





Welcome to our Spring CWAC meeting. We are so excited to have you here for our first CWAC meeting of 2024.

Also, let us know if this is your first time attending CWAC as we would love to give you an extra welcoming hello!

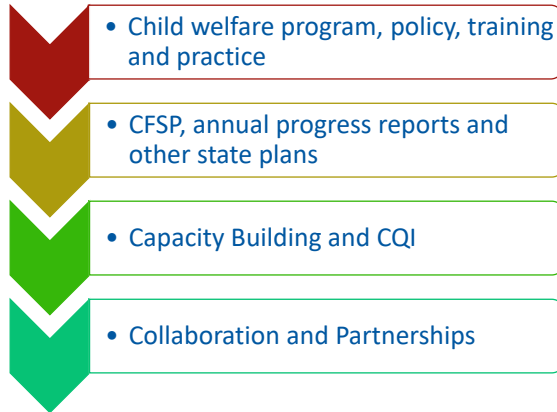
AGENDA

- Division Updates
- CFSP Recap
- Future CWAC Meeting Format
- LTD Update & Q&A
- CFRS Update
- Kinship Legislation & Breakout Rooms
- Plus/Delta



Child Welfare Advisory Committee (CWAC) Charge

CWAC:
collaborative
advisory group
working
together to
achieve
system
outcomes.



You may recall this slide from our last meeting. CWAC is a collaborative advisory group whose charge is partner and advise how we get to our outcomes as a **system**. We are working on developing our partnerships in meeting the outcomes.

The items we're working towards as a child welfare system include

- Child welfare program, policy, training and practice issues
- The development of the five-year Child and Family Services Plan and annual progress reports, as well as other state plans under the responsibility of Family Services including guiding the development and implementation of Virginia's Program Improvement Plan for any element that Virginia does not meet requirements of the Child and Family Services Review (CFSR)
- Ensuring that we build capacity and CQI efforts in achieving and improving all of our outcomes

Let's move to the next slide for a couple updates.

Division Updates

» DFS
program/project
updates

WELCOME

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SOCIAL SERVICES

The slide features a blue header bar at the top. Below it, the title 'Division Updates' is displayed in a large, bold, dark grey font. To the right of the title is a photograph of a wooden surface with the word 'WELCOME' spelled out in small, light-colored wooden blocks. The background of the slide is white with several faint, stylized firework or starburst patterns scattered across it. In the bottom right corner, there is a small logo for the Virginia Department of Social Services, consisting of a blue shield with a white 'V' and the text 'VIRGINIA DEPARTMENT OF SOCIAL SERVICES' below it.

4/5/2025 - Wear Blue Day and Lewis Ginter Event with pinwheel planting

4/15-4/16 - Protection Prevention Conference

Kinship Legislation SB39/HB27

Beginning Oct 2023, Kin First Now is an intervention geared towards increasing relative placements

Month of June we will be focusing on fatherhood work

April 1st also marks the start of our Period Under Review (PUR) for the 2025 Title IV-E federal review.

CCWIS – We are Getting a little bit closer, going to be announcing the vendor soon for Human Centered Design.

Child & Family Services Plan (CFSP) Recap

The CFSP is a **five-year strategic plan** that sets forth the vision and the goals to be accomplished to **strengthen** the states' overall child welfare system.

The Annual Progress & Services Report (APSR) is the annual update on the progress the state has made on the goals & objectives in the CFSP.

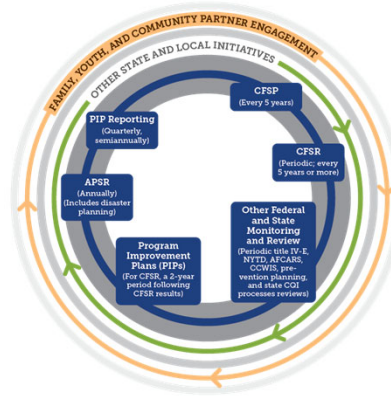


Image from Strategic Planning in Child Welfare (Child Welfare Capacity Building Collaborative)
<https://capacity.childwelfare.gov/states/topics/cq/strategic-planning>



Our CWAC meetings this past year had a primary focus on developing our Child & Family Services Plan. Our Child & Family Services Plan or CFSP is a five year strategic plan that identifies our state's child welfare vision & goals.. The Annual Progress & Services Report (APSR) is the annual update we provide on the progress we made on our CFSP. The graphic on the slide shows the child welfare cycles of planning, monitoring, and reporting. VDSS works to align goals and implementation activities throughout these cycles.

Review of Current CFSP Strategic Plan Draft

Prevention	Protection	Permanency	Operations
<ul style="list-style-type: none">• Community pathways• Evidence based services• Family engagement (kin & fathers)• Motivational Interviewing• Public awareness campaigns• Areas of opportunity in data	<ul style="list-style-type: none">• Family Engagement/ Fatherhood/ Practice Profiles• Timely and consistent response to reports of child abuse/neglect• Addressing areas of opportunity through data	<ul style="list-style-type: none">• Focus on family engagement to achieve permanency• Kinship foster home placements• Increasing services & accesses to services to youth (well-being)• Incorporating lived expertise	<ul style="list-style-type: none">• Focus on the workforce• New CCWIS• Reforming the training system• CQI system integrating existing data



Prevention:

Building community pathways

Expansion of evidence-based services

Enhancing family engagement including with fathers & kin

Motivational Interviewing

Public awareness campaigns/media

Assessing Disparity/inequity through data

Protection:

Family Engagement/Fatherhood/Practice Profiles

Timely and consistent Response to reports of child abuse/neglect

Assessing & addressing areas of opportunity including Disparity/Inequity through data

Permanency:

