



**DIVISION OF FAMILY AND CHILDREN'S SERVICES**



**MISSISSIPPI FY 2016  
FFY October 1, 2014-September 30, 2015  
Annual Progress and Services Report  
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**<http://www.mdhs.state.ms.us/family-childrens-services/reports/>**

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**Annual Progress and Services Report  
FFY 2016**

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## I. ORGANIZATIONAL OVERVIEW

Under the umbrella of the Mississippi Department of Human Services (MDHS), the Division of Family and Children’s Services (DFCS) is the agency authorized by state statute to promulgate regulations, policies and procedures necessary to implement the state’s child welfare system and to ensure the safety, permanency, and well-being for Mississippi’s families and children. DFCS is responsible for the Title IV-B Subpart 1 (Child Welfare Services), IV-B Subpart 2 (Promoting Safe and Stable Families), Title IV-E (Foster Care and Adoption Assistance), Child Abuse Prevention and Treatment Act (CAPTA), Chafee Foster Care Independence Program (CFCIP) and Educational Training Voucher (ETV).

The DFCS state-administered child welfare system is administered at the local level by 84 county offices through fourteen Regional Directors. A central strength to this system lies in the flexibility afforded each region to determine how best to meet the needs of children and families. The Regional Directors take an active part in the operations of the county offices within their region. Each Regional Director has a Regional Area Social Work Supervisor (ASWS) that assists with the day-to-day operations of the region. Each region also has two Resource Area Social Work Supervisors to supervise and monitor the licensure and adoption workers of DFCS’ services on a regional basis. Each region, in collaboration with other service providers, such as contractors and community-based organizations, provide a wide variety of services to children and families. These services include programs designed to strengthen families, reduce the risk of child abuse and neglect, support and preserve families, and provide for placement resources and services for children in agency custody.

### A. VISION, MISSION, VALUES AND PRACTICE MODEL

#### DFCS Vision Statement

Our vision is that children grow up in families, safe from harm with all of their needs met. We have a vision of children having stability, and a sense of belonging and permanency. Further, our vision is that no child under our “watch” continues to experience abuse or neglect and that families change for the better as a result of our intervention.

#### DFCS Mission Statement

Our mission is to lead Mississippi in protecting children and youth from abuse, neglect and exploitation by providing services to promote safe and stable families.

#### DFCS Values

DFCS has identified six values that will be honored in working with clients, community partners and each other:

- Competence: We have technical skills and knowledge; we work with common sense; we make informed decisions; and we follow through to achieve successful outcomes.

- Integrity: We are honest in our interactions; we are accountable for our actions; and we do the right thing.
- Responsibility: We do what we say we are going to do; we take initiative.
- Respect: We treat others with kindness, compassion, dignity, and honor differences of our clients and each other.
- Personal Courage: We are loyal to the Mission of DFCS; we advocate for our clients; we lead by example even when doing so carries risk.
- Collaboration: We make decisions for the common good; we share resources based on need; we work together effectively in teams; and work with a collective knowledge of all programs and services.

### **Mississippi Child Welfare Practice Model**

The Mississippi Child Welfare Practice Model (Practice Model) is based on family centered practice. There are six broad components of child welfare interventions that comprise the core of the Practice Model, which include the following:

- Mobilizing appropriate services timely,
- Safety assurance and risk management,
- Involving children and parents in decision making,
- Strength and needs assessments,
- Preserving connections and relationships, and
- Individualized case planning.

#### **B. ORGANIZATIONAL STRUCTURE**

Richard A. Berry is the Executive Director of MDHS. Mark Smith is the Deputy Director of MDHS. Kim Shackelford is the Deputy Administrator of DFCS. Mike Gallarno is the Director of DFCS, and Anna Lyn Whitt is the Director of Field Operations.

DFCS entered a reorganization plan in cooperation with the Division of Human Resources and the Mississippi State Personnel Board in 2011-2012, creating positions filled by personnel with a vast amount of knowledge and experience in the social service field, finance and legal fields, and additional reorganization to meet the needs of DFCS:

- Deputy Administrator of Family and Children's Services
- Council on Accreditation Coordinator
- Director of Family and Children's Services
- Director of Field Operations
- Director of Continuous Quality and Improvement
- Bureau Director of Budget and Financial Planning
- Bureau Director of Administration
- Bureau Director of Child Welfare Professional Development
- Bureau Director of Resource Development
- Bureau Director of Permanency/Planning and Placement
- Bureau Director of Prevention/Protection

- Bureau Director of Policy

Additional, subsequently-created positions and units supporting the goals of DFCS include:

- Special Investigations Unit
- Special Projects Unit
- Field Operations Bureau Director

Currently, the Deputy Administrator oversees the entire operations of DFCS with emphasis on the Council on Accreditation (COA), Professional Development, Communications, the Modified Settlement Agreement (MSA), the Special Investigations Unit and Administrative Support. The Special Projects Unit is supervised by a senior attorney who oversees COA coordination and staff attorneys. The Special Investigation Unit is responsible for investigating reports of child maltreatment that require special handling. The Director of DFCS oversees the following units: Budget and Financial Planning, Administration, Child Welfare Professional Development, Resource Development, Policy, Permanency/Planning and Placement and Prevention/Protection. The Director of Field Operations supervises the fourteen Regional Directors and the Practice Model Coordinator. The Director of Continuous Quality Improvement oversees the following units: Mississippi Automated Child Welfare System (MACWIS), Continuous Quality Improvement (CQI), Evaluation and Monitoring (EMU), Foster Care Review (FCR), Safety Review, Complaints and Data Reporting Unit.

(See Appendix A: DFCS Organizational Chart)

### Organizational Goals

- Implement the Core Components of the Practice Model which focuses on family-centered practice and captures the requirements of the MSA, COA and the Child and Family Services Review (CFSR).
- Recruit and retain staff by creating a healthy work environment and maintaining manageable workloads.
- Develop and implement a compliant State Automated Child Welfare Information System (SACWIS.)
- Obtain accreditation by improving organizational performance through the following: demonstrating accountability in management of resources, meeting standardized best practice thresholds for service and administration, and providing increased organizational capacity and accountability through a framework for ongoing continuous quality improvements.
- Network and collaborate with stakeholders, clients and communities to improve the child welfare services delivery system in Mississippi.

DFCS field operations are divided into thirteen Regions designated as follows (see Map):

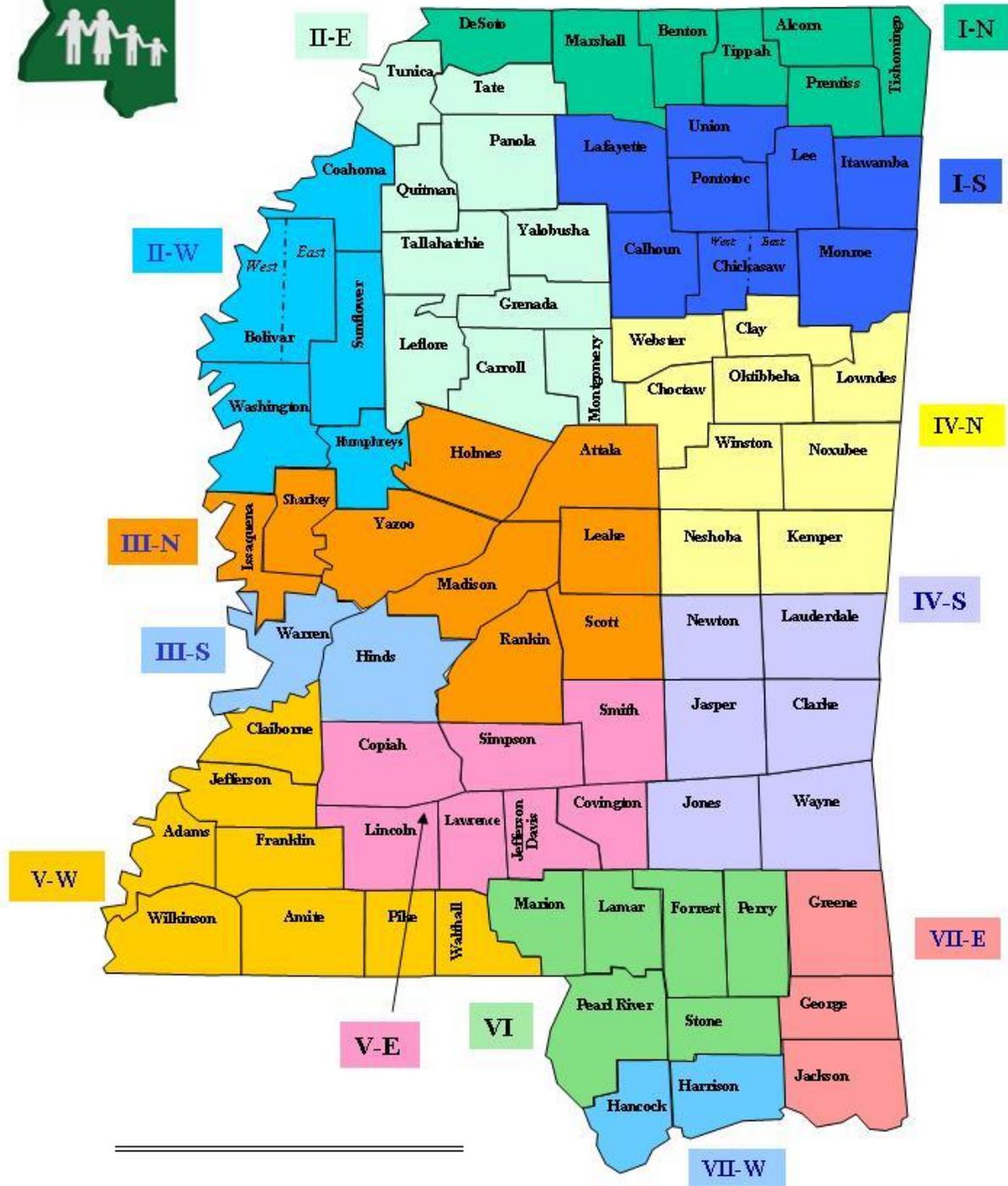
Region 1 North	Region 4 South
Region 1 South	Region 5 East

Region 2 East	Region 5 West
Region 2 West	Region 6
Region 3 North	Region 7 East
Region 3 South	Region 7 West (2 Regional Directors)
Region 4 North	



# Mississippi Department of Human Services Division of Family and Children's Services

Approved 11/20/2008



### **C. MISSISSIPPI MODIFIED SETTLEMENT AGREEMENT (MSA)**

In July 2012, all Olivia Y. parties entered into a Modified Settlement Agreement (MSA), which superseded the initial Settlement Agreement and Reform Plan. The filing of the MSA constituted the start of Implementation Period 3 (a one-year period). The parties negotiate an implementation plan for each following year until substantial compliance with the MSA requirements are reached. DFCS progress is monitored by a Federal Court Monitor, Grace Lopes, and her staff, and by Judge Tom S. Lee, United States District Court, Southern District of the State of Mississippi, through quarterly telephonic hearings and biannual in-court hearings.

Implementation Period 4 commenced on July 7, 2013. Priority requirements for this period included: recruitment and retention of caseworkers and supervisors; improved reporting on data indicators; improved timeliness and quality of investigations of abuse or neglect in which foster children are the alleged victims; and meeting MSA standards for timely case planning and children's contacts with their parents and siblings while in out-of-home placements.

Implementation Period 5 commenced on July 7, 2014. The primary deliverables for this period involve development and beginning implementation of a Performance-Based Contracting strategy for contracts with placement providers. Other deliverables include development of a new tracking system for Termination of Parental Rights proceedings, continuation of CQI activities, and policy revisions. The complete text of the Modified Settlement Agreement and yearly implementation plans is available at: <http://www.mdhs.state.ms.us/olivia-y-lawsuit/>.

### **D. MISSISSIPPI CHILD WELFARE PRACTICE MODEL**

In February 2009, DFCS contracted with the Center for the Support of Families (CSF) to assist in developing the child welfare Practice Model for implementation in the State. DFCS interest in developing a practice model stems from its current efforts to implement requirements associated with the MSA, COA standards, and the CFSR at the same time. While many of the requirements and outcome measures of DFCS various mandates are similar, others are specific to the MSA, the COA standards, or the CFSR. DFCS coordinates these many efforts and multiple requirements in ways that are non-duplicative, clearly understood by staff in the 84 county offices throughout the State, that will lead to the best and most efficient and coordinated use of limited state resources, and that offer the most promise for improving outcomes for children and families and achieve the goals in place for the DFCS.

Toward this end, DFCS decided to frame its many mandates within a model of child welfare practice that staff and providers in the field will easily understand, adapt to, and incorporate into their interventions with children and families. DFCS recognizes that staff and providers in the field, who will ultimately be responsible for meeting the requirements, need a conceptual framework that is value-based and principle-driven that they can rely on to guide their work with children and families on a daily basis, and that such a framework will help staff and providers understand the reasons and values behind their interventions as opposed to being more compliance-driven in order to simply meet the terms of the current legal mandates. The values and principles that will provide the foundation for the Practice Model include: the DFCS child

welfare mission statement and principles, and the CFSR guiding principles which include family-centered practice, community-based services, individualized services, and strengthening parental capacity to care for their children.

During the spring of 2009, CSF began collecting information about the status of child welfare practice and outcomes in Mississippi through focus groups with staff and supervisors, and interviews with child welfare stakeholders in the State. CSF also cross-referenced the many practice related requirements of the MSA, COA standards, and the CFSR to identify areas of similarity and difference. Based on this analysis, and the guiding principles noted above, CSF developed six broad components of child welfare interventions that will comprise the core of the Practice Model, which include the following:

- Mobilizing appropriate services timely
- Safety assurance and risk management
- Involving children and parents in decision making
- Strengths and needs assessments
- Preserving connections and relationships, and
- Individualized case planning

The Mississippi Child Welfare Practice Model, completed September 25, 2009, was developed in a principle-based and outcome-oriented manner grounded in the Mission Statement and values of DFCS. In developing the Practice Model, an assessment of policy, training, monitoring activities, resources and practice was done and information gathered from the following sources:

- An electronic survey administered to DFCS child welfare staff;
- A series of focus groups and individual interviews that included workers, supervisors, Regional Directors, parents, service providers, youth in foster care, resource families, and State Office staff;
- The court monitor's report for the MSA;
- Reports from the COA; and
- A review of DFCS child welfare policy, training curricula, and Foster Care Review (FCR) findings.

**Implementation of the Mississippi Child Welfare Practice Model (MCWPM):**

The schedule below depicts the implementation schedule for the practice model in Mississippi on a region-by-region basis.

**Practice Model Rollout Schedule**

<b>Regions</b>	<b>Planning Phase (6 months)</b>	<b>Initial Implementation Phase (one year)</b>	<b>Full/Ongoing Implementation Phase (one year)<sup>1</sup></b>	<b>Data Tracking (one year)</b>
<b>I-South, II-West</b>	<b>January-June 2010</b>	<b>July 2010 – June 2011</b>	<b>Approx. Sept. 2011 – August 2012</b>	<b>September 2012 – August 2013</b>
<b>V-West</b>	<b>July-December 2010</b>	<b>January - December 2011</b>	<b>Approx. March 2012 – February 2013</b>	<b>March 2013 – February 2014</b>
<b>IV-North</b>	<b>July – December 2010</b>	<b>January 2011 – June 2012 (18 months)</b>	<b>Approx. Sept. 2012 – August 2013</b>	<b>September 2013 – August 2014</b>
<b>I-North, III- South, IV-South</b>	<b>January-June 2011</b>	<b>July 2011 – June 2012</b>	<b>Approx. Sept. 2012 – August 2013</b>	<b>September 2013 – August 2014</b>
<b>V-East,</b>	<b>July-December 2011</b>	<b>January – December 2012</b>	<b>Approx. March 2013 – February 2014</b>	<b>March 2014 – February 2015</b>
<b>III-North, VII- East</b>	<b>July 2011 – June 2012 (12 mos.)</b>	<b>July 2012 – June 2013</b>	<b>Approx. Sept. 2013 – August 2014</b>	<b>September 2014 – August 2015</b>
<b>II-East, VI, VII- West</b>	<b>July-December 2012</b>	<b>January – December 2013</b>	<b>Approx. March 2014 – February 2015</b>	<b>March 2015 – February 2016</b>

<sup>1</sup> The two-month period between the end of the Initial Implementation phase and the beginning of the Full Implementation phase is in place to permit the follow-up CQI review after the first 12 months of implementation and an opportunity to revise the Regional Implementation Plan based on preliminary results of the review going into the next phase of implementation.

Each Region initiates implementation of the practice model by engaging in planning phase whereby the Region establishes a Regional Implementation Team (RIT) and develops a Regional Implementation Plan (RIP). During this time, stakeholders are engaged in the process and staff is oriented to the Practice Model. The planning phase usually ends with a baseline CQI review in order to determine baselines for the Regions' performance before they begin implementation activities.

Following the planning phase, the Region begins the initial implementation phase whereby staff is trained in the six modules of the Practice Model, beginning with supervisors. Internal DHS practice coaches assist staff in transferring the knowledge from the training into actual practice with children and families, while contracted practice coaches from the CSF provide similar coaching to supervisors in the Regions.

At the end of the one-year initial implementation phase, the CQI Unit conducts a follow-up review to determine the Regions' progress over the past year and to identify areas of focus for the full/ongoing implementation year. The full implementation phase is where the practice model activities and practices are brought to scale through continued coaching of staff and supervisors and additional training as needed. CQI reviews continue to occur at one-year intervals to gauge progress and identify strengths and needs of the practice in the Regions.

Following the one-year full implementation phase, the Region enters a one-year data tracking phase where the Regions' performance is monitoring through data reports generated through the MACWIS system and the Foster Care Review process. The MSA was revised to include the Practice Model rollout schedule shown above. The MSA was also revised to specify benchmarks of progress, or specific percentages, that implementing Regions must demonstrate through the data tracking phase, along with progress benchmarks that DFCS must meet as a whole on certain outcomes and performance indicators.

