/trends over time
- Appreciated the breaks