Focus on family engagement prioritizing reunification & kinship

Increasing placement of children in kinship foster home

Increasing services & access to services to youth to increase well-being

Incorporating lived expertise

Operations:

New Child Welfare information case system

Reforming the training system

Implementing a comprehensive continuous quality improvement system integrating existing data

Next Steps

- » Leadership Review
- » Office of Regulatory Management (ORM)
- » Town Hall & 30 Day Public Comment Period
- » Submission to ACF Children's Bureau by June 30, 2024



The next steps for the CFSP submission:

- Currently undergoing leadership review
- After final approval it will be submitted to the Office of Regulatory Management who will review and then approve submission to Town Hall
- After submission to Town Hall, it will be posted for a 30 day public comment period after which we will be able to submit to ACF Children's Bureau

CWAC Meeting Format



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We wanted to take the opportunity to speak with our CWAC members about the future format and location of CWAC. We have gotten some feedback that people would like to start having the CWAC meetings in person. As many of you know, VDSS has moved into our new location in Innsbrook and we have a lot more capability to have larger meetings in this location than we did in the Downtown location. However, we have also been able to expand and diversify our CWAC membership roster so much due to moving the meetings virtually so we also don't want to lose sight of that as well. We want to get a sense of what our CWAC members would prefer so we have prepared a short 6 question anonymous survey for you all.

We ask that our VDSS staff do not take this survey so we can better assess our external partners and LDSS capacity and preference for meetings.

https://dss-virginia-gov.zoomgov.com/survey/c8oSdB Yl0uMrz79WirZkVcQvGP0ckZaw4l_9mtVJgqT6_G203D0.dzxe9cAgs kH7d5PR/view?id=1CRJnnXiSiCKGHWzZ_kZ1Q#/sharePreview

If not Us, Then Who?



This is the time.....and this is the TEAM who will bring about transformation of the state training system. I often tell my folks that “this is the team that got us here, and this is the team we will win the game with”.... And that extends to everyone in this room.

Think about the slide we saw earlier – Training system Reform is not just an LTD assignment! It is a portfolio-wide effort. (if it isn’t, we will be in trouble!)

- Transform in the way we think and how we do our work (complete reimagination of the training deliver system)
 - Partner between services, programs, agencies and communities (content overhaul and design has already been a huge collaborative effort between LTD, PDC, and local agencies... next we’ll be engaging you!
 - Align toward a shared responsibility (this room is full of our current subject matter experts! We need you! When we have our cohorts onsite, I am hoping that part of that experience will be to hear from you in the programs to introduce yourselves and your work)
 - Coordinate shared approaches to supporting families and our workforce across the portfolio (what if LTD started bringing leadership development to HS leaders?)
 - Ensure that families have what they need to be safe and strong (Better trained and prepared local staff translate into better services provided to our children and families)
- This is how our division makes a difference!

Training System Reform

Let's start with "The Academy"...

- » Cohort-based best-in-class format used by states with similar local/state relationships in social services
- » Foundational Skills for ALL (Family Services, Benefit Programs, Administrative staff, Leadership) - This type of foundational consistency is absent from the current approach, which is heavy on policy and compliance, but lacking in simple introductory concepts to the work of social services
- » Employs blended learning (in-person instruction, virtual instructor-led, eLearning, and simulation labs to train both technical and adaptive skills
- » Allows for a shared experience of consistent foundational training and builds a support network for new staff from their very first day of training

Training System Reform

But it's more than "The Academy"!

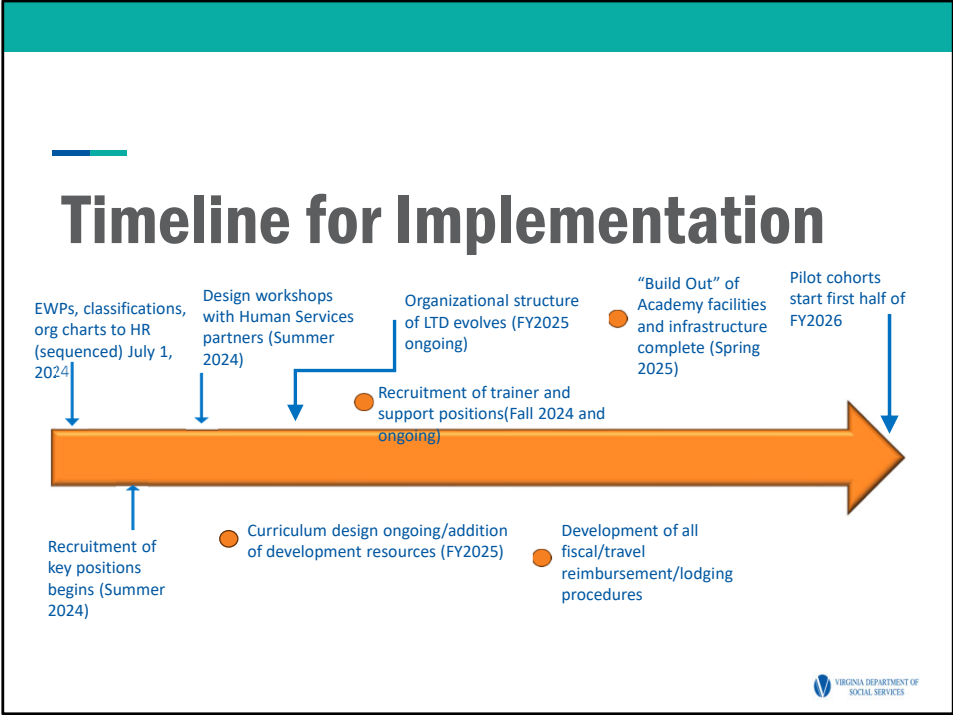
- » Build out of a comprehensive Leadership Development program (Leadership development is a gap in current training. The new approach would ensure leaders are prepared for supervisory roles and have the tools they need to develop and retain a high performing workforce)
- » Allows for a complete curriculum of "refresher" training statewide to keep veteran staff current and prepared
- » Allows for "focused" training provided upon request by regional directors or individual agencies
- » Adds a resource for an Evaluation/Data Analyst to constantly assess efficacy and use CQI principles to ensure training translates into improved outcomes
- » Adds additional resources for the expansion of technology in both classroom and virtual environments
- » Adds a simulation component to practice skills in a safe learning environment (focused on practice AND policy)