At this point, every Region in the State is in some phase of practice model implementation or has completed the designated implementation process. The last three Regions to begin implementation, Regions II-East, VI, and VII-West, began the full/ongoing implementation phase in March 2014. Also as noted above, three Regions have now completed the data tracking phase: Regions I-South, II-West, and V-West. Through a large number of data reports that DFCS has developed in collaboration with two contractors, the court monitor is now in the process of determining the level of progress that the Regions have made relative to standards in the MSA. Final determinations about the progress of the initial three Regions are pending at this time. The rollout schedule also shows when each Region will end its data tracking phase and become accountable for meeting MSA standards.

The goal for the practice model implementation process is for each Region in the State to complete implementation of the practice model and to demonstrate sustained improvements in child welfare performance and outcomes, by measuring on an ongoing basis each Region's performance against the MSA standards, which in some situations mirror Federal CFSR outcomes in place at the time that the MSA was negotiated.

DFCS will continue to provide practice model training and coaching to social workers and supervisors, as indicated by the Region's position in the rollout schedule. DFCS and the court monitor will also monitor each Region's performance on MSA performance indicators and outcomes and will continue to produce a large number of monthly data reports on specific outcomes and performance indicators. As Regions complete the data tracking phase in accordance with the rollout schedule above, DFCS and the court monitor will evaluate the consistency of regional performance with MSA standards. Finally, the CQI process will serve as a means of helping to sustain progress achieved by reviewing Regions for their fidelity to the Practice Model on an annual basis and providing feedback to Regions on strengths and areas of their practice needing improvement.

## **E. ACCREDITATION IN MISSISSIPPI**

The Division of Family and Children's Services is in the process of seeking accreditation with the Council on Accreditation (COA). This process, mandated in MSA, began in 2009 and has progressed through several steps. Site visits have been held in the State Office and each region. During the site visits to the regions, every county office was visited.

The regional site visits have been beneficial in revealing where changes or improvements are needed. Several of the regions have challenges and need extra help in order to meet the standards. Remedial site visits for these regions and State Office began in December of 2014 and will conclude in June of 2015. The regions are supported in their preparation for these site visits through training provided by COA and on-site assistance of the DFCS COA Coordinator.

The agency's efforts in this phase are focused on improving MACWIS access and quality of client/family assessments and service plans. Mandated and monitored implementation of Regional Management Teams and Regional Improvement Teams supports this effort.

### **GOALS FOR FFY 2015-2019**

**Goal 1:** DFCS will achieve accreditation through COA.

- **Objective:** Obtain accreditation by improving organizational performance through the following: demonstrating accountability in management of resources, meeting standardized best practice thresholds for service and administration, and providing increased organizational capacity and accountability through a framework for ongoing continuous quality improvements.
  - **Interventions:**
    - Additional training to be delivered by COA staff in selected regions
    - Remedial site visits to selected regions
    - Recruit and retain qualified staff
    - Revise policy as needed to comply with COA Standards
    - Update the Self Study to reflect current policy and practice
    - Regional responses to Pre Commission and Post Commission Reports
    - Regional Maintenance of Compliance Reports every six months

- Correct facility issues in each region
  - **Benchmarks and Timeframes:**
    - Remedial site visits to selected regions to be completed in 2015
    - Regional Maintenance of Compliance Reports every six months
    - Completion of the accreditation process of all 13 regions by the end of 2016
    - DFCS will achieve accreditation by 2017.
- **Outcomes:**
  - Staffing levels will increase to meet the supervisor to workers ratio standard
  - Decreased caseloads as more staff comes on board

**Goal 2:** DFCS will maintain accreditation.

- **Objective:** DFCS will continue to comply with COA Standards after achieving accreditation.
  - **Interventions:**
    - Regional Maintenance of Accreditation Reports every six months
    - Revise policy as needed
    - Quarterly review of incidents, accidents and grievances in every region and at state office
    - Maintenance of facilities at level of COA standards
    - Reinforce compliance with COA standards through training, supervision and coaching
- **Outcome:** Accreditation will continue to serve DFCS as a fully integrated and ongoing journey aimed at structuring and focusing efforts on quality issues and meeting best practice standards along with the Practice Model.

## F. COLLABORATION

### Court Collaboration

Collaboration with the Youth Courts and the Mississippi Supreme Court Administration Office of Courts (AOC) continues through collaboration with the Mississippi Commission on Children's Justice, the Parent Representation Pilot Projects in Rankin, Harrison, Forrest and Adams counties and the Annual Judges and Referees Conference.

The Mississippi Youth Court Information Delivery System (MYCIDS) has been initiated statewide.

Collaboration between the Mississippi Band of Choctaw Indians, the Choctaw Model Youth Court and the Attorney General's Office at Choctaw occurred to produce the First, Second, Third and Fourth Annual Indian Child Welfare Act Conferences in 2011, 2012, 2013 and 2014. A

Memorandum of Understanding was executed on October 25, 2012 between the MBCI and DFCS

The Court Improvement Workgroup (CIP) meets monthly to address legal issues for implementing the requirements of the MSA, to identify training needs for the judiciary, to develop plans and goals to affect outcomes through the Youth Court, and to identify the breakdowns/barriers between DFCS and the court system. Members of the workgroup include: DFCS State and Regional Staff, the Attorney General's Office and staff from the AOC. The CIP Workgroup also discussed the status of ongoing CFSR/PIP progress and steps moving forward. The CIP Workgroup works with AOC to coordinate Legal Stakeholders for Permanency for Children Summits across the state. Thirteen Regional Summits were held from 2011-2013. These summits bring judges, guardians *ad litem*, prosecutors, court administrators, DFCS supervisors and field staff together to develop goals and plans for improving outcomes in areas needing improvement. The legal stakeholders are invited to become part of the Regional Implementation Teams to implement the Practice Model. Each Region follows up with progress on action steps at their Regional Implementation Meetings quarterly. The second round of summits was held in four centralized locations across the state in 2014. **GOALS FOR FFY 2015-2019**

**Goal 1:** Collaborate with the Mississippi Band of Choctaw Indians, the Choctaw Model Youth Court, Administrative Office of Courts, National Council of Juvenile and Family Court Judges, The Mississippi Judicial College, National Resource Centers and the Attorney General's Office at Choctaw to produce Annual Indian Child Welfare Act Conferences

- **Objective 1:** Train judiciary and DFCS on the Indian Child Welfare Act requirements.
  - **Interventions:** Request technical assistance from the respective Centers for Capacity Building, National Council of Juvenile and Family Court Judges, Choctaw Model Youth Court and Mississippi Administrative Office of Courts to sponsor the Annual Indian Child Welfare Act Conference.
    - **Benchmarks and Timeframes:**
      - April 2014, and annually thereafter, collaborate with the Tribe, National Resource Centers, to plan and develop the Annual ICWA Conference. The Mississippi Judicial College will draft and send out Save-the-Date notices to the judiciary and attendees from past conferences.
      - May 2014, and annually thereafter, collaborate with the Tribe, DFCS and Administrative Office of Courts (AOC) to identify speakers, subjects, and theme for the Annual ICWA Conference.
      - June 2014, and annually thereafter, collaborate with the Tribe, DFCS, AOC, and The Mississippi Judicial College regarding location, food service, technical requirements, registration, and CLEs, CJs and CEs for participants at the Annual ICWA Conference.

- July 2014, and annually thereafter, collaborate with the Tribe, DFCS, AOC, The Mississippi Judicial College and the National Resource Centers to finalize plans for the Annual ICWA Conference.
  - August 2014, and annually thereafter, host the Annual ICWA Conference; develop goals for the next year, evaluate the conference and identify changes based on the evaluations, set date for initial collaboration on the next year's conference.
- **Measure 1:** Compare number attending with prior years to see if conference is reaching the target audience.
  - **Measure 2:** Compare type of attendees: (a) number from Tribe; (b) number of out-of-state tribes; (c) Number of DFCS staff; (d) number of judges, referees and chancellors; (e) number of court personnel; (d) number of service providers; and (f) number of other agency personnel.

**Goal 2:** Continue collaboration with the AOC to implement the MYCIDS program for DFCS and court information systems interface.

- **Objective 1:** Achieve an interface with DFCS' new SACWIS system.
  - **Intervention 1:** Final assessment of MACWIS and recommendations which meet the needs of DFCS for real-time data through MYCIDS interface with SACWIS.
    - **Benchmarks and Timeframes:** The new SACWIS system will be built and developed between 2015-2019.

**Goal 3:** Collaboration with AOC to hold annual Legal Stakeholders for Permanency for Children Summits across the state.

- **Objective 1:** Develop annual Legal Stakeholders for Permanency for Children in strategic locations throughout the state to encourage sharing of data and planning better outcomes for children between DFCS and the judiciary.
  - **Intervention:** Collaborate with AOC to provide training to the judiciary and DFCS staff.
    - **Benchmarks and Timeframes:** October-December 2015, 2016, 2017, 2018 and 2019.
- **Measure 1:** Compare attendance numbers annually to determine if level of participation increases, decreases or remains level.
- **Measure 2:** Compare type of attendees to determine if the target audience of DFCS, judiciary, service providers, court personnel and law enforcement is achieved.

**Goal 4:** Continue to work with the URYCP Task Force to revise and update rules as needed. The URYCP are located on the Mississippi Supreme Court website. Uniform youth court forms for orders and other documents are approved and hyperlinked to the URYCP.

[http://courts.ms.gov/rules/msrulesofcourt/uniform\\_rules\\_yc\\_practice.pdf](http://courts.ms.gov/rules/msrulesofcourt/uniform_rules_yc_practice.pdf)

Uniform forms and orders are also available in MYCIDS for more efficient collaboration between the courts and DFCS.

- **Objective 1:** Make revisions, corrections or additions to the URYCP for more efficient movement of cases through the court system.
  - **Benchmarks and Timeframes:** As the state or federal laws are revised or new laws implemented, or as conflicts between sections are challenged.

**Goal 5:** Work with the courts on identified barriers to permanency for children and barriers for recruitment and retention of DFCS staff.

- **Objectives:**
  - Implement court strategies to address identified issues:
  - Decrease number of children placed in unlicensed shelters/homes
  - Create a professional courtroom environment which is instructional for new hires
  - Decrease number of children taken into custody when children can safely remain in home with services
  - Improve courts providing timely court orders
  - Increase timely permanency hearings by addressing the root cause of delay (i.e. court delay or DFCS delay)
  - Provide additional court training for DFCS Staff as requested by the judiciary
  - Evaluate TPR Process and increase finalization of TPRs when adoption is the permanent plan
- **Interventions:**
  - Meet with individual judges regarding barriers in their court
  - Provide speakers for the Annual Judges and Referees Conference to address how to eliminate the barriers
  - Discuss barriers at the Legal Stakeholders for Permanency for Children summits
- **Benchmarks:**
  - The Attorney General's Office for DFCS schedules meetings with individual judges as needed.
  - Annually for the Judges and Referees Conference
  - October-December of 2015, 2016, 2017, 2018 and 2019 for Legal Stakeholders for Permanency for Children summits.
- **Measure 1:** Reports from the Attorney General's Office regarding progress made with individual judges to eliminate barriers to permanency.

- **Measure 2:** DFCS Connection Data Dashboard reports by county which are provided to judges at the Legal Stakeholders for Permanency for Children summits.

### Collaboration with Tribes in Mississippi

DFCS and the Mississippi Band of Choctaw Indians have collaborated during 2011, 2012, 2013 and 2014 to promote cultural awareness, understanding and implementation of the Indian Child Welfare Act. Four Annual ICWA Conferences were jointly developed with DFCS, the Tribe, AOC, the two Model Courts (Forrest County and Choctaw), with the assistance of the National Resource Centers for the Tribe and for Legal and Judicial Issues, as well as the National Council of Juvenile and Family Court Judges and Casey Family Programs. As a result of the 2011 Annual ICWA Conference, a Memorandum of Understanding was executed on October 25, 2012. (See Section VII. Tribal Consultation for the objectives, duties and responsibilities of the Memorandum.)

### Mississippi Statewide System of Care

Collaboration continues with other agencies through State FY 2011 Interagency Memorandum of Agreement between the Division of Medicaid; The State Department of Human Services; The State Department of Mental Health; The State Department of Education; The State Department of Health; The State Department of Rehabilitation Services; and MS Families as Allies, Inc. The purpose of the collaboration is to continue an Interagency System of Care Council (ISCC) and Multidisciplinary Assessment and Planning (MAP) teams.

#### Mississippi Interagency Coordinating Council for Children and Youth (ICCCY)

DFCS participates in the Mississippi Interagency Coordinating Council for Children and Youth (ICCCY) and the Interagency Systems of Care Council (ISCC). The ICCCY is authorized by 2012 legislation and is comprised of the Executive leaders of the state agencies for Education, Human Services, Mental Health, Public Health, and Rehabilitation. The purpose of this legislation is to provide for the development, implementation and oversight of a coordinated interagency system of necessary services and care for children and youth. This interagency system is known as the Mississippi Statewide System of Care, which serves children up to age twenty-one (21) with serious emotional/behavioral disorders including, but not limited to, conduct disorders, or mental illness, which require services from multiple services and multiple programs system, (i.e. prevention services.) These services are child-centered, family-focused, family-driven and youth-guided, community-based, culturally-competent and shall provide for human rights protection and advocacy, nondiscrimination in access to services. This system is a comprehensive array of services supported by best practices and/or evidence-based practices. Individualized service planning uses a strength-based, wraparound process, with services in the least restrictive environment. Family participation is encouraged in all aspects of planning, service delivery and evaluation. Integrated services are coordinated through planning across child-serving agencies. The services include, but are not limited to the following:

- comprehensive crisis and emergency response services;

- intensive case management;
- day treatment;
- alcohol and drug abuse group services for youth;
- individual, group and family therapy;
- supported employment services for youth;
- family education and support and family partners;
- youth development and support and youth partners;
- positive behavioral supports (PBIS) in schools;
- transition-age supported and independent living services; and
- vocational/technical education services for youth.

### Making a Plan (MAP) Teams

MAP teams are local county multidisciplinary teams that are funded through the Mississippi Department of Mental Health and are facilitated through the local Community Mental Health Centers. These teams review cases concerning children and youth up to age 21, who have Serious Emotional Disturbances (SED) and who are at immediate risk for an inappropriate 24 hour institutional placement. The members of these teams meet on a monthly basis to identify community-based services and resources that may divert children from inappropriate inpatient care.

MAP Teams are facilitated by a local MAP Team Coordinator who is employed through the local Community Mental Health Center. Team members include: school personnel, law enforcement, child welfare professionals, ministers, youth court counselors, family members of the youth, advocacy organizations and service providers.

For children whose cases have been staffed at their local MAP Teams but local community and state resources have been exhausted or children who have experienced numerous placement interruptions due to a Serious Emotional Disturbance, the State Level Case Review Team, led by the Mississippi Department of Mental Health, will review these cases to develop a Recommended Service Plan for appropriate treatment for these children and youth. The plans can include formal and informal supports and services.

State Level Case Review Team members are made up of designated staff from the following agencies and organizations: Mississippi Department of Human Services (including the child's caseworker), Mississippi Department of Mental Health, Mississippi Division of Medicaid, Mississippi Department of Health, Vocational Rehabilitation Services and Mississippi Families as Allies.

The MDHS Resource Development Unit's plan to improve our collaborations with local MAP teams will begin with Resource Development Coordinators receiving training from the Mississippi Department of Mental Health on MAP Teams and then by visiting their assigned local community MAP Team meetings at least 2 times a year.

To increase DFCS caseworker and ASWS participation in and utilization of MAP Teams, training in conjunction with the Mississippi Department of Mental Health will be provided.

DFCS Family Protection Specialists and ASWS will obtain a better understanding of how and when to use the MAP Teams and the State Level Case Review Team.

### **Special Education Advisory Panel (SEAP)**

The DFCS Resource Development Director serves on the Special Education Advisory Panel (SEAP) for the State Department of Education. Other members of SEAP include:

- parents of children with disabilities (ages birth through 21);
- individuals with disabilities; teachers;
- representatives of institutions of higher education that prepare special education and related services personnel;
- State and local education officials, including officials who carry out activities under subtitle B of title VII of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11431 et seq.);
- administrators of programs for children with disabilities;
- representatives of other State agencies involved in the financing or delivery of related services to children with disabilities;
- representatives of private schools and public charter schools;
- not less than one (1) representative of a vocational, community, or business organization concerned with the provision of transition services to children with disabilities;
- a representative from the State child welfare agency responsible for foster care; and representatives from the State juvenile and adult corrections agencies.

The mission of the SEAP is to promote the education of children and youth with disabilities. The panel provides advice and guidance to the Mississippi Department of Education, Office of Special Education, regarding the provision of education and related services of children and youth with disabilities in local educational agencies.

### **Specialized Planning Option Team (SPOT)**

Mississippi Department of Mental Health, The Association of Retarded Citizens (ARC), and the DFCS have partnered to collaborate on behalf of foster children with special needs that made it difficult to find appropriate placements. The Specialized Planning Option Team (SPOT) meets on an as needed basis to staff individual situations so that the best decisions and appropriate placements can be provided. Each of these agencies works with children to ensure that proper services are provided in a timely manner.

In addressing the special needs of hard to place children one of the resources used to find appropriate placement is team staffing with the Specialized Planning, Options to Transition Team (SPOTT). The team consists of staff from the ARC of Mississippi, Mississippi Department of Mental Health and Mississippi Department of Human Services, Division of Family and Children Services. They meet every other Monday to staff both children and adults that need resources for placement.

The number of successful placements as a result of this collaboration:

- 2014-Sept 2015 data
- # of Children referred to SPOT Team - 14
- # of Children placement was found as a result of SPOT Team - 6
- 1. # of children placed in Therapeutic foster home - 1
- 2. # of children placed in temporary facility - 4
- 3. # of children placed in Supervised Living Apartment - 1
- # of placements disrupted - 1
- # of children who returned home after placement - 1

The amount of disruptions avoided due to appropriate placement: At this point there is not a measure in place to determine if disruptions have been prevented/avoided.

Area of greatest need:

- Therapeutic Transitional Living for older teens who are too immature to live on their own through the IL program but not low enough in IQ to qualify for waiver and supervised living - 17-21 years
- Developmentally delayed children of all ages, including infants.
- Autistic Children with and without developmental delays
- Medically Fragile children of all ages
- Teens of all ages, especially sibling groups
- Aggressive Teens and children with and without mental illness
- Older Teens with mental illness with IQ over 75
- Sex offenders of all ages

Plans to address area of greatest need: The plan to address the greatest need is to continue our collaboration with the SPOTT as well as continuing partnering with Division of Medicaid, Mississippi Department of Health, and the Mississippi Department of Mental Health to provide needed individualized services/resources for our children, youth and families that we serve.

### **Casey Family Programs-Permanency Roundtables (PRTs)**

DFCS has completed PRTs in all thirteen Regions for children that were in custody 36 months or longer. A calendar has been developed and is currently being implemented to complete Round II PRTs for children that are in custody 24 months or longer. According to the requirements of the MSA, the agency must complete two rounds of PRTs in addition to engaging in permanency follow-up activities by Period 5 (July 2015). The State Office Foster Care Division Director and Program Manager, whom attended Casey's Training-of-Trainers, will be providing PRT Training to regions that request the training due to an increase of new staff.

Follow up is being conducted quarterly by the Foster Care Unit regarding the permanency status of children that are roundtabled. This information will be used in the data tool that will include demographic and permanency statuses by individual regions and collectively by the state. The creation and development of the data tool is being discussed on how the regions will submit the

progress of children's permanency status and forward the information to the Foster Care Unit. In addition, attention has been given to revising PRT forms to be Mississippi specific.

As Mississippi transitions into Round Two of the PRTs, training was provided to staff that served as Master Practitioners or will serve as Master Practitioners. This training was provided by Isabel Blanco and Virginia Pryor. The Master Practitioner Training was given to participants to provide a more in-depth understanding of what permanency is, how to achieve it for children in foster care and to enhance their skills.

DFCS completed Round II of PRTs by June 30, 2015. During Round II, all children in custody 24 months or more were roundtabled by the end of Period 5 (July 2015) as required by the MSA. Roundtables were conducted regionally, and in some cases regions were combined into one roundtable. The schedule of PRTs during Round II was as follows:

Region 2-W	May 12-14, 2014
Region 2-E	June 16-17, 2014
Region 5-E & 5-W	August 4-7, 2-14
Region 4-N & 4-S	September 8-11, 2014
Region 1-S	October 13-16, 2014
Region 3-N	January 27-30, 2015
Region 7-E	February 23-25, 2015
Region 1-N	March 23-25, 2015
Region 6	April 13-16, 29 2015
Region 7-W	May 11-14, 2015
Region 3-S	June 15-19, 2015

To roundtable all 13 regions within a 12 month time frame and to roundtable all children in custody 24 months or longer proved to be a bigger challenge than expected. The roles on a roundtable are scribes, facilitators, and master practitioners. The PRTs rely on DFCS staff from across the state to volunteer as members of the roundtables. Staff must be trained to serve in these roles and then leave their own jobs for 2-3 days or up to a week at time to serve on a PRT in another region. This was further complicated by the fact that the regions to be roundtabled toward the end of the year had higher numbers of cases to be roundtabled. Those PRTs often lasted 4-5 days in order to roundtable all cases. As the year wore on, it was more difficult to recruit volunteers. It is a lot to ask staff to leave home and their own work for 2, 3, or 5 days at time once every month.

State Office staff who plan, coordinate, and implement PRTs across the state likewise found it difficult to keep up with that pace. They often found themselves in the position of planning one PRT while carrying out another. This left little time for follow-up and tracking which is such a vital part of the PRTs.

DFCS staff will meet with Mississippi's representative from Casey Family Programs, Isabel Blanco, in July or August 2015 to plan next steps. Lessons learned for Round III of PRTs include: spread PRTs out over a longer time frame in order to allow for better follow up and so as not to wear out volunteers, train more staff as master practitioners, and establish clearly

defined guidelines in addition to the number of months in custody on which cases are to be roundtabled

### **Jim Casey Programs and the Foundation for the Mid-South**

Independent Living has a working partnership with Jim Casey Programs and The Foundation for the Mid-South. Jim Casey and the Foundation actively work with DFCS to strengthen resources around youth transitioning out of care. Through this collaborative partnership the Youth Opportunity Passport initiative has been started. The Youth Opportunities Passport initiative is a savings program. Jim Casey will match dollar for dollar what each youth saves up to \$3000.00. The funds to support this initiative are funneled through Foundation for the Mid-South. The Foundation has also formed a Community Partnership Board to assist DFCS build relationships with community providers to enhance resources available to youth exiting care. The Community Partnership Board is comprised of business owners, judges, social service providers, leaders in education and youth advocates.

### **Collaboration with Adoption/Foster Care Program**

DFCS partners with a number of private child-placing agencies in order to better serve the children whose permanent plan includes adoption. There are 10 private agencies across Mississippi who are invited to participate in quarterly or bi-annual placement committee meetings throughout the state. These agencies all license resource homes and some also provide adoption services through their agency. Some of the agencies license therapeutic foster homes and medically fragile foster homes for a specific population of the children in care. Though all agencies licensing resource homes do not provide adoption services, these agencies are encouraged to present their licensed resource families who may be interested in adoption to our placement committees. If the family is matched with a child, then DFCS provides the adoption services to the family licensed by the private child-placing agency. The partnerships with these private agencies have been strengthened over the last couple of years as clear expectations and procedures have been established.

The following is a list of the private agencies and a brief explanation of the services each agency provides:

- Apelah  
Apelah provides support and instruction to resource parents from trained professionals. DFCS is always available to answer questions and to respond immediately to any concerns of the resource parents or the foster child. Offers Coordinated care of children with medical or emotional challenges, ongoing training, and 24-hour case management support.
- Sally Kate Winters  
Sally Kate Winters Family Services offers a continuum of care for children within the foster care system that includes emergency placement services, assessment services and respite services. Sally Kate Winters has also added a transitional living program to serve homeless and runaway youth.

- Methodist Children’s Home (MCH)  
Foster care homes serve as a haven for younger victims of abuse and neglect, as well as children who have special needs. MCH’s Foster Care Program provides Therapeutic Foster Care homes, respite foster care, and campus-based, group care services. MCH provides complete, comprehensive training to all foster parents, as well as continuing support following placement of a foster child. DFCS is available at all times for consultation and support.
- MS Families for Kids  
Adoption Program focuses on bringing permanency to foster children and preparing families for parenthood through adoption so that it can be a positive experience. The children whom the adoption program specifically targets are those considered hard to place such as older children, those aging out of foster care, children with special needs, sibling groups, and those who have been abandoned, neglected or abused.
- Catholic Charities  
Efforts are directed toward finding a family for any child in need of a home, regardless of special needs. Adoption Services are provided for those seeking to open their homes and hearts to adoptable children. Catholic Charities also provides therapeutic foster home services, recruitment and retention services, as well as the Unaccompanied Refugee Minor program.
- Southern Christian Services/Harden House  
SCSCY/Harden House offers a full range of services designed to meet the unique needs of adoptive and foster families. Services include therapeutic foster care, adoption, parenting training, crisis intervention, case management, family support groups, information and referral, respite care, a lending library and newsletter, and a “warm line” that provides connections to support services.
- Mississippi Children’s Home Services (MCHS)  
Services include therapeutic foster care, residential treatment and adoption services for infants, as well as special needs children and youth. These and other services are community based and family-centered. MCHS is also on contract to conduct S.A.F.E. home studies for foster homes being licensed by DFCS in high needs areas.
- Youth Villages  
Youth Villages provides therapeutic foster care and transitional living services in Mississippi. Youth Villages also provides therapeutic services in Mississippi through Mississippi Youth Programs Around the Clock (MYPAC). Emergency and crisis response services are offered to youth and families referred to and participating in Youth Villages’ services.
- 200 Million Flowers  
Works diligently to create partnerships with parents to facilitate domestic, infant adoptions in Mississippi; conducts home studies; use media to influence public perception about adoption, foster care, family preservation, mentoring and the value of

life; promote older children in DFCS custody for adoption through the Mississippi Heart Gallery; provide social services to adoptive parents, birthmothers and caregivers of children in crisis; and create mechanisms and partnerships for outreach to kids from hard places.

### **Mississippi Association of Child Caring Agencies (MACCA)**

The Mississippi Association of Child Caring Agencies (MACCA) is a nonprofit organization whose members are licensed by DFCS to operate group homes, shelters, and adoption agencies throughout the state. MACCA exists to promote quality out-of-home care of children and serves as a vehicle through which Residential Child Caring and Child Placing Agencies in Mississippi may work cooperatively toward the improvement of group and residential care and related services to children, youth and their families. DFCS maintains a strong relationship with MACCA and its members. MACCA hosts an annual meeting with its members, DFCS state office staff, and regional directors to discuss areas of concern and brainstorm solutions.

### **Mississippi Citizen Review Panels**

Mississippi has multiple entities serving as Citizen Review Panels. Regular updates regarding the agency are given to stakeholders and community partners serving on the Children's Justice Act Task Force, The Children's Trust Fund Advisory Board, and Regional/County Practice Model Management Teams, with feedback for improvement being solicited. A teen advisory council is also being utilized as a way to receive feedback from those who are or have been served by the agency to provide feedback for improvement.

### **Children's Justice Act – Multi-Disciplinary Teams (MDT)**

The Mississippi Children's Justice Act (CJA) Grant has funded the development of a Statewide Multi-Disciplinary Child Abuse Review Team Network (MDT) since 1999. This project was in response to the need for the CJA Grant in Mississippi to address in a more systemic manner the handling of child abuse cases in the state. The Multi-Disciplinary Teams provide a structure throughout the state for collaborations between DFCS, law enforcement, legal, medical, and other community partners regarding investigations of child abuse and neglect.

### **Mississippi Children's Trust Fund Advisory Council**

The Mississippi Children's Trust Fund (CTF) was created by the Mississippi Legislature in 1989. The primary purpose of this fund is to encourage and provide financial assistance in the provision of direct services to prevent child abuse and neglect. The CTF Advisory Council Function is to provide direction and recommendation on behalf of the Mississippi CTF. The By-laws state that the CTF Advisory Council will consist of thirteen members. Each of the following agencies is represented on the council: Mississippi Department of Health, Mississippi Department of Education, Mississippi Department of Mental Health and the Mississippi Department of Human Services. In addition, there should be at least one citizen representing each of the four congressional districts in Mississippi and the remaining four members should be citizens that are knowledgeable about child abuse and neglect issues.

MDHS is the lead agency and is responsible to the Mississippi Legislature for the CTF Advisory Council. DFCS continues to manage the CTF.

### **Mississippi Child Death Review Panel**

Legislation establishing a Mississippi Child Death Review Panel went into effect on July 1, 2006, was revised in 2008 to move administrative oversight from the State Medical Examiner's Office to the State Department of Health, and was revised again in 2013 to revise membership.

The Child Death Review Panel is composed of seventeen (17) voting members: the State Medical Examiner or his representative, a pathologist on staff at the University of Mississippi Medical Center, an appointee of the Lieutenant Governor, an appointee of the Speaker of the House of Representatives, and one (1) representative from each of the following: the State Coroners Association, the Mississippi Chapter of the American Academy of Pediatrics, the Office of Vital Statistics in the State Department of Health, the Attorney General's Office, the State Sheriff's Association, the Mississippi Police Chiefs Association, the Department of Human Services, the Children's Advocacy Center, the State Chapter of the March of Dimes, the State SIDS Alliance, the Mississippi Children's Justice Center, Safe Kids Mississippi, and the Mississippi State Fire Marshal's Office. The Review Panel reviews data related to infant and child mortality and makes recommendations to the Mississippi Legislature. The primary purpose of the panel is to foster the reduction of infant and child mortality and morbidity in Mississippi, and to improve the health status of infants and children.

### **Arc of Mississippi**

The DFCS Prevention Unit Special Projects Officer IV who coordinates the CBCAP grant presently serves on the Board of Directors for the Arc of Mississippi. The Arc of Mississippi was founded in 1961 and is an affiliate of The Arc of the United States, the world's largest grassroots advocacy organization for citizens of all ages with cognitive, intellectual, and developmental disabilities, and their families. The Arc is a nationally recognized organization with 140,000 members who are affiliated through approximately 750 state and local chapters across the nation.

The Arc of Mississippi works to include all children and adults with cognitive, intellectual, and developmental disabilities in every community. They focus on Abilities, Respect, and Choice for all and encourage active citizenship and inclusion in every community. Other members of the Board of Directors include parents of children with disabilities, individuals with disabilities; representatives of other State agencies involved in the financing or delivery of related services to children and adults with disabilities and their families.

### **DFCS Collaboration with MDHS Division of Early Childhood Care and Development (DECCD)**

The MDHS/Division of Early Childhood Care and Development (DECCD) is responsible for the administration of the Child Care Development Fund (CCDF) which provides subsidized child

care certificates to eligible families. DECCD administers the Quality Rating and Improvement System for childcare providers as well as the Child Care Resource and Referral Network. DECCD offers a variety of training and technical assistance to child care programs through CCDF. The training and technical assistance program is designed to evaluate the knowledge and a wide range of skills of child care professionals and offer them continuing education to increase the ability and skills of the child care professional workforce. It further supports quality throughout Mississippi's child care system with professional development that offers quality age-appropriate developmental activities in child care settings. DFCS collaborates with DECCD to provide child care certificates to families that are in need of child care to maintain stability as a family unit. There is also a move toward collaboration on providing quality early childhood education as a means of child abuse prevention.

### **DFCS Collaboration with the MDHS Division of Family Foundation and Support (DFFS)**

DECCD received a Maternal Infant and Early Childhood Home Visiting (MIECHV) grant for a voluntary comprehensive home visiting support program, called Healthy Homes Mississippi. The MIECHV grant began July 2010. Healthy Homes Mississippi is providing family support workers who assist families with physical and mental health issues, financial planning, parenting information, community support and services, and building healthy social support networks. Healthy Homes Mississippi serves pregnant mothers or families with children three (3) months or younger who are low income families, families with a history of substance abuse, families with a history of domestic violence, and families with a history of incarceration. Healthy Homes Mississippi is implementing the Healthy Families America home visiting model and the Partners for a Healthy Baby parenting curriculum. All services are provided free of charge. The program began serving families in July 2012 in Claiborne, Copiah, Jefferson, Wilkinson, and in February of 2013 for Tunica, Coahoma and Sunflower Counties.

Oversight for this grant is now under the MDHS/Division of Family Foundation and Support (DFFS). The Prevention/Protection Unit of DFCS collaborates with DFFS by serving on the Mississippi Home Visiting Partnership Charter which is the MIECHV advisory board for Healthy Homes Mississippi. This advisory board consists of internal and external partners who meet quarterly to provide input regarding services to Healthy Homes Mississippi Home Visiting Program. This group additionally serves as the framework for collaboration among many professionals providing preventive services in the community. Some participants include representatives from the Choctaw Tribe's Early Education Services, Department of Health, Early Head Start, Mississippi Community Education Services, a counseling provider, a medical provider, a parent, as well as representation from various divisions within MDHS. Collaborations between the MIECHV advisory board and DFCS will continue to result in exploration and implementation of prevention focused activities.

### **Baptist Village-Dorcas In-Home Family Support Program**

The purpose of the Dorcas In-Home Family Support Program shall be to provide family-driven, youth-guided interventions intended to improve the stability of enrolled families, to increase their access to, and utilization of community resources and assistance, and to improve their

ability to provide adequate care for the children for whom they are responsible. The desire is to reduce the likelihood of removal or other disruption of their living arrangement.

The primary function of The Dorcas In-Home Family Support Program is to facilitate the ability of enrolled families to provide for the safety, permanence, and well-being of the children for whom they are responsible. Operating on the premise that the family is the expert regarding its own needs, a significant step toward this goal is accomplished by the integration of these families into the system of community-based resources available to them. Families enrolled in the Dorcas Program can benefit from assistance in accessing and utilizing these resources. The most practical strategy by which this can be accomplished is case management.

No fees shall be charged for the services provided by the agency in the Dorcas Program. However, fees may be charged by service providers from community agencies where families may obtain services. Families enrolled in the Dorcas Program shall be expected to pay the cost of such fees, either through household income, or through enrollment and participation in public assistance programs intended for such purposes.

#### **Collaboration with Private Agencies for Finger-Printing Services**

Since November 2011, DFCS has offered a Memorandum of Understanding for finger-printing services to all Residential Child Caring Agencies and Child Placing Agencies licensed by DFCS. This MOU allows DFCS to provide criminal background clearances for employees, volunteers, and resource parents serving children. There is no processing fee for resource families licensed to accept DFCS placements.

#### **Collaboration with Mississippi's Comprehensive Emergency Management Plan**

Attachment to Emergency Support Function #6 of the Comprehensive Emergency Management Plan was completed on March 27, 2009 and approved by the Administration for Children and Families Office of Refugees Resettlement (ACFORR).

#### **Collaboration between DFCS and the Mexican Consulate**

Collaboration through a Memorandum of Understanding was entered into on August 13, 2009 between DFCS and the Mexican Consulate for cooperation in providing services to children in the United States who are Mexican citizens.

#### **Collaboration between MDHS and the Division of Medicaid (DOM)**

Collaboration through an Interagency Agreement between MDHS and DOM, dated January 24, 2011 for Provision of Medical Assistance for Refugees in Mississippi.

#### **Memorandum of Understanding (MOU): Child Abuse on Keesler Air Force Base, Harrison and Jackson Counties**

MOU agreeing that any suspected cases of physical, sexual, or emotional abuse or neglect of children may, when feasible, be jointly investigated, monitored and resolved. This MOU became effective March 2010 and remains in force for twelve months and shall be renewed automatically for equal twelve-month periods, each and every year thereafter, unless any party gives written notice of intention not to renew prior to the expiration of the current effective period.