The development of a leadership training program helps provide the best environment for new workers to learn and for new (and not so new) leaders to retain staff who are critical to success

Currently, we are so focused on "new worker" training and provide very little ongoing or "advanced level" development opportunities for our veteran staff. Finally being resourced for the scope of the mission means we can do this. Remember, we still have our current staffing level which is largely dependent on part-time trainers.... We haven't lost that!

Agency-specific training is almost always a challenge for us because we are stretched so thin. No's will become "We'll see you there!" and that will make a huge difference in our service delivery model.



It is a LOONG game! There are lots of obvious things to do and others that are not so much (Accounting and travel procedures completely new

“Champions are champions not because they do anything extraordinary but because they do the ordinary things better than anyone else.”
— Chuck Noll



This is how we will win this game... By doing the hard work that we know must be done. We aren't splitting the atom, heading to the moon, or curing a dreaded disease. We are doing the work we know how to do. We will do it together and we will do it better than anyone else!

Child & Family Services Review (CFSR) Agenda

CFSR Data
February 2023-
January 2024

CFSR Team
Updates

Round 4 CFSR
Process

Preparations
for CFSR Round
4

CFSR Year in Review

February 2023-January 2024

- Measurement Period 1 (February-July 2023, Quarters 1 and 2)
- Measurement Period 2 (May-October 2023, Quarters 2 and 3)
- Measurement Period 3 (August 2023-January 2024, Quarters 3 and 4)

Reviewed 96 cases from 96 agencies

- Systematically worked through all state agencies (cases remained random)
- Reviewing remaining 24 agencies in the current February-April 2024 Quarter 5

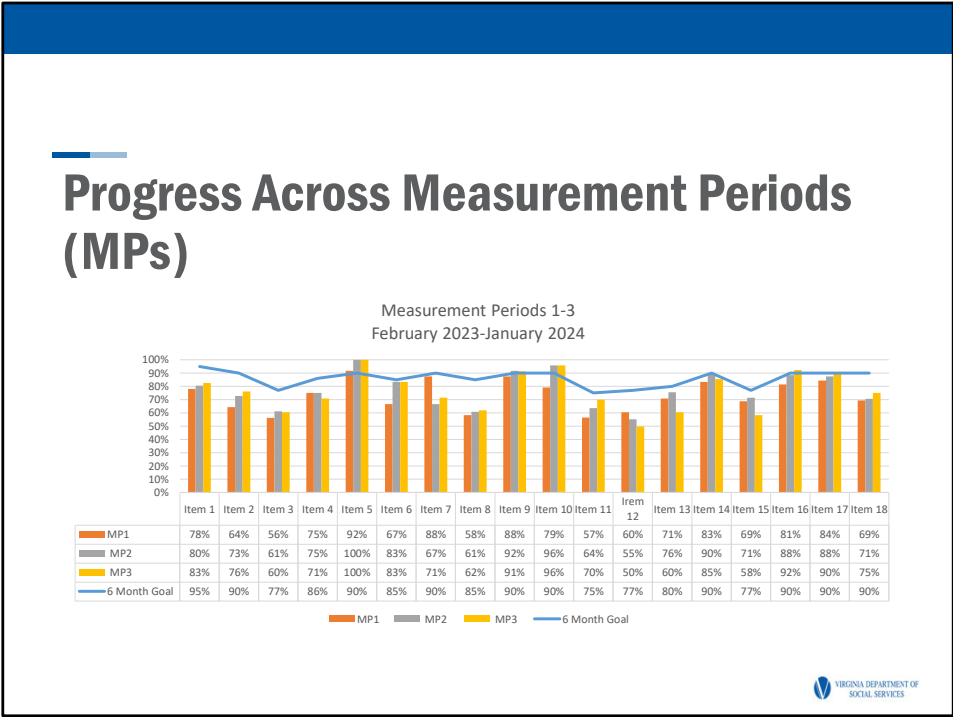
May-July 2024 Quarter 6 will return to fully random sampling of cases

- Alignment with Round 4 sampling requirements
- Representative of our overall state outcomes

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Our most recent CFSR year ran from February 2023 through January 2024 and encompassed three measurement periods over four quarters. A measurement period is a 6-month period of time that encompasses two quarters, and each MP overlaps by one quarter. During the year we reviewed a total of 96 cases from 96 agencies in our commonwealth and ensured that we worked our way through all of our local agencies. Those 24 remaining agencies that were not able to be reviewed during the most recent CFSR year are being reviewed in this current February-April 2024 quarter. While the agency selection process was not random, the cases selected for review remained random. Our hope in sampling this way was to expose all local agencies to the CFSR process in preparation for round 4; however, this has meant that our quarterly and measurement period outcomes have not necessarily been representative of our outcomes as a state.

Now that all agencies have been exposed to the CFSR process, we are shifting back to fully random sampling in our May-July 2024 quarter, which means that the agency and the case will be selected at random. We are slowly going to move toward meeting all round 4 CFSR case sampling criteria provided by our federal partners, in preparation for Round 4 which begins in October 2025 for Virginia.



Due to our sampling methodology and smaller sample size, our quarterly outcomes have not been representative of how we are performing as a state. However, this graph provides a big picture of our outcomes across the entire CFSR year, or three MPs, and helps us see where we are overall doing well as a state and where we require continued growth. As you look at the chart, the orange line represents MP1, the gray line MP 2, and the yellow line MP 3; the blue horizontal line represents the 6-month goal for each item. For those who may not be aware, the 6-month goal is a benchmark that we have set for each CFSR item in order to move us toward meeting the federal standards of 95% for item 1, and 90% for items 2-18.

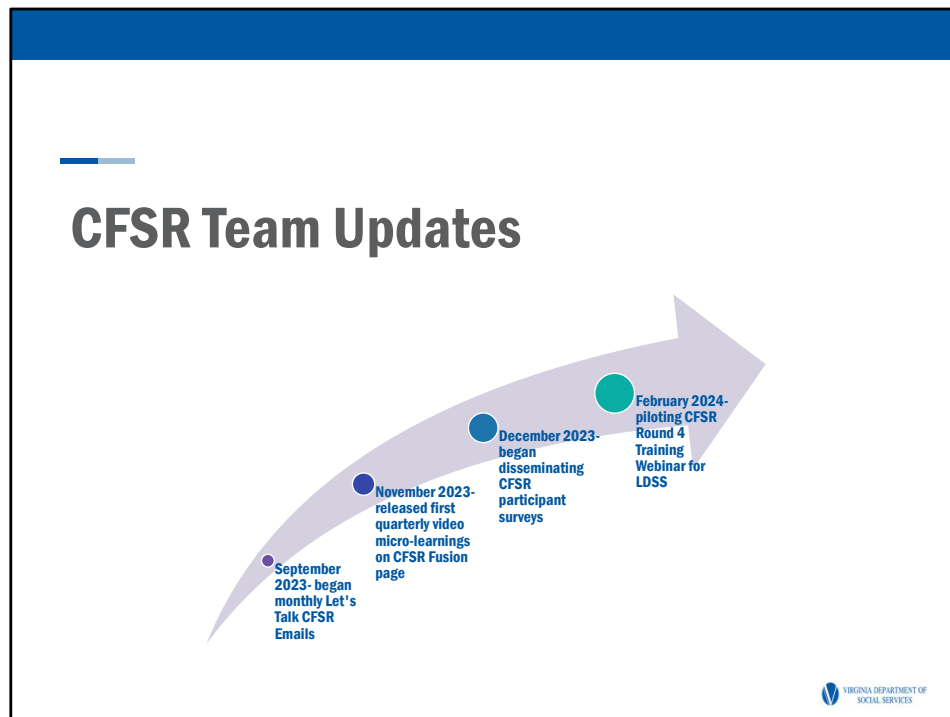
Seven of the 18 outcome items have seen consistent growth across the entire year, to include items 1, 2, 8, 11, 16, and 17. As you can see, Item 8 outcomes require significant continued growth in order to achieve the established 6-month goal of 85%. However, the steady upward trend over the course of 12-months tells us that there is actionable change happening to improve the quality and frequency of visitation for children in foster care.

Items 5, 6, 9 and 10 saw increases from MP1 to MP2 and held steady in MP3. As a state we have consistently met the federal expectation for Item 5 throughout the year and met the federal expectation for Items 9 and 10 in the last 2 MPs. Item 6, achievement of permanency goals, has not met the 6-month goal of 85%, but is very close at 83%. Stability

in an item is certainly preferable to a decrease; but in those items where we have remained stagnant, particularly when we are so close to meeting our identified goal, we have been questioning what we can do to promote our continued growth in those items.

Items 3, 4, 7, 12, 13, and 15 have seen decreases in outcomes. The decrease between the MPs for items 3 and 4 was not significant; however, those items are still scoring considerably lower than the established 6-month goal. Items 7, 12, 13 and 15 all saw significant dips in outcomes across MPs, with Item 12 demonstrating the most consistent downward trend. Unfortunately, Item 12 continues to be a struggle for Virginia, with most of the ANIs resulting from 12B, needs assessments and services to parents. Needs assessments and services were more consistently provided to children in Item 12A, and resource parents in Item 12C. Within 12B, mothers were consistently more likely to be provided assessment and services than fathers.

As we move toward Round 4 we continue to have discussions as a state about how to move our practice forward and meet our CFSR benchmarks. Until Round 4 we will continue to review cases each quarter and provide feedback and technical assistance to agencies in partnership with our regional practice consultants and strategic consultants.



In September 2023, the CFSR team began distributing monthly informational emails to local departments of social services. These emails are for the purposes of providing important information regarding the CFSR to local agency staff, as well as answering frequently asked questions regarding the CFSR. In addition, the CFSR team released our first quarterly micro training videos on the CFSR Fusion web page in November 2023. The micro trainings are designed to focus on specific CFSR items and understanding the federal expectations and rating criteria. Each video is between 5-10 minutes in length so that local agency staff can get specific and targeted information on CFSR items in a manageable timeframe and without completing a lengthy training.