### **Collaboration with stakeholders, agencies, courts, health care providers and others in the Child and Family Services Review/Program Improvement Plan (PIP)**

The May 17-21, 2010 CFSR was conducted on site in Hinds, Desoto and Lauderdale Counties in Mississippi. The State did not meet the national standards for the data indicators pertaining to (1) absence of maltreatment of children in foster care by foster parents or facility staff and (2) placement stability. The CFSR evaluated state performance on seven outcome areas and Mississippi did not achieve substantial conformity with any of the seven child welfare outcomes for safety, permanency, and well-being. Mississippi was found to be in substantial conformity with two of the seven systemic factors, which included Agency responsiveness to the Community and Staff and Provider Training. The state did not achieve substantial conformity with five of the systemic factors, including Statewide Information System; Case Review System; Quality Assurance System; Service Array, Foster and Adoptive Parent Licensing, Recruitment, and Retention.

As a result of the findings from the CFSR, DFCS developed a Program Improvement Plan (PIP) for the Areas Needing Improvement. The PIP was initiated in April, 2011. DFCS invited stakeholders who participated in the Child and Family Services Plan Workshop and the CFSR on-site reviews to continue to work with DFCS throughout the achievement of the PIP as well as invite other stakeholders to participate. The final data for the PIP was submitted March 25, 2014. The Children's Bureau provided MDHS notice of acceptance that the PIP was complete on June 2, 2014.

### **Collaboration with stakeholders, agencies, courts, health care providers and others in the Child and Family Services Plan**

In February, 2013, a Child and Family Services Plan (CFSP) 5-Year Strategic Planning Conference was held with approximately 125 participants including stakeholders and DFCS Senior Management attending. Workgroups outlined the basis of the 5-Year Strategic Plan and goals were set. The 2015-2019 CFSP will continue to be developed with the assistance of stakeholders through various stakeholder meetings, i.e. Regional Implementation Team Meetings, Citizens Review Panels, Service Provider Contractors meetings and trainings, as well as other meetings to develop additional resources in the State to meet the needs of the children in care. Stakeholders were asked to make a commitment to work with DFCS over the next five years to bring about positive changes in the well-being of children in Mississippi.

MBCI Chief Justice Kevin Briscoe (formerly Senior Youth Court Judge) and Youth Court Judge, Hon. Holly Denson, are actively involved in collaborative efforts with DFCS and the

Administrative Office of Courts to prepare the agenda for the annual ICWA Conference. These meetings are held quarterly.

In addition to the ICWA Conference, quarterly meetings are held between DFCS staff and MBCI Social Services to address any case planning necessary to maintain or reunite Native American families as soon as safely feasible when safety concerns are identified. The meetings are held in the region of the state with the largest Native American population.

## **II. ASSESSMENT OF PERFORMANCE**

As discussed in the May 14-15, 2014 Regional Meeting in Atlanta with the Children’s Bureau, states needed to begin developing the Statewide Assessment, and continue development after submitting the CFSP. Mississippi is continuing to develop the Statewide Assessment. In collaboration with the Administrative Office of Courts (AOC), DFCS held four “Legal Stakeholders for Permanency” summits across the state the week of October 27-30, 2014. Stakeholders invited included the judiciary, the Attorney General’s Office, prosecutors, guardians *ad litem*, tribal partners and other stakeholders. Data was presented to the attendees, and the discussion was facilitated to obtain feedback on data.

An identified concern for all of the reports used for measurement of the CFSR items in the CFSP is the parameters for the reports. Most of the reports proposed to be used for measurement of the CFSR were designed around MSA requirements. The monthly reports are used by management for assessment of performance for each county/region and statewide on a monthly basis.

The state’s child welfare data for reporting purposes is stored external to the SACWIS in a SQL database and managed by state and contract technical staff. To address this concern, programming staff will be able to modify current parameters for identified reports producing reporting based on any given set of parameters for better alignment to CFSR, CFSP, and APSR reporting timeframes.

The reports used for measurements of CFSR items that begin with an “S” are considered revised and validated reports used for MSA monitoring.

Reports beginning with “MW” are standard monthly batch reports and have not been through the rigorous revision and validation processes but display useful data for agency performance measurements. The validation process is outlined below.

Reports beginning with “SPAD” are Foster Care Review (FCR) Reports. These case review reports cover a six month period of review. FCR reviews each case every six months. Children who are not in custody for at least six months are not reflected in these reports.

### **MACWIS Data Reports Validation Process**

STEP 1: The process for MACWIS reports validation begins with the validation coordinator:

1) Conducting user acceptance testing for newly developed reports; 2) documenting the high level business rules and data point locations for each report; 3) pulling report samples (minimum of 5% — 10%); and 4) assigning reports (or parts of reports) to reviewers for data validation.

STEP 2: Each data validation team member takes his/her assigned report (or report section) and while using the high level business rules/data point locations document as a guide, works each sample record to determine in MACWIS if the data in the system matches the report data based on the data point location within MACWIS. Each team member documents their findings within a standardized error reports document.

STEP 3: The validation coordinator compiles team member validation results for QA review, and then assigns the report or report sections to QA team members for secondary validation of the results (approx. 5% of reviewed cases are reviewed for QA).

STEP 4: The validation coordinator reviews all results, researches issues found, documents errors for further review by MIS. When possible, errors are communicated from the validation coordinator to the social workers for data correction. In the event of error trends, there will be involvement from the Field Operations Director in communicating information to the field.

Reports developed during the Bridge Plan Period and all newly developed reports are scheduled for re-validation every 6 months.

The re-validation process works the same as above with the exception of the validation coordinator beginning with #3 of STEP 1 — pulling report samples since the other tasks would have already been completed during the initial round of validation

## **A. CHILD AND FAMILY OUTCOMES**

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

- **Item 1:** Timeliness of Initiating Investigations of Reports of Child Maltreatment

**EMU Item 1: Timeliness of initiating investigations of reports of child maltreatment: October 1, 2013-September 30, 2014:** 81.55% of 103 applicable cases rated a strength. 83.78% of 74 applicable cases rated a strength during the previous federal fiscal year (October 1, 2012 – September 30, 2013). Strength indicates that the investigations into the reports of maltreatment were initiated in accordance with MDHS timeframes and requirements for a report of that priority and that face-to-face contact was made with the child(ren) who are the subject of the report was made in accordance with the State’s timeframes and requirements for a report of that priority.

**Report MWZ128SS: Child Investigation Timeliness Report:** For the month of April 2015, 81.3% of intakes were initiated timely.

**Report SZ1271: Timeliness of Investigations for Custody Children:** 4/1/2015-4/30/2015: 79.17% of investigations of maltreatment were initiated timely statewide.

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

- **Item 2:** Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry into Foster Care.

**EMU Item 2: Repeat maltreatment: October 1, 2013-September 30, 2014:** 77.78% of 45 applicable cases rated a strength. 96.97% of 33 applicable cases rated a strength for the previous federal fiscal year. Of all children who were victims of substantiated or indicated maltreatment allegation during the first 6 months of the reporting period, a case is rated as strength if the children were not victims of another substantiated or indicated maltreatment allegation within a 6-month period.

**EMU Item 3: Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry into Foster Care: October 1, 2013-September 30, 2014:** 77.25% of 167 applicable cases rated a strength. 87.69% of 130 applicable cases rated a strength for federal fiscal year 2013. This item looks at concerted efforts to provide or arrange for appropriate services to the family to protect children and prevent their entry into foster care or re-entry into foster care after a reunification and if removal was necessary to ensure the child's safety if the child was removed without providing or arranging for services.

**EMU Item 12: Foster Care Re-Entries: October 1, 2013-September 30, 2014:** 92.45% of 53 applicable cases rated a strength while 96.97% of 66 applicable cases rated a strength for federal fiscal year 2013. A strength indicates that any child re-entering foster care within 12 months of a discharge from a previous foster care episode had evidence of concerted efforts made to prevent re-entry.

**Report MWLS311S: Children Who Have Re-Entered Foster Care within One Year of Reunification:** Rolling 12 month period from May 1, 2014-April 30, 2015: 5.95% of children re-entered foster care within 12 months of a prior discharge from foster care to reunification.

- **Item 3:** Risk and Safety Assessment and Management

**EMU Item 4: Risk assessment and safety management: October 1, 2013-September 30, 2014:** 70.10% of 311 applicable cases rated a strength. October 1, 2012-September 30, 2013: 75.65% of 193 applicable cases rated a strength. A strength indicates that safety and risk were assessed timely initially and on an on-going basis throughout the review period.

**Report SBRD06: Rate of Maltreatment in Care: Rolling one year period from 5/1/2014-4/30/2015:** 0.95% of children in custody had a substantiated investigation of abuse or neglect during this 12 month period.

**Strengths and concerns regarding this outcome:** DFCS has developed a Special Investigations Unit. The Special Investigations Unit conducts QA on all special investigations.

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

- **Item 4:** Stability of Foster Care Placement

**EMU Item 14: Stability of Foster Care Placement: October 1, 2013-September 30, 2014:** 90.61% of 181 applicable cases rated a strength. October 1, 2012 – September 30, 2013: 93.81% Of 113 applicable cases rated a strength. A strength indicates that if there was more than one placement, all placement changes during the review period were planned by the agency in an effort to achieve the child’s case plan goals or made in an effort to meet the needs of the child, the child’s placement is stable, the child placement meets their needs for therapeutic, educational, and medical needs if they’ve been assessed with special needs, and the child’s placement is least restrictive.

**Report SZPLM5: Children in Custody less than 12 months who have 2 or fewer placements:** Rolling 12 month period from 5/1/2014-4/30/2015: 82.80% of children who were in custody for less than 12 months during this time frame had 2 or fewer placements statewide.

- **Item 5:** Permanency Goal for Child

**EMU Item 10: Permanency goal for child: October 1, 2013-September 30, 2014:** 33.15% of 181 applicable cases rated a strength. October 1, 2012-September 30, 2013: 49.56% of 113 applicable cases rated a strength. A strength indicates that the child has a permanency goal specified in the case file and that the plan was developed within 30 days of the child entering state’s custody. If the child was in state’s custody for 15 of the most recent 22 months, a petition for termination of parental rights was entered or an exception (or compelling reasons) for not filing for TPR was documented in the case file.

**Report SLS312: Children Who Have a Permanency Plan Developed within 30 Days of Entry into Foster Care:** Rolling 12 month period from 5/1/2014-4/30/2015: 35.17% of children entering foster care during this time frame had a permanency plan developed within 30 days.

- **Item 6:** Achieving Reunification, Guardianship, Adoption or Other Permanent Planned Living Arrangement

**EMU Item 13: Reunification, Guardianship or Permanent Placement with Relatives: October 1, 2013-September 30, 2014:** 44.58% of 83 applicable cases rated a strength. October 1, 2012-September 30, 2013: 44.12% of 68 applicable cases rated a strength. Of the children in foster care with a permanency goal of Reunification, Guardianship, or Permanent Placement with Relatives, their case rated a strength if the agency and the court are making concerted efforts to achieve the goal in a timely manner, the parental service plans identify services DFCS deems necessary to address behaviors

or conditions resulting in the child's placement in foster care, if the agency made those services available through direct or indirect referral, and if the child was discharged and reunified during the review period, was there a 90 day trial home placement.

**EMU Item 15: Adoption: October 1, 2013-September 30, 2014:** 39.29% of 84 applicable cases rated a strength. 45.45% of 33 applicable cases rated a strength. For those children with a plan of Adoption, a strength is identified when the agency and the court are making concerted efforts to achieve the plan of Adoption in a timely manner and the child has an assigned Adoption Specialist, the resource family has been informed of available subsidies, and there is evidence that that the resource parents have been engaged on discussions regarding adoption.

**EMU Item 16: Other planned permanent living arrangement: October 1, 2013-September 30, 2014:** 77.08% of 48 applicable cases rated a strength. October 1, 2012-September 30, 2013: 77.27% of 44 applicable cases rated a strength. A strength is evident when youth in custody ages 14 to 20 were provided services to adequately prepare them for independent living when the child leaves foster care and that there is a living arrangement that is permanent where the child will remain until discharged from foster care.

**Report SBRD05: Children Exiting Custody with an Outcome of Reunification:** Rolling 12 month period from 5/1/2014-4/30/2015: 66.36% percent of children exited to reunification within 12 months statewide.

**Report SBRD10: Length of Time to Adoption Finalization:** Rolling 12 month period from 5/1/2014-4/30/2015: 1.20% of children were adopted within 12 months, 18.60% of children were adopted within 24 months and 58.90% of children were adopted within 36 months.

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

- **Item 7:** Placement with Siblings

**EMU Item 20: Placement with Siblings: October 1, 2013-September 30, 2014:** 98.44% of 128 applicable cases rated a strength. October 1, 2012-September 30, 2013: 98.57% of 70 applicable cases rated a strength. A strength is evidence when children in foster care are placed with all siblings who are in foster care or, if not, there is a valid reason for the child's separation from siblings such as the separation was necessary to meet the needs of one of the siblings or to accommodate a large sibling group.

**Report SLS316: Children in Sibling Groups Who Have Entered Care Who are Initially Placed Together:** Rolling 12 month period from 5/1/2014-4/30/2015: 77.30% of siblings were placed together or had exceptions noted during this time frame.

- **Item 8:** Visiting with Parents and Siblings in Foster Care

**EMU Item 21: Visiting with parents and siblings in foster care: October 1, 2013-September 30, 2014:** 31.21% of 157 applicable cases rated a strength. October 1, 2012-September 30, 2013: 28.87% of 97 applicable cases rated a strength. A strength is identified when initial visitation plans are developed within 30 days of the child's placement into custody and updated as circumstances in the case warrant. Visits between the child, parents, and separated siblings are of a frequency and quality to maintain or promote the continuity of the relationship.

**Report MWLS318S: Child Contact with Parents and Siblings While in Custody:** For the month of 4/1/2015-4/30/2015, 8.96% of children met with their mother, 6.48% of children met with their father, 24.11% of children met with their siblings and 6.63% met all visitation requirements.

- **Item 9:** Preserving Connections

**EMU Item 19: Proximity of Foster Care Placement: October 1, 2013-September 30, 2014:** 94.89% of 176 applicable cases rated a strength. October 1, 2012-September 30, 2013: 97.22% of 108 applicable cases rated a strength. A strength is evident when the child is placed in the same county as he or she was removed and the placement is close enough to his or her parents or other potential caregiver to facilitate frequent face-to-face contact between the child and the parents while the child is in foster care. If not, the reason for the location of the placement was to assure the child's needs and case plan goal are achieved. If the child was not able to remain in the same school as prior to foster care placement, it must be appropriate based on case circumstances to rate a strength.

**EMU Item 22: Preserving Connections: October 1, 2013-September 30, 2014:** 82.87% of 181 applicable cases rated a strength. October 1, 2012-September 30, 2014: 73.45% of 113 cases rated a strength. In rating strength, there is evidence that concerted efforts were made to maintain the child's important connections and that ICWA inquiries were made and actions were taken in the event the child is found to be of Native American ancestry.

**Report SLS314: Proximity of Initial Placement for all Children Entering Custody:** For the month of 4/1/2015-4/30/2015, 95.93% of children with one placement in PUR were placed in COR, within 50 miles, or outside 50 miles with approved an exception.

- **Item 10:** Relative Placement

**EMU Item 24: Relative placement: October 1, 2013-September 30, 2014:** 64.29% of 168 applicable cases rated a strength. October 1, 2012-September 30, 2013: 65.35% of 101 applicable cases rated a strength. A strength is evident when the child's current or most recent placement is with a relative and the placement is stable. If the child is not placed with a relative, efforts to identify, locate, and evaluate maternal and paternal relatives were made before being ruled out as, or were unwilling to be, placement resources.

**Report SZ0510: Number of Children in Foster Care by Placement Type:** As of 4/30/2015, 31.30% of all children in foster care were placed in relative placements.

- **Item 11:** Relationship of Child in Care with Parents

**EMU Item 23: Relationship of Child in Care with Parents: October 1, 2013-September 30, 2014:** 29.91% of 117 applicable cases rated a strength. October 1, 2012-September 30, 2013: 42.25% of 71 applicable cases rated a strength. This item rates a strength when there is evidence a meeting occurred between the birth parents and the resource parents within the first month of placement (if the placement occurred during the period under review) and if there is evidence of shared parenting responsibilities between the birth parent and the resource parent.

**Report SZTACR: Timeliness of County Conference Frequency:** Rolling 12 month period from 5/1/2014-4/30/2015: 63.58% of the most recent county conferences were held timely.

**Report SPAD19: Children who have a Permanency Plan Detailing Goal, Timeframes and Activities to Support Goal:** Report Period 11/1/2014-4/30/2015: 47.51% of children had an initial FSP/ISP developed within 30 days in a Family Team Meeting. 39.08% of children had a permanency plan detailing goal, timeframes and activities to support the goal.

**Report SPAD4: County Conference Participation Report:** Report Period 11/1/2014-4/30/2015: 24.10% of county conferences had the required participation with the exception of a guardian *ad litem* being present.

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

- **Item 12:** Needs and Services of Child, Parents and Foster Parents

**EMU Item 5 (Section A): Needs and Services of Child, Parents, and Foster Parents: October 1, 2013-September 30, 2014:** 59.16% of 311 applicable cases rated a strength. October 1, 2012-September 30, 2014: 52.33% of 193 applicable cases rated a strength.

**EMU Item 5 (Section B): Needs and Services of Child, Parents, and Foster Parents: October 1, 2013-September 30, 2014:** 24.63% of 268 applicable cases rated a strength. October 1, 2012-September 30, 2014: 19.88% of 166 applicable cases rated a strength.

**EMU Item 5 (Section C): Needs and Services of Child, Parents, and Foster Parents: October 1, 2013-September 30, 2014:** 88.75% of 160 applicable cases rated a strength. October 1, 2012-September 30, 2014: 94.68% of 94 applicable cases rated a strength.

A strength for this item is evident when the strengths and needs of the child, the parents, and the resource parents are assessed formally and/or informally on an initial basis as

well as on an on-going basis and that services are provided a timely manner to meet any identified needs.