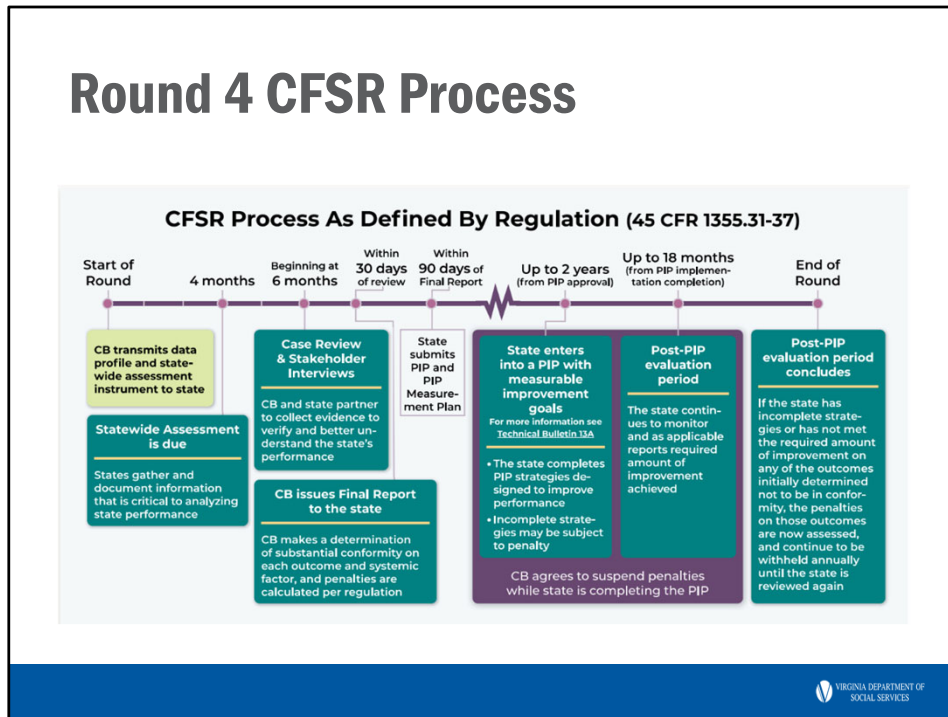
Beginning December 1, 2023, CFSR staff started disseminating surveys to all CFSR participants at the conclusion of a case review. The survey results are providing data necessary for Virginia's statewide assessment process in preparation for CFSR Round 4. The survey collects information regarding child and family involvement in case planning, accessibility and appropriateness of services, timeliness of court proceedings, quality assurance processes, and additional data points that will assess the overall functioning of Virginia's child welfare system.

Lastly, in February 2024, the CFSR team piloted our half-day Round 4 CFSR webinar training. Two LDSS agencies from each region were invited to attend the pilot, along with regional

staff. These webinars will continue to be offered on a quarterly basis to local agency and state staff, as well as any other interested partners or stakeholders, to explain the CFSR process more in-depth. We've taken feedback received from the pilot training to make the webinar more interactive and digestible for attendees. Course registration is offered through WebEx, but all participants will get credit in the VLC upon completion of the course. Sessions include a number of CFSR resources for attendees and Q&A with the CFSR trainers.

(Meghan will drop in chat: Watch CFSR Micro-Learnings and register for the Round 4 Webinar here: <https://fusion.dss.virginia.gov/dfs/CFSR-Training-for-LDSS>)

Round 4 CFSR Process



As I noted in the previous slide, we are preparing for Round 4 by providing trainings, information, and support to our partners at local agencies, as well as by gathering data as part of our statewide assessment process. The start of our round begins in October 2025, at which point Virginia will prepare to submit our statewide assessment and will begin our case review process. Virginia is engaging in a state-led review, meaning that our CFSR reviewers will be conducting case reviews as we typically do throughout the year; however, we will be calling upon a small number of key partners to assist us in the case review process. During that time, the children’s bureau will also conduct stakeholder interviews with our key partners to obtain additional information regarding our state’s performance. Based on the results of our review process, we will get a final report from the CB and make plans to develop and implement our program improvement plan, or PIP.

Preparations for Round 4

Ways you can be involved

- Participate in stakeholder interviews
- Train to be a reviewer in the case review process
- Participate in PIP development and implementation

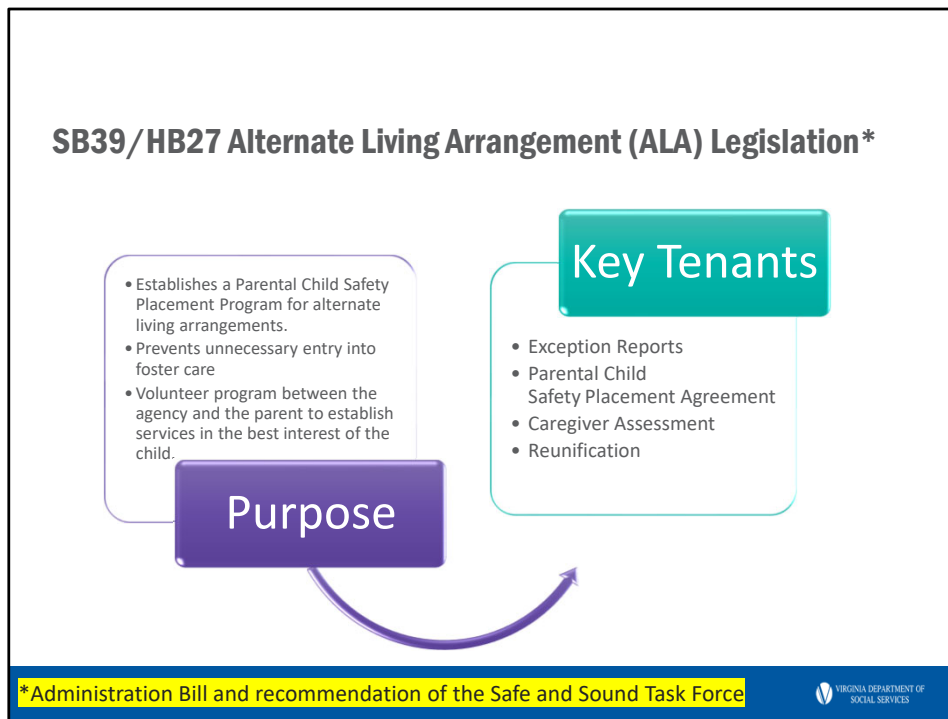
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As we get closer to the start of Round 4 in October 2025, we will be reaching out to additional community partners and stakeholders to join us in the Round 4 CFSR process. Please be on the lookout for information from us in the future about ways that you may be asked to engage in the process, which may include participation in stakeholder interviews, training to participate in our Round 4 case review process, and participation in our program improvement plan development.



BREAK – Return @ 2:08PM





We have exciting news to share Senate Bill 39 has passed which continues to support Virginia’s efforts in moving towards a kin first culture. Senate Bill’s companion bill is HB27. SB39 established a Parental Child Safety Placement program for alternate living arrangement. Alternate living arrangement is when a child is placed with kin or fictive kin. This bill helps to prevent unnecessary entry into foster care and is a volunteer program between the agency and the parent to establish services that are in the best interest of the child. This legislation helps to create guardrails to support kin caregivers and establish consistency with our practice across agencies.

Key Tenets of Legislation:

(1) Exception Reports: The legislation creates a requirement for exception reports. Currently, when children enter foster care, they are placed with non-kinship placements approximately 87% of the time. Exception reports will create a statutory requirement for LDSS to document all efforts to locate kin, all efforts to place children with kin, and all of the reasons for not placing children with kin.

(2) The Parental Child Safety Placement Program: The legislation establishes the Parental Child Safety Placement program, which is a statutory framework for a parent, guardian, or legal custodian to arrange for a temporary living arrangement for their child with relatives

and fictive kin when a LDSS has determined that the child cannot remain safely in their current home.

Reunification is another core component of this framework, as the Parental Child Safety Placement program is meant to be a short term solution while efforts towards reunification are being made. Parental Child Safety Placement Agreements are effective for 90 days with the potential for an additional 90 day renewal.

(3) The assessment of relatives and fictive kin caregivers: The legislation enhances family engagement and further supports Virginia's commitment to a "Kin-First" child welfare system. The legislation requires LDSS to assess the proposed caregiver and determine whether the proposed caregiver is qualified to care for the child, willing to have a positive and continuous relationship with the child, and willing to protect the child from abuse and neglect. The legislation also codifies an inquiry for criminal and child protective services background checks to be conducted for each adult in the proposed caregiver's household. Currently, the policies and procedures for the assessment of relative and fictive kin caregivers vary from LDSS to LDSS.

Goals of SB39/HB27

Establishing guardrails to protect children and families

Promoting family driven decisions


Increased placements with kin and fictive kin


Child-focused and family centered practice

Preservation of parental rights

Transforming prevention services for families

Establishing streamlined processes for LDSS

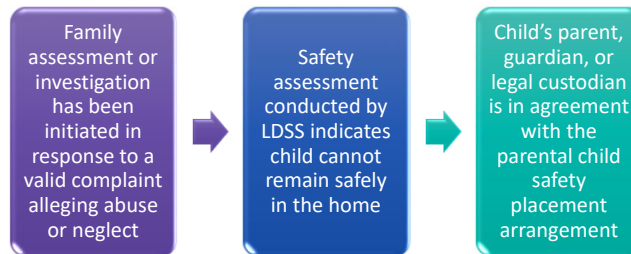




The goals of SB39/HB27 "Kinship Bill", are to provide structure around our Alternate Living Arrangements. This bill will establish guardrails to protect children and families. Promoting family driven decisions and having child-focused and family centered practice, which embody the spirit of our Children's Practice Model, are also a key goals of this bill. This bill is intended to also increase placements with kin and fictive kin and preserve parental rights. This work will transform prevention services for families and establish streamlined processes for LDSS.

Parental Child Safety Placement Program

The Parental Child Safety Placement Program is established to prevent unnecessary entry into foster care by promoting and supporting placements with relatives and fictive kin and requiring accountability for pre-court placements of children.



The Parental Child Safety Placement Program is available to parents when the Safety Assessment determines the child cannot remain safely in their home and the parents agree with making a parental child safety placement arrangement. The Parental Child Safety Placement Program is applicable only when the parental child safety placement arrangement (ALA) will be needed for longer than five days and the safety issues necessitating the alternate placement arrangement can be remedied within 90 days. In order to take advantage of the Parental Child Safety Placement Program, the parent(s) must voluntarily agree to enter into a Parental Child Safety Placement Agreement with the LDSS.

Parental Child Safety Placement Program

Parental Child Safety Placement Agreement:

- Required for every ALA (beyond 5 days)
- Family Partnership Meeting (FPM) required before signing
- 90 day duration, one 90 day extension permissible
- Required court action, if goes beyond 180 days
- Prescribed conditions of agreement
- Requires opening of In-Home Services case