**Report SPAD12: CFA in 30 Calendar Days:** Report Period 11/1/2014-4/30/2015: 42.48% of children had a Comprehensive Family Assessment completed within 30 days.

**Report SLS315: Children Who have had an Initial Screening and Comprehensive Health Assessment upon Entering Custody:** Rolling 12 month Period from 5/1/2014-4/30/2015: 29.19% of children were in custody for at least 72 hours had an initial screening, and 32.13% of children who were in custody for at least 30 days had a Comprehensive Health Assessment within 30 days of entering care.

**Report SPAD9: Least Restrictive Placement:** Report Period 11/1/2014-4/30/2015: 95.96% of children were placed in the least restrictive placement in regards to their needs.

**Report SPAD20: Service Plans Updated Quarterly and for Placement Changes:** Reporting Period 11-1/2014-4/30/2015: 14.22% of children had a service plan updated quarterly as a result of a Family Team Meeting. 27.31% of children with a placement change during this period had a service plan updated timely after the placement changed. 12.58% of children had service plans updated quarterly and after a placement change.

- **Item 13:** Child and Family Involvement in Case Planning

**EMU Item 7: Child and family involvement in case planning: October 1, 2013-September 30, 2014:** 9.20% of 576 applicable cases rated a strength.

**EMU Item 11: Case Planning: October 1, 2013-September 30, 2014:** 20.09% of 311 applicable cases rated a strength. October 1, 2012-September 30, 2014: 18.65% of 193 applicable cases rated a strength. A strength for this item indicates that family team meetings were utilized in the initial and on-going development of case plans with the birth parents and the resource parents attendance in the family team meetings.

**Report SPAD20: Service Plans Updated Quarterly and for Placement Changes:** Reporting Period 11-1/2014-4/30/2015: 14.22% of children had a service plan updated quarterly as a result of a Family Team Meeting. 27.31% of children with a placement change during this period had a service plan updated timely after the placement changed. 12.58% of children had service plans updated quarterly and after a placement change.

**Report SPAD4: County Conference Participation Report:** Report Period 11/1/2014-4/30/2015: 24.10% of county conferences had the required participation with the exception of a guardian ad litem being present.

- **Item 14:** Caseworkers Visits with Child

**EMU Item 8: Caseworker visits with child: October 1, 2013-September 30, 2014:** 53.70% of 311 applicable cases rated a strength. October 1, 2012-September 30, 2014: 61.14% of 193 applicable cases rated a strength. A strength indicates that children were seen, face-to-face, and the contacts were of a frequency and a quality to address issues pertaining to safety , permanency, and well-being.

**Report MWZWCM5S: Annual Worker/Child Face to Face Visit Contact Report:** Rolling 12 month period from 5/1/2014-4/30/2015: 86.22% of monthly required child visits occurred within this 12 month period statewide.

- **Item 15:** Caseworkers Visits with Parents

**EMU Item 9: Caseworker visits with parents: October 1, 2013-September 30, 2014:** 16.54% of 272 applicable cases rated a strength. October 1, 2012-September 30, 2014: 17.96% of 167 applicable cases rated a strength. A strength indicates that parents (mother and father) were seen, face-to-face, and the contacts were of a frequency and a quality to address issues pertaining to safety , permanency, and well-being of the child and promote the achievement of case plan goals.

**Report SZCR3: Frequency of Caseworker Visits with Parents/Caregivers with whom Children are to be Reunified:** For the month of 4/1/2015-4/30/2015, 27.38% of cases met the frequency of parent/caregiver contact requirement when there was a goal of reunification in the FSP.

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

- **Item 16:** Educational Needs of the Child

**EMU Item 6: Educational Needs of the Child: October 1, 2013-September 30, 2014:** 77.08% of 48 applicable cases rated a strength. October 1, 2012-September 30, 2014: 77.27% of 44 applicable cases rated a strength. Cases where the child's educational needs were assessed initially and on-going and services were provided to meet their identified educational needs rated a strength.

**Report SPAD15: General and Special Education Screening:** Report Period 11/1/2014-4/30/2015: 52.93% of children received timely general and special education screening during this report period.

**Report SPAD16: Timely Registration for School:** Report Period 11/1/2014-4/30/2015: 70.54% of the children who entered custody during the period in review were registered for school timely. 65.40% of children with a placement change were registered for school timely.

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

- **Item 17: Physical Health of the Child**

**EMU Item 17: Physical Health of the Child: October 1, 2013-September 30, 2014:** 56.68% of 217 applicable cases rated a strength. October 1, 2012-September 30, 2014: 61.65% of 133 applicable cases rated a strength. This item rated a strength if the child's physical health and dental health were assessed in a timely manner (initially and on-going) and services were provided to meet the child's identified needs.

**Report SLS315: Children Who Had an Initial Screening and Comprehensive Health Assessment upon Entering Custody:** Rolling one year period from 5/2014-4/30/2015: 29.19% of children were in custody for at least 72 hours received an initial screening timely, and 32.13% of children who were in custody for at least 30 days had a Comprehensive Health Assessment within 30 days of entering care.

**Report SPAD27m1: Dental Exam over 3 within 90 Days of Custody:** Report Period 11/1/2014-4/30/2015: 44.89% of children over 3 years in age received a timely dental examination.

**Report SPAD27m2: Dental Exam for Children Turning 3 and Routine Exam:** Report Period 11/1/2014-4/30/2015: 48.69% of children turning 3 had a timely dental examination, and 45.18% of children received a timely routine dental examination.

- **Item 18: Mental/Behavioral Health of the Child**

**EMU Item 18: Mental/Behavioral Health of the Child: October 1, 2013-September 30, 2014:** 67.20% of 189 applicable cases rated a strength. October 1, 2012-September 30, 2014: 61.54% of 104 applicable cases rated a strength. Cases rated a strength if the child's mental health needs were assessed initially and on-going and services were provided to meet those identified needs.

**Report SPAD25: Mental Health Assessment within 30 Days of Custody:** Report period 11/1/2014-4/30/2015: Cases reviewed during this 6 month period show that 36.77% of children, aged 4 and older, received a timely mental health assessment.

## **B. SYSTEMIC FACTORS**

### **Statewide Information System-Mississippi Automated Child Welfare Information System**

- **Item 19: Statewide Information System:** How well is MACWIS functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

MACWIS is available statewide for staff to input the status, demographic characteristics, location, and goals for the placement of every child who is in foster care.

(See Section III. Programs, Services and Program Support: G. Program Support-Continuous Quality Improvement Unit and MACWIS for more information.)

### **Case Review System**

- **Item 20: Written Case Plan:** How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?

**Report SPAD19: Children who have a Permanency Plan Detailing Goal, Timeframes and Activities to Support Goal:** Report Period 11/1/2014-4/30/2015: 47.51% of children had an initial FSP/ISP developed within 30 days in a Family Team Meeting.

**Report SPAD20: Service Plans Updated Quarterly and for Placement Changes:** Reporting Period 11-1/2014-4/30/2015: 14.22% of children had a service plan updated quarterly as a result of a Family Team Meeting. 27.31% of children with a placement change during this period had a service plan updated timely after the placement changed. 12.58% of children had service plans updated quarterly and after a placement change.

- **Item 21: Periodic Reviews:** How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than every 6 months, either by a court or by administrative review?

**Report SZTACR: Timeliness of County Conference Frequency:** Rolling 12 month period from 5/1/2014-4/30/2015: 63.58% of the most recent county conferences were held timely.

(See Section III. Programs, Services and Program Support: G. Program Support-Continuous Quality Improvement Unit and Appendix B: Quality Assurance System for more information)

- **Item 22: Permanency Hearings:** How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less than frequently every 12 months thereafter?

**Report SZTPHR: Timeliness of Permanency Hearing:** Rolling 12 month report from 5/1/2014-4/30/2015: 65.05% of children statewide who were in custody 12 months or more had a timely permanency hearing.

- **Item 23: Termination of Parental Rights:** How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

**Report MWZ014S1: Children who have been in custody 15 of the most recent 22 months with no ASFA exception noted:** 49.75% of children in custody 15 out of the most recent 22 months do not have an AFSA exception noted.

**Report MWZ014S2: Children who have been in custody 15 of the most recent 22 months with ASFA exception noted:** 59.62% of children in custody 15 out of the most recent 22 months do have an AFSA exception noted.

**Report SZ0171: Children in custody 17 of 22 months with a TPR filed or exception noted:** Report Period 4/1/2015-4/30/2015: 86.75% of children had a TPR petition filed/exceptions noted within 17 of 22 months (11.69% had a petition filed, and 75.06% had an ASFA exception noted.)

- **Item 24: Notice of Hearings and Reviews to Caregivers:** How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

**Report SPAD4: County Conference Participation Report:** Report Period 11/1/2014-4/30/2015: 24.10% of county conferences had the required participation with the exception of a guardian ad litem being present.

Mississippi Code of 1972 Section 43-21-603(5)(e) states that if a child has been adjudicated a neglected child or an abused child, before entering a disposition order, the youth court shall consider, among others, relevant testimony and recommendations, where available, from the foster parent of the child, the grandparents of the child, the guardian *ad litem* of the child, representatives of any private care agency that has cared for the child, the family protection worker or family protection specialist assigned to the case, and any other relevant testimony pertaining to the case.

DFCS policy directs staff to invite parents and/or legal guardians, foster, adoptive or relative-care parents, and grandparents to the review hearings, and any proceedings held with respect to the child in foster care pursuant to Miss. Code Ann. Section 43-21-603(5)(e), and others who may have relevant testimony may be invited.

Depending on local court rules, DFCS may be required to provide the following types of notice: telephone calls, letters, summons and/or subpoena or face-to-face notification. DFCS should provide documentation to the court regarding who provided notice and what type of notification was used.

Supervisors and direct service workers are trained on the duty to notify all persons who have a right to present information in hearings through the PreService Training.

### **Quality Assurance System**

- **Item 25: Quality Assurance System:** How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the

services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

DFCS' Quality Assurance System is functioning statewide by (1) operating in the jurisdictions where the services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system and (4) provides relevant reports.

(See Section III. Programs, Services and Program Support: G. Program Support-Continuous Quality Improvement Unit and Appendix B: Quality Assurance System for more information)

**Strengths and concerns regarding this factor:** DFCS' Quality Assurance System has a goal to develop a CQI process for Performance Improvement Plans (PIP) across all regions based on performance results of yearly Evaluation and Monitoring (EMU) regional reviews.

### **Staff and Provider Training**

- **Item 26: Staff and Provider Training:** How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the CFSP that includes the basic skills and knowledge required for their positions?

#### **Staff Training:**

All staff carrying a caseload with the agency are required to achieve 270 hours of Pre-Service training. The training is continuously updated to reflect state and federal mandates, agency policy and practice changes and a formal revision annually. The model for pre-service training consists of nine weeks of training. There are alternating weeks of classroom instruction and on-the job training. There are 4 weeks of each and training ends with a week of MACWIS training in the computer lab. The portion of this training consists of 160 hours of on-the-job training where the trainee works specifically with a team that includes a training buddy, the supervisor and a DFCS Training Coordinator. Through each of these four weeks the trainee completes a manual that complements the classroom training while giving them the hands-on experience needed as well as the classroom knowledge. A score of 70% is required on each weekly test in order to pass the week. Training sessions begin approximately every 8 weeks to prevent long periods of wait time between being hired and beginning training.

(See Section III. Programs, Services and Program Support: G. Program Support-Professional Development, Training and Education, and Appendix C: DFCS Training Plan for more information.)

**Provider Training:**

Private providers that offer placement and adoption services are licensed by DFCS as either Residential Child Caring Agencies (group homes) or Child Placing Agencies (private foster homes and/or adoption services). All providers licensed by DFCS are required to comply with the staff qualifications and training requirements outlined in the Licensing Requirements Manual for Residential Child Caring and Child Placing Agencies. Providers must offer new staff orientation in addition to at least forty (40) hours of pre-service training and twelve (12) hours of ongoing training. Training topics are defined for the pre-service and ongoing training. Therapeutic providers must also meet the additional training required by the Department of Mental Health.

○ **Strengths and concerns regarding this factor:**

Strengths: Staff training is newly revised and instrumental in staff development. The training covers all aspects of the work the newly hired staff will conduct.

Concerns: Staff retaining all the knowledge received in pre-service training. The way this is addressed is through the use of ongoing OJT, solid supervision and the use of regional practice coaches. With this team, a newly hired staff member has someone available to assist in times of need.

- **Item 27: Ongoing Staff Training:** How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

All frontline staff are required to complete 40 hours of ongoing training annually, and all supervisory staff are required to complete 24 hours of ongoing training annually. Training is delivered by the DFCS training team as well as university partners and agency consultants. A variety of topics are delivered each quarter. Staff is able to achieve this training requirement by having the option of completing half of their training hours with outside training sessions.

(See Section III. Programs, Services and Program Support: G. Program Support-Professional Development, Training and Education, and Appendix C: DFCS Training Plan for more information.)

○ **Strengths and concerns regarding this factor:**

Strengths: The ongoing training program is also newly revised with many new training topics being delivered. The agency is also using a new tracking system to monitor the number of hours received by staff annually.

Concerns: The tracking system we are using currently is working for the agency but it is a primarily manual system. This makes monitoring the data on an ongoing basis a bit complicated, but it is able to be done.

- **Item 28: Foster and Adoptive Parent Training:** How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (that care for children receiving foster care and adoption assistance under title IV-E) that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children?

DFCS adopted a dual licensure process for all foster and adoptive families in 2008. All resource families, as they are now called, must meet all licensure standards for both foster care and adoption. Resource families may be licensed by either DFCS or a private provider. Training requirements for resource families licensed by DFCS are outlined in Section F of the DFCS Policy manual. Pre-service training for resource parents includes an orientation plus twenty-seven (27) hours of training and is offered or coordinated by the regional Resource Units. Pre-service training must be completed prior to licensure. There is a Resource Unit in each of the thirteen (13) DFCS regions. Annual ongoing training for resource parents is provided through a combination of in-house and outside training and requires ten (10) hours of training, five (5) of which may be obtained online. Resource families must renew their license annually. Private providers that license private resource homes are required to comply with the training requirements outlined in the Licensing Requirements Manual for Residential Child Caring and Child Placing Agencies. Therapeutic providers must also meet the additional training required by the Department of Mental Health.

### **Service Array and Resource Development**

- **Item 29: Array of Services:** How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the CFSP?
  - Services that assess strengths and needs of children and families and determine other service needs;
  - Services that address the needs of families in addition to the individual children in order to create a safe home environment;
  - Services that enable children to remain in safely with their parents when reasonable; and
  - Services that help children in foster care and adoptive placements achieve permanency.

There are resources in all areas of the state. Magnolia Health Plan is our primary management care provider. Magnolia has providers all over the state who provide dental, mental health and medical services. There are 15 mental health centers that service each county in the state. There are substance abuse treatment centers scattered throughout the state. Private providers provide family preservation services. The DFCS Resource Directory is compiled of all the resources by county for the entire state, and is available to staff through the DFCS Connection Website.

DFCS provides services regardless of cultural or linguistic background to all Limited English Proficiency (LEP) clients involved with DFCS. Interpreters are provided for all languages to serve the needs of DFCS clients. This service is available for LEP clients when they are involved with DFCS, 24 hours a day, seven days a week.

(See Section III. Programs, Services and Program Support: G. Program Support-Resource Development Unit and Appendix D: Health Care Oversight and Coordination Plan for more information.)

Resource families learn the concept of shared parenting in pre-service training. Resource families are encouraged to work with DFCS toward the goal of reunification or relative placement whenever possible. If reunification occurs, the resource family has been set up as a permanent support for the family. If the child is ultimately freed for adoption, the resource family is a likely adoptive placement and is in a position to maintain permanent ties to the biological family. For children who are free for adoption but without an adoptive placement, Mississippi uses the following services to help those children find permanency in addition to the work of the assigned adoption specialist:

- There are two Wendy's Wonderful Kids providers that work with DFCS to recruit adoptive placements.
- 200 Million Flowers is a private adoption agency that works with DFCS to promote the adoption of older foster children in state custody in Mississippi for adoption through community information sessions and a heart gallery-like event.
- DFCS has a dedicated staff person to work toward adoption or other forms of permanency for older teens (males) in foster care that are resistant to adoption.
- DFCS is training one adoption supervisor and one adoption specialist in each region on Family Finding and the 3-5-7 Model of preparing youth and families for adoption.
- "Wednesday's Child" is a television program which depicts children waiting for adoption. Representatives from several licensed child-placing agencies attend the taping to identify their families which might be appropriate for the child. Additionally, children are presented in the state's major newspaper's regular column on waiting children and are featured on the AdoptUSKids web site.

Placement Committee meetings that happen at the local, regional, multi-regional, and state level to match children in care who are free for adoption with a waiting family. Representatives from licensed child-placing agencies, including private adoption agencies, are invited to attend.

- **Item 30: Individualizing Services:** How well is the service array and resource development system functioning statewide to ensure that the services item 29 can be individualized to meet the unique needs of children and families served by the agency?

**Report SPAD 12: CFA in 30 Calendar Days:** Report Period 11/1/2014-4/30/2015:  
42.48% of children had a CFA completed within 30 days.

The FSP should be individualized, strengths-based, family-focused, and culturally responsive. The components of an FSP include: Family Team Meetings; reason for services; services provided; educational; medical; emotional behavioral issues; tasks, plans and goals; task evaluation; adoption discussion; barriers to permanent plan; mental health assessment; and family engagement.

The goals and tasks, set forth within the FSP shall be a direct reflection of the decisions made within the FTM. The parent(s)/caretaker(s) and the child shall sign this FSP upon agreeing to the listed goals and tasks within it. All efforts to engage parent(s) in developing the FSP must be well documented in MACWIS, whether successful or not.

- **Strengths and concerns regarding this factor:** Mississippi lacks substance abuse services to match the needs of DFCS clients.