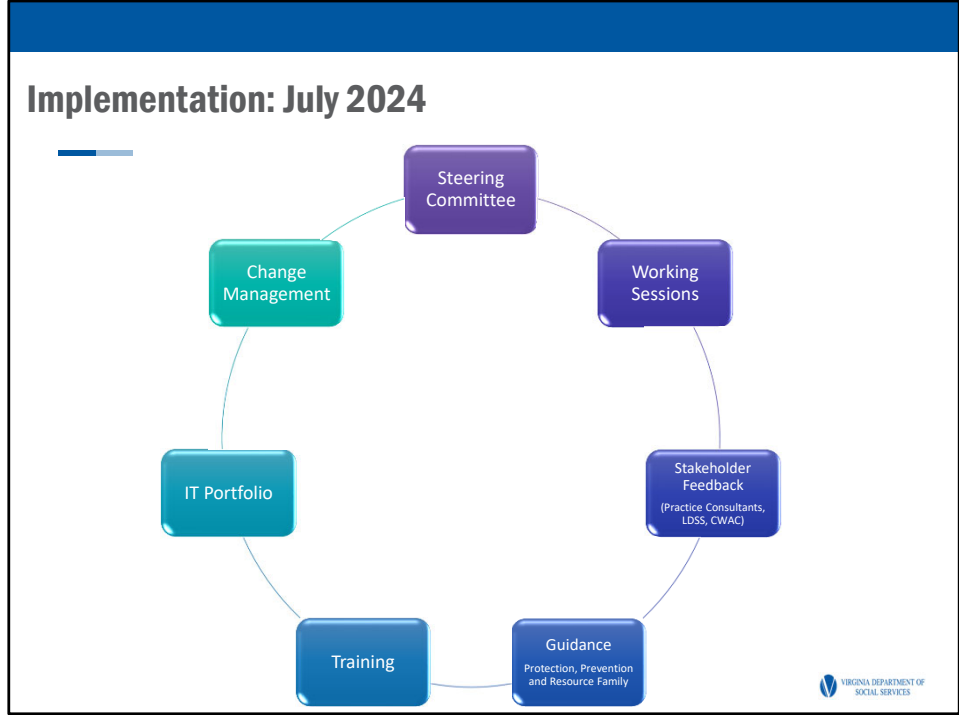
One of the key tenets of the establishment of the Parental Child Safety Placement Program is the Parental Child Safety Placement Agreement. The Parental Child Safety Placement Agreement codifies the guardrails needed to protect children and families by: promoting family driven decisions, ensuring the preservation of parental rights, establishing consistent practice among the LDSS, and enhancing the provision of in-home services to children and families.

In order to enter into a Parental Child Safety Placement Agreement:

- Parent and LDSS have determined the ALA will be needed for longer than 5 days and the safety issues necessitating the ALA can be remedied within 90 days.
- Family Partnership Meeting (FPM) must be held prior to signing of agreement.
- Parent is voluntarily willing to enter into the agreement with LDSS.

The conditions of the agreement are prescribed in the Code.

- An In-Home Services case must be open for the duration of the agreement.
- The agreement should not exceed 90-days in duration; however, one 90-day extension is permissible.
- Court action is required if the ALA is needed beyond 180 days.



We have a steering committee made up of program managers, policy specialists, change management and a project manager to lead this implementation. The steering committee will pull in other individuals as needed for ongoing working sessions to address policy and practice changes. We will engage our stakeholders for feedback regarding guidance and practice implications. The implementation of SB39 will impact guidance for our protection, prevention, resource family and foster care programs. Guidance updates are due by July 1st. We will be engaging Local Training and Development to assist our LDSS with the implementation of SB39. We have begun meeting with our IT Portfolio team to discuss changes needed to OASIS to reflect ALA placements. Lastly, DFS will establish a change management plan to address all the practice and policy changes along with the IT changes to our system. This is a large project that will involve several program areas across the Division of Family Services.



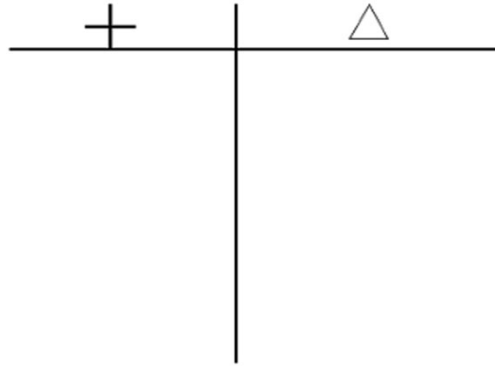

Breakout

- 1. How can we support the relationships among parents, kin caregivers and children when working towards reunification?**
- 2. What are some ways we can support kinship families like we do foster parents?**
- 3. What community resources can be utilized to support kinship families?**
- 4. What trainings could kinship caregivers benefit from?**



Next meeting, July 31, 2024

Plus / Delta



For those who are new to this meeting: pluses what went well and we should consider continuing on for future meetings. For deltas, what we should consider changing for our next meeting . Start with plusses. Write in the chat:



**Compiled Notes* from Breakout Rooms – April 2, 2024
(4 Breakout Rooms)**

1. How can we support the relationships among parents, kin caregivers and children when working towards reunification?

Group 1

- Circle Program where they work in a group and learn how to gain strength from their peers.
- From a CPS perspective, is to have transparency – what the plan is, what the trajectory is, having participants be transparent with each other
- That there is flexibility with transparency in meeting the needs of the child. Having parent reps to support families. What could we do to have more of that?
- Not assuming what resources the family needs but informing them of the resources and letting them tell us what they need and helping to navigate those resources.
- Collective communication so that all have the same questions answers and provide a safe space
- Helping families navigate complexity of relationships, i.e. children with disabilities. Go deeper in helping with healing and bridging relationships. It is these complexities that cause workers frustration. We have a portion of history that they may not.
- How roles change and how that affects families – Norfolk is looking at that.
 - I think acknowledging the historical challenges between each party and focusing on common ground and goals would set the tone and be supportive. Trusting that they have the ability to address it and not put DSS in the middle as the saviors.
- Understanding addiction
- Trauma Informed Care, Attachment Disorder
- understanding the protective factors and the role they play
- As a system, ensuring that we understand the difference between a SAFETY concern and risk. In foster care, we tend to struggle with understanding the difference which leads to these out of home placements being longer than necessary.
- Understanding the impact of trauma on behaviors is essential. A generational component is helpful too with compassion developing. Safety vs. risk on the CPS – Child Protective Services side is making sure that we are scoring the Safety Assessment and Risk Assessment correctly and that we are asking the right questions to get the right answers

Group 2

Partnering with people with lived experience, maybe have a support group for the relative. Partnering the parents with a parenting coach or someone with lived experience who had achieved reunification through the process. Make sure there is a thorough assessment done on the family to determine how the family has been operating or cultural implications for the service plan

- Approach case management as a two generation approach. The child and the parent wellbeing together. Look at the concrete supports on the front end and what is available.
- Could be different clinical/community based providers supporting the family and everyone needs to be on the same page with communication to the triad and what the goals are. Make sure whatever is needed is complete to facilitate

the communication (releases, meetings, FPM/CFTM – Child & Family Team Meetings etc.)