### **Agency Responsiveness to the Community**

- **Item 31: State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR:** How well is the agency responsiveness to the community system functioning statewide to ensure that in implementing the provisions of the CFSP and developing related APSRs, the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child-family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

The Court Improvement Workgroup (CIP) meets monthly to address legal issues for implementing the requirements of the MSA, to identify training needs for the judiciary, to develop plans and goals to affect outcomes through the Youth Court, and to identify the breakdowns/barriers between DFCS and the court system. Members of the workgroup include: DFCS State and Regional Staff, the Attorney General's Office and staff from the AOC. The CIP Workgroup also discusses the status of ongoing CFSR/PIP progress and steps moving forward.

The CIP Workgroup works with AOC to coordinate Legal Stakeholders for Permanency for Children Summits across the state. Thirteen Regional Summits were held from October 2011-November 2013. These summits bring judges, guardians *ad litem*, prosecutors, court administrators, DFCS supervisors and field staff together to develop goals and plans for improving outcomes in areas needing improvement. Stakeholders are given an update on the CFSR/PIP progress, and feedback is always welcomed. The legal stakeholders are invited to become part of the Regional Implementation Teams to implement the Practice Model. Each Region follows up with progress on action steps at their Regional Implementation Meetings quarterly. The second round of summits will be held in four centralized locations across the state in October 2014.

Through collaboration with AOC, CIP members from DFCS participate in the Annual Youth Court Judges and Referees Conference and are asked to give an update of DFCS progress.

In February, 2013, a Child and Family Services Plan (5-Year Strategic Planning) Conference was held with approximately 125 participants including stakeholders such as service providers, Attorney General's Office representatives and the judiciary (including Mississippi Band of Choctaw Indian Chief Justice). Also, present were DFCS Senior Management, including Regional Directors or their representatives. Workgroups outlined the basis of the 5-Year Strategic Plan and goals were set.

(See Section I. Organizational Overview: F. Collaboration for more information.)

- **Item 32: Coordination of CFSP Services with Other Federal Programs:** How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population?
  - DFCS began a partnership with Magnolia Health (Magnolia) Plan January 1, 2013 to provide services for the foster children of Mississippi. The Mississippi Division of Medicaid contracted with Magnolia to provide services for foster children age birth to 19 years of age. Children over 19 will receive Medicaid direct services.
  - DFCS collaborates with MDHS Division of Early Childhood Care and Development (DECCD) to provide child care assistance. Child care assistance is provided through federal funds awarded to the state under the Child Care and Development Fund (CCDF) program. DECCD issues child care certificates to assist income-eligible parents with subsidized child care. Children in protective services or foster care are eligible to receive these funds for child care.
  - DECCD received a Maternal Infant and Early Childhood Home Visiting (MIECHV) grant for a voluntary comprehensive home visiting support program, called Healthy Homes Mississippi. The MIECHV grant began July 2010. All services are provided free of charge. The program began serving families in July 2012 in Claiborne, Copiah, Jefferson, Wilkinson, and in February of 2013 for Tunica, Coahoma and Sunflower Counties.

Oversight for this grant is now under the MDHS/Division of Family Foundation and Support (DFFS). The Prevention/Protection Unit of DFCS collaborates with DFFS by serving on The Mississippi Home Visiting Partnership Charter which is the MIECHV advisory board for Healthy Homes Mississippi. This advisory board consists of internal and external partners who meet quarterly to provide input regarding services to Healthy Homes Mississippi Home Visiting Program. This board additionally serves as the framework for collaboration among many professionals providing preventive services in the community. Collaborations between the

MIECHV advisory board and DFCS will continue to result in exploration and implementation of prevention focused activities.

- DFCS staff refers clients to the MDHS Division of Community Services (DCS) for a wide range of services for Mississippi's elderly, disabled and low income families with children. Services are provided through a network of 18 community Action Agencies, 1 Human Resource Agency and one local unit of government which covers all 82 counties of the state. DCS is entirely federally funded through the Community Services Block Grant, Low-Income Home Energy Assistance Program and Low-Income Weatherization Assistance Program. The Community Services Block Grant funds are used to provide services to help clients obtain an adequate education, secure and retain meaningful employment and adequate housing, pursue health and nutrition services, and access community resources and transportation. The Low-Income Home Energy Assistance Program provides financial assistance for eligible families to help pay the cost of home energy bills and other energy-related services. The Low-Income Weatherization Assistance Program funds are used to improve the conditions of eligible clients' homes by reducing home heating and cooling costs, and improving energy efficiency and ensuring health and safety.

### **Foster and Adoptive Parent Licensing, Recruitment and Retention**

- **Item 33: Standards Applied Equally:** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?

The recruitment and licensure of resource families in Mississippi is done at the regional level. Each of the 13 regions in Mississippi has a Resource Unit that includes a licensure supervisor, licensure specialists, an adoption supervisor, and adoption specialists. The Resource Unit staff work hand-in-hand to provide recruitment, pre-service training, in-service training and completion of home studies in order to license resource homes across the state. As of March 31, 2014, Mississippi has 1,396 licensed resource homes. Of that number, 41.98% are relative resource homes and 58.2% are non-relatives.

(See Appendix E: Foster and Adoptive Parent Diligent Recruitment Plan for more information.)

- **Strengths and concerns regarding this factor:**

DFCS policy requires that all placements including relatives must be licensed. Policy does allow for the child to be placed with relatives prior to licensure after a walk-through of the home, completion of a safety checklist, completion of local background checks, and a MACWIS check. If a child is placed with a relative prior to licensure, the home must be fully licensed within 90 days. Having such a high percentage of children in care who are placed with relatives is a strength and a concern. While the state places a high priority on maintaining family connections and

placing children with relatives, resource staff is faced with the challenge of licensing a high number of relatives within a limited time frame which leaves less time to devote to the recruitment and licensure of non-relatives. Though data from only two regions has been collected and analyzed so far, preliminary data from Mississippi's Diligent Recruitment Grant suggest that the resource units are struggling to license non-relative resource applicants timely. Resource applicants often wait for long periods of time before initial contact is made by resource staff; and long periods of time pass before applicants begin training.

- **Item 34: Requirements for Criminal Background Checks:** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

DFCS policy states, all resource parents and household members 14 years of age and older must undergo a screening process that includes a fingerprint-based criminal history check. All applicants or persons residing in the home who have been convicted of a crime or who have a pending indictment of any crime are evaluated in accordance to the Adam Walsh Child Protection and Safety Act of 2006 (P.L. 109-248) and Section 43-15-6 of the Mississippi Code to determine their fitness to provide services as a Resource Parent, prior to being licensed.

A monthly report captures Licensure Status of Resource Family Homes (SZRESL). This report does not capture criminal background screening, but it does capture the number of Relative and Non-Relative Resource Homes, according to policy, which must be screened (including a fingerprint background check) prior to being licensed.

**Report SZRESL:** As of 4/30/2015 there were a total of 1539 Licensed Resource Homes. (Non-Relative Resource homes-866 and Relative Resource Homes-673)

- **Strengths and concerns regarding this factor:**

Strengths: Fingerprint-based checks are available and conducted statewide via Live Scan systems. The electronic fingerprint live scan systems are designed for ease of use and for capturing high quality fingerprint images, helping to ensure superior acceptance rates and accurate criminal history information which increase the timeliness of return.

- **Item 35: Diligent Recruitment of Foster and Adoptive Homes:** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

DFCS policy requires that all placements including relatives must be licensed. Policy does allow for the child to be placed with relatives prior to licensure after a walk-through

of the home, completion of a safety checklist, completion of local background checks, and a MACWIS check. If a child is placed with a relative prior to licensure, the home must be fully licensed within 90 days. Having such a high percentage of children in care placed with relatives is both a strength and a concern. While the state places a high priority on maintaining family connections and placing children with relatives, Resource staff is faced with the challenge of licensing a high number of relatives within a limited time frame which leaves less time to devote to the recruitment and licensure of non-relatives. Though data from only two regions has been collected and analyzed so far, preliminary data from Mississippi's Diligent Recruitment Grant suggest that the resource units are struggling to license non-relative resource applicants timely. Resource applicants often wait for long periods of time before initial contact is made by resource staff; and long periods of time pass before applicants begin training.

Mississippi's diligent recruitment efforts include strategies to identify, prepare, and support resource families for children in the state's foster care system. Recruitment activities focus on locating families to foster and adopt children who are the most difficult to place: large sibling groups, sexually abused children, children who act out sexually or are sexually active, pregnant girls who plan to keep the baby in the foster home, children with severe behavioral problems, teenagers of both genders, and children with physical (including medically fragile), emotional or intellectual challenges. The populations of children hardest to place were identified by surveying DFCS staff and resource parents. The list of populations that are the focus of recruitment activities will be updated by September 2015.

In collaboration with the implementation of the Practice Model and the related Regional Implementation Team, each of the 13 DFCS regions is required to establish a regional recruitment team. The regional recruitment teams also serve as the Recruitment and Retention Sub Team of the Regional Implementation Team. Regions are encouraged to include community stakeholders and private providers on their recruitment teams. Teams and staff are trained on the use of targeted recruitment strategies and on how to use market segmentation data. Through the work of the Diligent Recruitment grant, Mississippi has identified the characteristics of resource parents who are best suited to parent children who are the hardest to place and is tailoring recruitment to reach people with these characteristics. The list of identified characteristics will be updated by September 2015. Mississippi is using zip code data to identify communities from which children are entering care to inform recruitment efforts. To date all 13 regions have established regional recruitment teams, been trained, and have submitted written recruitment plans to state office.

- **Item 36: State Use of Cross-Jurisdictional Resources for Placement:** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

Based on all the 1677 home studies received from another state, from May 1, 2013-April 30, 2014, to facilitate a permanent foster or adoptive care placement, 63 or 3.7% were completed within 60 days.

### **C. MISSISSIPPI CHILD AND FAMILY SERVICES REVIEW DATA PROFILE**

(See Appendix J: Mississippi Child and Family Services Review Data Profile)

## **III. PROGRAMS, SERVICES AND PROGRAM SUPPORT**

### **A. DESCRIPTION OF STEPHANIE TUBBS JONES CHILD WELFARE SERVICES**

#### **Foster Care Services and Kinship Care**

DFCS system seeks to protect and serve the best interest of children by strengthening and preserving families so children can live safely at home with their parents or relatives. When children cannot live safely at home, it is the goal of the foster care system in Mississippi to take care of and provide for them in a manner which ensures the safety, permanency and well-being of each child in foster care for as long as it is necessary for the child to remain in foster care.

Foster care is meant to be a temporary placement, and permanency planning begins immediately. At the time of placement, consideration is given so that if reunification fails or is delayed, the placement made is the best available placement to provide a permanent living arrangement for the child. This is done through concurrent planning – working both a primary permanent plan and a concurrent plan simultaneously (not sequentially). Another component of permanency planning is to maintain permanent connections with family and significant fictive kin while working toward reunification. If reunification fails, the concurrent plan can then be more readily accomplished so that the child can be discharged from foster care through custody to a relative or adoption in a timely manner.

#### Adoption and Foster Care Analysis Reporting System (AFCARS)

MS underwent an AFCARS review in September 2013 and began its AIP (AFCARS Improvement Plan) in July 2014. There were numerous elements in the foster care, adoption and general requirements that require modifications; notably around the foster care population, placements and overall data quality. There have been several iterations of AIP between MS and CB along with ongoing debates of financial feasibility of correcting all identified AIP elements since MS is currently developing a new SACWIS. Mississippi's CQI data reporting unit staff is working with MIS to address to needed modifications as quickly as possible. (See Appendix K: Mississippi AFCARS Assessment Review Improvement Plan)

DFCS continues strategies to improve and pass element #57 (Foster Care Discharge Transaction Date). DFCS field operations staff and CQI/Data reporting unit staff are working to help four (4) identified regions with high numbers of foster care discharge timeliness issues with data/case clean up, tracking of children exiting custody for timely follow up, and AFCARS training and guidance to help them sustain accurate, complete and timely data entry. Additional statewide

tracking of children entering and exiting custody is being done by CQI evaluation and monitoring staff for follow up to ensure timely date entry of custody start and end dates.

#### Termination of Parental Rights (TPR)

During FFY 2014, (October 1, 2013 - September 30, 2014) there were 606 individual TPR requests sent to the Attorney General's Office and 328 TPR judgments finalized by the Attorney General's Office. Judgments often include sibling groups.

### **GOALS FOR FFY 2015-2019**

**Goal 1:** Protect and serve the best interest of children in the Mississippi child welfare system by strengthening and preserving families so children can live safely at home with their parents or relatives.

- **Objective 1:** Provide a safe environment for the well-being of foster children.
  - **Intervention 1:** Monitor the expedited placement process to identify gaps in practice and assure the safety and well-being of children placed accordingly.
    - **Benchmarks and Timeframes:** Develop and implement a means to track and monitor required pre-screenings of expedited relative placements prior to a child being left in the home by December 2016.
      - A MACWIS report is currently in development to capture and report out this information.
    - **Benchmarks and Timeframes:** Expedited relative placements will undergo the full licensure process within 90 days of the child being placed in the home. 80% of pending expedited placements will be licensed within 90 days.
      - Until Fall 2014 expedited relative placements and unlicensed placements were tracked manually by state office staff. A manual report was created in Excel and posted to the DFCS Connection intra-agency web site to help regional directors, licensure supervisors, and county supervisors monitor unlicensed relative placements. Today that same information can be found in two new MACWIS reports on the DFCS P: Drive under "Placement Resources:" – SLS319 and SRESP. According to SLS319 as of 5.44% of expedited relative placements are beyond the 90 day licensure period.
  - **Intervention 2:** Increase the number of homes in each region that are qualified to and willing to accept foster children from the most difficult to place populations.
    - **Benchmarks and Timeframes:** Increase number of licensed resource homes statewide by 15% or from approximately 1400 licensed resource homes to 1600 by December 2016.



- **Intervention 2:** Increase the use of the Permanency Pact with youth ages sixteen (16) years and older who are presented at a Permanency Roundtable.
  - **Benchmarks and Timeframes:** Train Independent Living Specialists and Adoption Specialists to use Permanency Pacts with older teens presented at Permanency Roundtables by July 2016.
- **Measure:** Reduce incidents of maltreatment in care from .91% to .50% by December 2017.

**Goal 2:** Take care of and provide for the Mississippi foster children in a manner that ensures the safety, permanency, and well-being of each child in foster care for as long as it is necessary for the child to remain in foster care.

- **Objective:** Maintain a statewide plan for the recruitment of foster and adoptive families for the state's most difficult to place children in foster care.
  - **Intervention 1:** Dedicate a staff person in the DFCS state office to coordinate and support foster/adoptive parent recruitment throughout the state at the conclusion of the Diligent Recruitment Grant which ends September 29, 2015.
  - The MDHS 2016 legislative budget request included two PINs to dedicate to recruitment. Additional PINs were not funded, and the agency was ordered to reduce its current PINs by 68. If additional PINs are not allocated for staff to dedicate to recruitment, then this responsibility will be assigned to existing staff.
  - **Intervention 2:** Maintain regional recruitment teams and a written plan for the recruitment of foster and adoptive families for the most difficult to place children in foster care in each of the thirteen (13) DFCS regions on an ongoing basis.
    - **Benchmarks and Timeframes:** Receive, review, and monitor written recruitment plans from each region, coordinate the development of a state recruitment plan, and support recruitment activities throughout the state on an ongoing basis.
    - Each region submitted a written recruitment plan during this reporting period. Updated or revised plans will be required in the fall of 2015.
  - **Intervention 3:** Partner with licensed child-placing agencies to complete home studies for newly recruited resource families in order to expedite the licensure process for relative and non-relative resource applicants.
  - An RFP was released in May 2014 to solicit assistance from private agencies in completing home studies as a part of the licensure process. The RFP resulted in no contracts. An RFQ was released in December 2014 for the same purpose. Three vendors responded to the RFQ, and two were offered contracts: Mississippi Children's Home Services and Bethany Christian Services. Those contracts are currently active.

- **Benchmarks and Timeframes:** Increase number of licensed resource homes statewide by 15% or from approximately 1400 licensed resource homes to 1600 by December 2016.
- **Benchmarks and Timeframes:** Increase number of licensed resource homes statewide by 15% from approximately 1600 licensed resource homes to 1800 by September 2019.
- **Measure:** Foster youth will experience fewer moves in a foster care episode. Mississippi's placement stability will improve by 10% going up from 82% as March 2014 to at least 92% by October 2017.

**Goal 3:** The placement made for Mississippi foster children is the best placement available to provide a permanent living arrangement for the child.

- **Objective:** Develop a Kinship Care program to provide better support for the unique needs of relative caregivers and help relative caregivers identify and access needed services.
  - **Intervention 1:** Implement a separate pre-service curriculum for relative caregivers that will focus on issues and needs unique to relative caregivers.
    - **Benchmarks and Timeframes:** Develop and implement a separate kinship care curriculum for relative caregivers by December 2015.
  - **Intervention 2:** Partner with community stakeholders across the state to organize support groups for relative caregivers.
    - **Benchmarks and Timeframes:** Identify community stakeholders providing services to relative caregivers and ways DFCS can partner with them to offer support groups for relative caregivers by July 2016.

**Goal 4:** Maintain permanent connections with family and significant fictive kin while working toward reunification.

- **Objective:** Maintain and improve positive connections between children, their families, and their communities.
  - **Intervention 1:** Develop and implement policy to require all known information regarding the whereabouts of the birth parents and extended family be given to the youth aging out of the foster care system.
    - **Benchmarks and Timeframes:** Develop and implement policy by July 2016.
  - **Intervention 2:** Fewer foster youth will be placed in congregate care settings.

- **Benchmarks and Timeframes:** By September 2018, Mississippi will decrease the number of foster youth in a residential setting from 12% to less than 10%, and maintain less than 10% on an ongoing basis.
- **Measure:** As of 02/28/14, approximately 12% of foster youth were placed in a residential setting. Mississippi will decrease that number to less than 10% by September 2018 and will maintain it at less than 10% on an ongoing basis.

### Licensure of Group Homes and Therapeutic Care

Out-of-home care in either a family foster home, relative placement or group home care must provide for the safety, permanency and well-being of the child. As of March 2014, there are 5 therapeutic group home providers, 5 shelter providers, 6 private agencies that recruit and license therapeutic foster homes, 5 regular group home providers and 1 private agency that recruits and licenses regular foster homes. Shelters and regular group homes are only licensed by DFCS. Therapeutic providers, however, are licensed by DFCS and must also be certified by the Mississippi Department of Mental Health (DMH).

Children with a diagnosis of a significant medical, developmental, emotional or behavioral problem often require a different level of care with special needs and considerations. Over the next five (5) years, the agency will work toward the accomplishment of several goals designed to improve the quality of therapeutic placements and to better provide for the individual and specific needs of each child while working toward a plan for permanency for that child.

#### GOALS FOR FFY 2015-2019

**Goal 1:** Out-of-home care in either a family foster home, relative placement, or group home will provide for the safety, permanency, and well-being of the child(ren) in foster care.

- **Objective 1:** Placement stability will be improved.
  - **Intervention 1:** Match the child(ren)'s needs with the appropriate home/facility in keeping with COA standards.
    - **Benchmarks and Timeframes:** By October 2019, placement stability will increase from approximately 82% to 92%.
    - For the rolling 12 month period ending April 30, 2014, 81.50% of children in care had 1 to 2 placements.
  - **Intervention 2:** Refine the match process by which state office placement staff as well as county and regional staff first consider the individual needs of children that require therapeutic services and the most appropriate placement when making a placement.

- Effective February 1, 2015, the supervision of therapeutic placements in state office was transferred to the Resource Development Unit within DFCS. Resource Development has established a new unit, The Placement and Treatment Coordination Unit, to work with field staff to find appropriate placement and treatment for children in foster care. This unit has merged with the therapeutic placements unit and will also be handling all therapeutic foster care referrals.
  - **Benchmarks and Timeframes:** By October 2019, the number of children placed in group home settings will be reduced by 15% or from approximately 600 youth placed in group home settings to approximately 510 youth placed in a group home setting statewide.
  - As of 04/30/2015, 12.39% of youth in foster care or 555 youth were placed in a residential setting according to MACWIS report SZ0510.
- **Objective 2:** The number of therapeutic placements available for children in foster care will be increased.
  - **Intervention 1:** Encourage the development of group homes and therapeutic facilities in strategic geographical locations through the RFP and contracting process so that placements might be more readily available within a fifty (50) mile radius of the child(ren)'s community of origin.
    - **Benchmarks and Timeframes 1:** By October 2019, the percentage of children placed outside of a fifty (50) mile radius of their community of origin will decrease from approximately 20% to 15%.
    - **Benchmarks and Timeframes 2:** By January 2017, we will identify three (3) targeted locations in the state for development of new therapeutic placement services.
  - **Intervention 2:** Partner with DFCS Resource Development Unit, the Mississippi Department of Mental Health, and the Division of Medicaid to increase the number of available therapeutic placements for children in foster care.
    - **Benchmarks and Timeframes:** By October 2019, the number of individual therapeutic foster families will have increased by 30% from approximately 260 homes to 325 homes.
    - The implementation of performance-based contracting (PBC) will have a direct impact on these interventions. It is expected that PBC will direct the development of new therapeutic resources including location, types of services, and number of therapeutic resource homes. It is unknown at this time how this will impact this goal and interventions. Executive leadership from MDHS began during this reporting period to meet with peers from

the Department of Mental Health and Division of Medicaid to address the lack of therapeutic services throughout the state.

- **Measure 1:** Placement stability will increase from approximately 82% to 92%.
- **Measure 2:** The number of children placed in group home settings will be reduced by 15% or from approximately 600 youth placed in group home settings to approximately 510 youth placed in a group home setting statewide.
- **Measure 3:** The percentage of children placed outside of a fifty (50) mile radius of their community of origin will decrease from approximately 20% to 15%.
- **Measure 4:** We will identify three (3) targeted locations in the state for development of new therapeutic placement services.

**Goal 2:** Children with a diagnosis of a significant medical, developmental, emotional, or behavioral problem receive higher levels of care with special needs and considerations.

- **Objective 1:** The quality of services to children in therapeutic foster care will be improved.
  - **Intervention 1:** Collaborate with Department of Mental Health and DFCS Resource Development Unit to improve therapeutic services and conduct work groups to make recommendations for training related to the provision of therapeutic services to foster children.
    - **Benchmarks and Timeframes:** By October 2015, review and make recommendations for improving the training for therapeutic group home staff and therapeutic foster parents in conjunction with Mississippi Department of Mental Health (DMH), frontline caseworkers, private providers, and youth in care. Issue an updated MDHS/DFCS Licensing Requirements Manual for Residential Child Caring Agencies and Child Placing Agencies. Revisions will be completed and in effect by September 30, 2017.
  - **Intervention 2:** Convene regular meeting between Congregate Care and Foster Care Review.
    - **Benchmarks and Timeframes:** Identify means by which state office licensure staff as well as county and regional staff to develop a process by which observations on the quality of the therapeutic environment and services can be shared with state office licensure staff and MDMH on a regular basis. Ongoing.
  - **Intervention 3:** Assist the providers and other partners with obtaining trainings and in-services in the areas of therapeutic programming, licensing requirements,

providing group care services, and submission of documentation, as well as permanency planning.

- **Benchmarks and Timeframes:** Conduct DFCS licensure standards in-service trainings with the providers and other partners at least two (2) times each year. Ongoing.
- In September 2014 the DFCS Congregate Care Director resigned, and a new director was not hired until January 2015. The new director has been on staff for four months and is still acclimating. There is no progress to report for Interventions 1, 2, & 3 of Objective 1, Goal 2.
- **Intervention 4:** Establish a work group made up of DFCS staff, regional workers, private providers, and other state agencies for the purpose of reviewing and making recommendations for revising the licensure standards.
  - **Benchmarks and Timeframes:** By October 2015, issue an updated MDHS/DFCS Licensing Requirements Manual for Residential Child Caring Agencies and Child Placing Agencies. Revisions will be completed and in effect by September 30, 2017.
  - It is uncertain at this time if the implementation of performance-based contracting will create a need for new or different licensure standards. This intervention will be delayed. The workgroup will not be organized until the fall of 2015.
- **Measure 1:** Department of Mental Health and DFCS Resource Unit work group will convene at least twice per year.
- **Measure 2:** Will issue an updated MDHS/DFCS Licensing Requirements Manual for Residential Child Caring Agencies and Child Placing Agencies. Revisions will be completed and in effect by September 30, 2017.
- **Measure 3:** Two in-services will be conducted on DFCS licensing standards two times per year.

## **B. DESCRIPTION OF PROMOTING SAFE AND STABLE FAMILIES**

### **Comprehensive Family Support Services Program (CFSSP)**

The Family Preservation Program was renamed to provide both Family Preservation Services and Family Reunification Services in the year 2010. This program is now called the Comprehensive Family Support Services Program (CFSSP).

A contractual agreement with Mississippi Children's Home Services (MCHS) began October 1, 2010, and will end September 30, 2014. This contract provides Family Preservation, Family

Reunification and Family Support Services through the CFSSP utilizing Promoting Safe and Stable Families (PSSF) funding.

Beginning with the 2015-2019 Child and Family Services Plan, the CFSSP will deliver an array of comprehensive, intensive treatment and wrap-around services to children and families in the service caseload of DFCS. Service delivery will occur primarily in the family home setting or other locations based on the identified needs of the children and families. Examples may include, but are not limited to: relative home, foster home, and school setting. The Provider must meet the criteria, staff credentials, and agency requirements as outlined in their contract for CFSSP, and shall design a program to include intensive and prevention services.

#### Program Overview

CFSSP provides Family Preservation and Family Reunification services and sets forth conditions under which children may be safely maintained or safely returned to their homes. Safety for these children and youth is paramount.

The primary goals are two-fold: 1) To serve as an alternative to the unnecessary placement of children in out-of-home care; and 2) To promote timely reunification for children who have been removed from their homes. Families whose children are at imminent risk of placement or children who have been recently removed and placed outside of their home should receive these services. CFSSP provides Family Preservation and Reunification services that are accessible, effective and culturally appropriate. These services build on existing strengths and identify individualized needs of the client and families. Services will be family-driven and youth-guided, planned around the availability and schedule of the family, and will primarily be provided in the home.

#### Explanation of Services

The Program will provide short-term (4 to 8 weeks) intensive in-home services to serve as an alternative to the unnecessary placement of children in out-of-home care (Family Preservation). It will provide intensive in-home services (12 to 16 weeks) that may include preparation, supervised visitation, transitional and reunification services to promote timely reunification for children who been removed from their homes (Family Reunification). CFSSP will offer family support services to further strengthen and support the families served through both Family Preservation and Family Reunification.

Each team includes a clinical staff person and case manager. The number of cases served by CFSSP is dependent on the cases referred from DFCS.

The primary criteria for a referral to the CFSSP will be a family where the child(ren) or youth served by MDHS are at imminent risk of removal from the home for a placement in a standard or more restrictive foster care placement, Family Preservation, or the child(ren) must have been removed from their home for a period up to six months but not to exceed eight months with the goal of timely reunification, (Family Reunification).

- Referral Criteria includes:

- All referrals must be submitted by DFCS workers, approved by the MDHS CFSSP Program Coordinator, and assigned to the CFSSP Supervisors.
- The child or youth must be between the ages of birth to twenty-one (21) and served by DFCS.
- The child/youth must be at risk of removal from the home setting for a placement in a standard or more restrictive foster care placement (family preservation).
- The child(ren) must have been recently removed from their home for a period not to exceed eight months with the goal of timely reunification (Family Reunification).
- Families must voluntarily agree to participate in the program.
- Description of Services:
  - Once the referral is accepted, CFSSP staff will contact the family within twenty-four (24) hours.
  - Teams will be available to the families 24/7 for crisis intervention services once admitted into program.
  - Services provided must address the cause(s) for the child entering custody or reasons the child is at risk for an out-of-home placement. CFSSP services must be individualized and guided by the goals and activities of the FSP.
  - The services provided by the team include, but are not limited to:
    - The clinical staff person will provide services based on assessed needs (i.e., assessments, self-control skills, problem solving, advocacy, behavior management and intervention, psycho-education, individualized parenting, skill building, etc.)
    - The case manager will provide case management services (i.e., referrals for basic needs including health and developmental services, access to formal and informal resources, linkages to community services and activities, mediation between school and family, transportation, life skills, etc.)
  - Flex funds will be available per family to assist with immediate and concrete needs when other funding sources are not available and to utilize non-traditional services as appropriate to the case.
  - Services will be family-driven and youth-guided. Services will be provided around the availability and schedule of the family and will primarily be provided in the home.

#### Intensive In-Home/Reunification

CFSSP provides intensive reunification services which began on October 1, 2010. The primary service is to families with children who have not been out of the home longer than 8 months. The goal is to promote timely Reunification for children who have been removed from their homes. The service provides intensive in-home services for 12 to 16 weeks that may include preparation, supervised visitation, transitional and reunification services.

#### Family Support Services

Beginning October 1, 2011, MCHS also provided family support services through the CFSSP. The services provided under this component have been brief counseling and parenting as well as resource linkage.

Data on Families 10/1/13-9/30/14 UPDATE:

# Family Preservation Families Admitted = 342  
# Family Reunification Families Admitted = 172  
Total Families Admitted = 514

# Family Preservation Children Admitted = 942  
# Family Reunification Children Admitted = 404  
Total Children Admitted = 1,346

### Assessment

Assessments will be completed with the family based on identified needs during the first 2 weeks of service and as needed during the remainder of the service period. Each team is provided multiple and various instruments available for more in depth assessments based on individualized needs of the family. All assessments completed are documented in an Assessment Summary Note by the professional or paraprofessional.

Surveys: At intake and discharge, the client will be provided a survey to rate the referral process (intake) and service delivery (discharge). These surveys will be delivered by a team member or mailed to the client. There will be a self-addressed stamped envelope that is addressed to the MDHS State Program Coordinator for that region. The client will be asked to fill out the survey and mail the survey at their convenience or the worker may take the sealed survey and mail on the client's behalf. These surveys are confidential, anonymous, and voluntary. In addition, a worker survey is provided for DFCS county staff to rate the overall satisfaction with the CFSSP services at discharge.

These assessments are conducted to provide quality assurance for the program and identify areas of improvement.

### **GOALS FOR FFY 2015-2019**

**Goal 1:** Continue providing Family Preservation, Family Reunification and Family Support services to all 82 counties of the state.

- **Objective 1:** Draft a Request for Proposal (RFP) beginning in 2015 to address the type of services needed in each county across the state;
  - **Intervention 1:** Draft an RFP to indicate the continued need for this service, and the expanded areas needing service prior to the fiscal year, 2016, and contract with a qualified sub grantee to provide the services outlined in the RFP.
    - **Benchmarks and Timeframe:**

- Within 1 year, the number of counties served will increase from 52 counties to 60 counties.
  - Within 3 years, the number of counties served will increase from 52 counties to 76 counties.
  - Within 5 years, the number of counties served will increase from 52 counties to 82 counties.
- **Intervention 2:** At the end of year three (3), if a qualified sub grantee has not performed according to the scopes of services in the contract, DFCS will make a determination of how best to utilize the Promoting Safe and Stable Families (PSSF) funding to preserve, reunify, and support families in our state.

▪ **Benchmarks and Timeframe**

- Within year one (1), if the sub grantee has not performed according to the scopes of services in the contract, a Performance Improvement Plan will be initiated.
  - Within year two (2), if the sub grantee has not performed according to the RFP, an evaluation as to the best way to utilize the Promoting Safe and Stable Families (PSSF) funding to preserve, reunify, and support families in our state will be the focus.
- **Outcome:** It is expected that the number of counties will increase to provide coverage statewide.
- **Measure:** 92% of the 82 counties in the state will have Family Preservation/ Family Reunification services by 2018.

**Goal 2:** Increase the number of families and children served.

- **Objective 1:** A Request for Proposal (RFP) will be drafted beginning in 2015 to address the type of services needed in each county across the state.
- **Intervention 1:** Draft an RFP to indicate the continued need for this service, and the expanded areas needing service due prior to fiscal year 2016. Contract with a qualified sub grantee to provide the services outlined in the RFP, with the projected number of families and children to be served each year.

▪ **Benchmarks and Timeframe:**

- Within 2 years, the number of families served will increase from 495 families to 600 families.
- Within 4 years, the number of families served will increase from 495 families to 800 families.

- **Intervention 2:** At the end of year 5, if a qualified sub grantee has not performed according to the scopes of services in the contract, an evaluation will be conducted to determine how best to utilize the Promoting Safe and Stable Families (PSSF) funding to preserve, reunify, and support families in our state.

▪ **Benchmarks and Timeframe:**

- Within year one (1), if the sub grantee has not performed according to the scopes of services in the contract, a Performance Improvement Plan will be initiated.
  - Within year two (2), if the sub grantee has not performed according to the RFP, an evaluation as to the best way to utilize the Promoting Safe and Stable Families (PSSF) funding to preserve, reunify, and support families in our state will be the focus.
- **Outcome:** Increase the number of families and children served.
  - **Measure 1:** 75% of the projected 800 families will be served through the Family Preservation/Family Reunification services by 2017.
  - **Measure 2:** 100% of the projected 800 families will be served through the Family Preservation/Family Reunification services by 2019.

### Adoption Services

Each of the thirteen DFCS Regions in Mississippi has a Resource Unit made up of Licensure Specialists and Adoption Specialists who focus on the recruitment and retention of foster and adoptive parents at the county and regional levels. Each region has both a Licensure Supervisor and an Adoption Supervisor and at least five (5) Licensure Specialists and five (5) Adoption Specialists. All of Resource Unit staff (both Licensure and Adoption) work hand-in-hand to provide recruitment, pre-service training, in-service training and completion of home studies in order to license resource homes across the state. Adoption Specialists also work with all children/youth in care whose permanent plan includes adoption.

#### GOALS FOR FFY 2015-2019

**Goal 1:** The children/youth in foster care, birth parents, and prospective adoptive parents experience easier transitions from foster care to adoption.

- **Objective 1:** Provide pre-adoption services to prepare children, birth parents, and prospective adoptive parents in transitioning children/youth from foster care to adoption.
  - **Intervention 1:** Refine Placement Committee Process to improve child-specific recruitment for children who are free for adoption but have no identified adoptive placement.
    - **Benchmarks and Timeframes:** Develop protocol for engaging private adoption agencies in child specific recruitment by December 2015.
    - **Benchmarks and Timeframes:** Refer at least 10 youth each year between 2016-2019 to private adoption agencies and Wendy's Wonderful Kids partners for the purpose of child-specific recruitment.



- **Objective 2:** Transition children/youth from foster care to adoption in a timely manner.
  - **Intervention 1:** Continue to provide training, supplies, and technical assistance to Adoption Specialists and front line caseworkers on the importance of completing Life Books for all children with whom they are assigned to work.
  - The Adoption Unit in State Office continues to provide supplies and technical assistance to the regions for Life Books.
    - **Benchmarks and Timeframes 1:** Hold at least 2 trainings per year between 2015-2019 for Adoption Specialists, frontline caseworkers, and resource parents on using Life Books to help prepare children and youth for adoption. Trainings may be online or face-to-face.
    - During this reporting period, the DFCS Professional Development Unit provided quarterly life book workshops for staff in 3 different locations across the state on 3 different dates. Other life book workshops were provided upon request.
    - **Benchmarks and Timeframes 2:** Submit at least one newsletter article each year to the DFCS Professional Development newsletter about Life Books between 2015-2019.
  - **Intervention 2:** Hold an annual Adoption Conference to cross train adoption and independent living staff that focuses on transitioning teens from foster care with strong permanent connections through permanency pacts or adoption with post-adoptive and independent living services in place.
    - **Benchmarks and Timeframes:** Independent Living workers (both DFCS and private agency) and adoption specialists from across the state will be trained on finding permanency for older youth in care. This training will occur at least once per year between 2015-1029.
    - No progress to report on this item at this time. This item was initially included in the RFP for adoption support services. However, it was negotiated out of the scope of services in order for the vendor to meet the budget. Later when the Adoption Director announced her intent to retire, priority was given to developing the leadership training/statewide foster parent association and outsourcing pre-service training for resource parents. DFCS intends to outsource this item at future date.