- Everyone should know what the expectations are
- Making sure the staff communicate together within the agency and everyone is on the same page and knows what is being shared with the family. Game Plan-continuity and consistency. Right size supports for family

Group 3

- Mindful when having conversations about all options, because it is crisis time for the family, we may need to have the conversation several times.
- Taken some of the burden off of the kinship caregivers, so they are not overstressed, to enhance the relationships. Family therapy, with the new family system, would be very helpful. Therapeutic services will help repair the relationships. One agency shared they have specialized positions that are trained to work on the triad. Building genograms with the family in the Family Partnership Meetings (FPMs).
- Increase access for Evidence Based Services (EBS) that are IV-E eligible such as Kin navigators, etc...

Group 4

- Setting clear expectations with communication.
- Transparency.
- Maintaining consistent parenting time, so that when there's a transition back, there's not too much of a gap that's been created because of the placement.
- Including/updating parents on appointments/school events.
- Communication between localities if kids are being placed/in Parental Child Safety Placement (PCSP) from one locality in another locality.

2. What are some ways we can support kinship families like we do foster parents?

Group 2

Engagement is key, it is not one and done, it is an ongoing part of practice. We cannot make assumptions that because they are blood related that they know what to do, we need to walk with them in this journey in terms of navigating and providing a consistent approach. Taking an urgent level of action from day one

- Recognize the relationship and potentially shared trauma or generational trauma might impact familial relationships. This will look different in preparing for issues this would be education and training
- Training and/or connecting to resources with Kinship Navigators
- Remember that kinship families did not ask to be the provider, unlike foster parents. They may need extra kid glove supports and financial supports. Should receive the same level of training, support and financial reimbursement.
- Need statewide funding for kinship navigators and consistent practice for them.
- Creating a safe place for caregivers to ask for help. Completing thorough assessment of needs and expressing the desire to help before the caregiver needs help
- Establishing consistent practice within the agency and acknowledging how this work differs from foster care- adaptive changes and approaching to kin first effort.
- Culture shift for LDSS (Local Dept. of Social Services)

- Connecting the caregiver with community resources or developing a support group where caregivers within the community can ask each other for help.
- understanding differences between the two and how grief/loss, dual roles within family, different relationships require a different approach than traditional 'foster care'. Also, family support partners for kin!
- include self-care/ respite into family plans so caregivers do not feel guilty for needing a break.
- I think respite is a great option. I can see through conducting IV-E Reviews in other states that kinship families use respite as needed.

Group 3

- Provide respite services, even if another family member, could be helpful to kinship families.
- peer support for kin caregivers; support for the youth, like we do for older youth in care - this also supports the caregivers
- Visitation/transportation support like we do in foster care.
- Tailoring training to meet family needs and not one size fits all training assuming they need the same training as resource families. Understanding how to work with kids who have experienced trauma, have special needs, multi-generational parenting, technology (to keep kids on safe),
- Supportive services do not stop when child goes to live with kin.
- Comparable monetary support, Relative Maintenance Payment (RMP) is not comparable to Foster Care monetary support.

3. What community resources can be utilized to support kinship families?

Group 2

There are a lot of community resources, but there could be barriers to accessing them. CWAC member shares that UMFS provides a lot of kinship resources and supports

- Peer supports, critical for families understanding how to navigate the system, child welfare, school things
- Establish specialized trainings and supports for kinship families
- TBRI (Trust-Based Relational Intervention) is a great model that can offer a lot of support but is not available statewide
- LDSS could partner together with community providers to host vendor fairs
- VA Beach provides a monthly newsletter to kinship caregivers or other things online that families could go to look at and see what is available to them. Make it accessible at their fingertips (Al Steward is willing to share a copy)
- The Administration for Community Living has funded a Grandfamilies & Kinship Support Network - federally funded technical assistance center.

Group 3

- Existing Kin Navigator Programs and Family Resource Centers.
- Care Portal to help if possible, partners with churches/LDSS to support families. Could we expand it? <https://www.careportal.org/how-careportal-works/>
- Faith-based organizations
- Universities (greater collaboration with faculty and students)
- Collaborating with your neighboring agencies (LDSS to LDSS) to learn about possible supports.

4. What trainings could kinship caregivers benefit from?

Group 2

CWAC member recommended the TBRI training model

- It comes down to the assessment lens, it should be based on what the family's issues are and what their needs are. Could have a resource list of trainings handy. This is not a one size fits all
- This is a great article that highlights the needs:
<https://www.childwelfare.gov/resources/kinship-care-and-child-welfare-system/>
- Could partner with local area agency on aging, the stress this creates could have a huge impact on the family

Group 3

- How to Co-Parent with the LDSS
- Kinship families need to know about changing family dynamics
- Trauma in children, trauma in kin caregivers
- Boundary setting while maintaining existing relationships
- Art therapy
- Family relationships (existing relationships)
- 90 to 180 days is not enough time to work through SUD (Substance Use Disorder)
- TBRI (online EBS parent training)
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3877861/>
- How can we have kin caregivers benefit directly from this service?
 - LDSS doesn't have enough staff.
 - Having specialized workers that have smaller caseloads so they can focus on the triad.

Group 4

- Clear expectation/guidelines
- Flexible options for individualized trainings that target specific needs/gaps for families - identified in collaboration between the family themselves and department
- Ask caregivers what would be helpful for them.

*All notes have been compiled – some groups ran out of time prior to discussing all questions which is why all group responses are not listed under each question.