**Goal 2:** Provide resource families with the ability to meet the permanency needs and special needs of youth in foster care.

- **Objective 1:** Identify and prepare resource families who can meet the permanency needs and special needs of the youth in care.

- **Intervention 1:** Identify and develop foster and adoptive parents as leaders for the purpose of starting a statewide foster and adoptive parent association. Connect the state association to a national association.
  - **Benchmarks and Timeframes:** By December 2015, host a resource parent leadership development event.
  - During this reporting period, one statewide meeting was held with representatives from resource parent support groups across the state. Just prior to this reporting period, leadership training was held with representatives from various support groups in the state. Ongoing technical assistance has been provided during this reporting period to help support groups formalize their structure including filing Articles of Incorporation and applying for 501(c)3 status.
- **Intervention 2:** Identify and develop foster care alumni as leaders in helping develop a statewide foster care alumni association for the purpose of helping targeted and child specific recruitment, and identify and address systemic barriers to permanency.
  - **Benchmarks and Timeframes 1:** Identify former foster youth willing to participate in a state foster care alumni association by July 2016.
  - **Benchmarks and Timeframes 2:** Host first meeting of the state foster care alumni association by September 2016.
  - **Benchmarks and Timeframes 3:** Hold first training and strategy session with foster care alumni by February 2017.
  - DFCS is working this Intervention 1 and Intervention 2 as a joint initiative. Support groups are encouraged to identify and include foster care alumni in within their group and in leadership roles. A need has been identified to coordinate this effort with those of the regional Teen Advisory Boards.

**Goal 3:** Private child-placing agencies and DFCS staff will act as full partners in expanding the Teen Adoption Initiative and in serving children/youth in adoptive placements.

- **Objective 1:** Expand the Teen Adoption Initiative to promote the adoption of older teens in the state's custody.
  - **Intervention 1:** Train at least twenty-five (25) staff from private agencies and an additional twenty-five (25) DFCS staff in the 3-5-7 Model of preparation and assessment of the readiness of foster youth and resource families for adoption by October 2017.

- **Benchmarks and Timeframes:** By December 2015, each region will have dedicated staff to be teen-focused recruiters to assist in transitioning youth who are free for adoption and do not want to be adopted into permanent family settings.
    - **Benchmarks and Timeframes:** Develop protocol for engaging private adoption agencies in child specific recruitment by December 2015.
- **Objective 2:** Include private child-placing agencies as full partners in serving children and youth in adoptive placements.
  - **Intervention 1:** Expand DFCS child specific recruitment efforts through photo listings and web-based recruitment. Revitalize efforts to effectively use AdoptUSKids as a recruitment tool to match foster children who are free for adoption with adoptive families.
    - **Benchmarks and Timeframes 1:** Designate staff in each region to upload and maintain information on the AdoptUSKids web site by December 2015.
    - **Benchmarks and Timeframes 2:** Increase the number of Mississippi foster children featured on the AdoptUSKids web site by 25% by October 2016. Compare to the number of Mississippi children featured on AdoptUSKids on October 1, 2014.
    - In the first two quarters of the contract with 200 Million Flowers (October 2014-April 2015), an additional 28 youth were photographed for the heart gallery. There are currently 41 youth featured in the gallery. The gallery was displayed in 10 different locations across the state, and 200 Million Flowers processed 58 inquiries. 200 Million Flowers is also responsible for posting Mississippi youth on the AdoptUSKids web site. There is an increase of 30 Mississippi youth currently posted on AUK.
  - **Intervention 2:** Provide training and technical assistance to all private agency staff that choose to use the S.A.F.E. home study format.
    - **Benchmarks and Timeframes:** Offer one S.A.F.E. training per year that is open to private agency staff in 2015-2019.
    - DFCS continues to invite private agency staff to attend S.A.F.E. home study trainings sponsored by the Department. Private agency staff may attend at no cost to the private agency. Since July 1, 2014, DFCS has included private agency staff in two S.A.F.E. home study trainings. DFCS contracts with the Consortium for Children to provide two full S.A.F.E. home study trainings each year, three refresher trainings, and ongoing coaching calls.

- **Measure:** The percentage of foster children state-wide who were discharged upon finalization of an adoption that will have the adoption finalized within twenty-four (24) months of the latest removal will increase from 20% to 26% by October 2017 and up to 32% by October 2019.

### **C. SERVICE DECISION-MAKING PROCESS FOR FAMILY SUPPORT SERVICES**

MDHS contracts with various agencies to provide programs focusing on support services to high risk families through respite care and supervised visitation. These providers offer various programs and services to children of single parents including: resource referrals, parent education, one-on-one case management, home based instruction, supervised visitation, teen parent support, support groups, community education, and counseling. The CFSSP program uses a portion of family support services funding for their contract with Mississippi Children’s Home Services (MCHS).

(See Section III. Programs, Services and Program Support: B. Description of Promoting Safe and Stable Families-Comprehensive Family Support Services Program, and Section XI. CAPTA State Grant: D. Community Based Child Abuse and Prevention Grant-Family Support Services for more information on Family Support Services.)

### **D. POPULATION AT GREATEST RISK OF MALTREATMENT**

DFCS relies upon compliance with the MS CODE 43-21-353(1) regarding mandatory reporters of abuse or neglect for notification that abuse or neglect is suspected. This statute requires attorneys, physicians, dentists, interns, residents, nurses, psychologist, social workers, family protection workers, family protection specialists, child caregivers, ministers, law enforcement officers, public or private school employees or any other person having reasonable cause to suspect that a child is a neglected child or an abused child to make an oral report by telephone or otherwise, and followed as soon thereafter as possible by a report in writing to the MDHS.

DFCS compiled quantitative and qualitative data from July 2012 to July 2013 concerning all Abuse/Neglect/Exploitation (ANE) allegations involving children in foster care. DFCS collected and analyzed data from MACWIS reports, ANE intake reports, ANE investigations and Serious Incident Reports involving child fatalities or near deaths. Similar data was also gathered from incidents of severe maltreatment of non-custody children.

The data has shown that child maltreatment occurs across socio-economic, religious, cultural, racial, and ethnic groups. Although no specific causes definitively have been identified that lead to abuse or neglect of a child, data collected by DFCS has shown a number of risk factors commonly associated with maltreatment in Mississippi. These risk factors include:

- Families with a history of substance abuse, untreated mental illness or domestic violence present a greater risk of maltreatment for children. In a targeted review of severe maltreatment cases, at least one of these factors was present in every single instance.

- Special needs children are at a greater risk of maltreatment. During the period of review, 61% of the substantiated allegations of ANE involved a child with a physical, cognitive or emotional disability.
- Children between the ages of 0 to 5 may be at a greater risk for maltreatment. One-third of all reported allegations of maltreatment reviewed involved children that have not yet reached their sixth birthday.
- Societal attitudes toward corporal punishment consistently appear in the data reviewed. The use of corporal punishment is strictly prohibited with any child placed in DFCS custody; however, over one-third of all the reported ANE allegations involved corporal punishment. Although the use of corporal punishment does not automatically constitute maltreatment, families who employ this method are at a greater risk of pushing discipline into the realm of abuse.

Children within families and environments in which these factors exist have a higher incidence of reported maltreatment.

DFCS has developed specialized training addressing the three most common factors of maltreatment: substance abuse, untreated mental illness and domestic violence. Level 3 Supervisory training focuses on improving risk assessments for children under age 5, and whose families have a history of these factors. Practice Model Coaches have received the training, and are coaching staff in the field.

Unsafe sleep environments continue to be a common denominator in many of the deaths of infants under one year of age. The DFCS Prevention/Protection Unit utilizes prevention resources to combat sleep-related risks to children with public awareness campaigns and by educating professionals serving families with children of this age.

In 2013, DFCS used Community Based Child Abuse Prevention Grant (CBCAP) funds to purchase 425 Pack-n-Plays (cribs) to be issued to needy families in Mississippi. A Memorandum of Agreement was signed with the Mississippi SIDS Alliance, which issues the cribs as the cribs are requested by the DFCS county staff. When delivering the cribs, DFCS staff use that time to educate the caretakers about safe sleep practices.

The Individuals with Disabilities Education Act (IDEA) seeks to ensure services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities.

Infants and toddlers with disabilities (birth-2) and their families receive early intervention services under IDEA Part C. Children and youth (ages 3-21) receive special education and related services under IDEA Part B.

## **E. SERVICES FOR CHILDREN UNDER AGE FIVE**

### **Achieving Permanency**

In 2013, 45.9% of children who entered foster care were under the age of five. DFCS policy requires that the child's age and developmental stage must be considered when developing the visitation plan for the child and his or her family. Mississippi uses concurrent planning regardless of the age of the child to facilitate permanency for children in foster care. Mississippi's family centered practice uses an approach to concurrent planning that involves the immediate and ongoing implementation of strategies designed to assure the healthy development of the child through a sense of continuity and connectedness. Services provided to young children in care include but are not limited to early intervention services, medical and dental services as well as immunizations.

In 2013, 73.6% of Mississippi's foster children exited care by reunification within twelve months. However, once adoption is added to a child's permanent plan an adoption specialist is assigned to the case and regular adoption status meetings are held. Weekly adoption status meetings are required for infants up to twelve months of age until permanency is achieved. In 2008 Mississippi adopted a dual licensure process for foster and adoptive resource homes. Resource families are recruited and trained to work with DFCS toward the goal of reunification and maintaining family connections. If reunification occurs, the resource family can act as a permanent support for the family. If the child is freed for adoption, the resource family often commits to adoption and is in a position to maintain some ties to the birth family. For children who are free for adoption but without an identified adoptive placement, Adoption Status meetings will be held monthly for children over twelve months of age and weekly for children twelve months of age and younger. Typically, by the time a child under the age of five is freed for adoption, the adoption finalization can take place within 60-90 days. Of the children adopted in 2013, 48.7% were under the age of 5.

(Data is from the Child Welfare Outcomes Report Data on the Children's Bureau web-site)

### **Resource Development for Five and Under Population**

Resource Development continues to work toward enhancing the service array for our children and families, and specifically for the five and under population through enhancing the percentages of the physical assessment within 72 hours of coming into foster care and 30 days for the comprehensive physical assessment and all follow-ups required; completion of mental health assessments within 30 days of entry to foster care for all children four or over to include any recommended follow-ups required. Dental exams for new foster children ages three and older are required within 90 days.

Foster Care Review-SPAD27m2: Dental Exam for Children Turning 3 and Routine Exam- Report Period: 4/01/2014-09/30/2014: During this report period, 69.87% of children turning three years old had a timely dental examination. (Foster Care Reviews occur every six months; these reports do not reflect the population of children who were not in custody for at least six months.)

### **Training and Supervision of Caseworkers and Resource Parents**

Training and Supervision of Caseworkers is provided through several means beginning with 270 hours of pre-service training and on-the-job training, which addresses age groups and time frames for comprehensive assessments, service delivery, reunification to occur or proceed to another permanent plan such as adoption or guardianship. Practice Model coaches are available to assist workers with the Comprehensive Family Assessment, Family Team Meeting and implementing services to prevent removal or to facilitate reunification.

Resource Parents also receive PATH training prior to becoming a resource parent and DFCS policy outlines the protocol for preventing disruptions and providing respite services. Additional training is provided to resource parents when a child requires special medical treatment or higher level of care and supervision.

### **Summary of Children Currently in Custody by Age, Race and Sex**

DFCS tracks children in custody and their demographics through the MWZCCURS, Summary of Children Currently in Custody by Age, Race and Sex for the date range of 10/01/2013 – 09/30/2014 report. This is a standard monthly batch report. If requested, these data can be run for a specified time period. This report is designed to capture all children currently in custody from ages 0 and older. This report is also available by county with the same information.

Below is the report for October 1, 2013 through September 30, 2014, which indicates the demographics of children currently in custody under the age of five years old for that period as follows:

	White	Unknown Race	Asian	American Indian	Black	Hawaiian	Total
Male	646	18	3	3	486	2	1158
Female	588	33	3	5	472	0	1101
<b>Total</b>	<b>1234</b>	<b>51</b>	<b>6</b>	<b>8</b>	<b>958</b>	<b>2</b>	<b>2259</b>

The total number of children in custody for the period October 1, 2013 – September 30, 2014 was 7152; 3538 males and 3614 females

#### **F. SERVICES FOR CHILDREN ADOPTED FROM OTHER COUNTRIES**

Post-Adoption Services in Mississippi are currently available through a sub-contract with Southern Christian Services for Children and Youth (SCSCY), Partners in Permanency (PIP) program. These services include Crisis Management, Information and Referral, Ongoing Training, Support Groups, Respite Care, Educational Advocacy, and Buddy Families. All services provided through this sub-grant are available for **all adoptive families** in Mississippi whether the adoption was a private adoption, out-of-state adoption, international adoption or domestic adoption from foster care. There is also a public awareness component of this sub-grant which requires that SCSCY raise awareness of the availability and accessibility of these services throughout the state. The state will continue to provide these services for the next five years through a private provider on contract with DFCS.

#### **G. ALLOCATION OF TITLE IV-B SUBPART 2 FUNDS**

10% of the federal share of costs allowed for administrative costs will not exceed \$418,612. Administrative costs will consist of those expenses incurred for DFCS Adoption and Resource Development staff housed at State Office.

The Adoption Unit is responsible for providing administrative support to resource workers and their supervisors in each of the State's thirteen regions, which includes: (1) process consent to Adopt & Affidavit requests; (2) process attorney letter requests for legal documents; (3) process monthly adoption assistance payroll; (4) process legal fees for payment for adoption finalizations; (5) maintain adoption website; (6) coordinate segments with local news station for Wednesday's Child (news segment featuring foster children seeking adoptive families); (7) maintain tracking system for all children who are free for adoption; (8) review Termination of Parental Rights (TPR) packets for submission to Attorney General's Office or presentation to the Direct Advisory Committee for Permanency Planning (DACOPP); and coordinate Adoption events.

The Resource Development Unit is responsible for enhancing the service array for children and families throughout the state to: (1) ensure children entering the foster care system receive physical, comprehensive physical and mental health assessments timely; (2) ensure dental exams occur timely for foster children ages three years and older; (3) develop a directory of resources for social workers to connect families and children to services within their communities; (4) ensure educational needs are being met; and (5) provide interpreter services and/or support to social workers statewide.

90% of the federal share of costs from Title IV-B, Subpart 2, funds will be allocated as follows: 30% Family Preservation, 20% Family Support, 20% Time-Limited Reunification, and 20% Adoption Promotion and Support.

\$2,930,288 of the federal share of costs will be allocated to fund the Comprehensive Family Support Services Program (CFSSP) to deliver an array of comprehensive, intensive treatment and wrap-around services to children and families involved in prevention, protection or foster care caseloads serviced by DFCS case workers. This program encompasses Family Support Services, Family Preservation Services and Time-Limited Reunification Services based on the identified needs of children and families to ensure the safety, permanency and well-being of children statewide.

DFCS will make every effort to ensure a minimum of 20% will be allocated to Family Support Services and Time-Limited Reunification; however, the number of clients served for each category is dependent upon the number of referrals received from the local field offices based on the needs of the children and families within their local communities. As a result of the referral based system, client needs tend to fluctuate from year-to-year and DFCS cannot determine what those needs will be in advance. Based upon prior year trends, DFCS anticipates an increased demand for Family Preservation Services which could reduce the demand for clients in need of Family Support Services and Time-Limited Reunification Services.

\$837,225 of the federal share of costs will be allocated to fund the Adoption Promotion and Support Services Program which provides adoptive families an opportunity to participate in support groups and intensive in-home services to prevent disruptions. These services are provided to clients through a sub grant agreement between DFCS and service providers selected through the State's procurement process. These funds are also utilized to host an Adoption Celebration Picnic in conjunction with various community partners.

In addition to the services referenced above, DFCS is utilizing Adoption Promotion funds to provide a dedicated worker, the Teen Adoption Recruiter to work with teenage youth who are free for adoption and experienced multiple placements. This Adoption Worker will work with a specific population of foster children, teens, free for adoption with no identified adoptive placement and who are resistant to adoption. This dedicated Teen Recruiter will engage youth, placement resource, staff, and community to seek permanency for each youth with a goal of finalizing an adoption prior to aging out of foster care.

The State will provide \$1,395,375 in non-federal matching funds for administrative and program costs.

## **H. PROGRAM SUPPORT**

DFCS units have the following responsibilities:

### **Technical Assistance Requested and Received**

- The Court Improvement Program in collaboration with the DFCS Training Unit and the Court Improvement Work Group developed training on Advanced Professional Development for Court Procedures.
- The National Resource Center for Family Connections and Permanency Planning provided curriculum on "Quality Visits", facilitator training and facilitator coaching for the reinforcement of the training statewide.
- The National Resource Center for Adoption provided training for the regional resource supervisors on three modules in their "Adoption Competency" training curriculum.
- The Center for the Support of Families developed training modules related to the six components of the Mississippi Practice Model. This material is being incorporated into the pre-service training for new workers.
- ACCWIC - Statewide Implementation of Family Centered Practice Model – Completed in 2012.
- Casey Family Programs – Permanency Roundtables

### **Special Investigations Unit**

The Special Investigations Unit is responsible for investigating reports of child maltreatment that require special handling. These investigations include any reports of maltreatment perpetrated on children in foster care, any child fatality or near fatality where abuse/neglect/exploitation is suspected, or any fatality or near fatality where DFCS has involvement or had prior involvement with the child or family. In addition, the Special Investigations Unit conducts investigations that

are deemed “high profile” or require extra discretion. The Unit consists of a Bureau Director I and thirteen specially trained investigators are being hired. The Unit receives support from staff attorneys assigned to the Special Projects Unit.

## **GOAL FOR FFY 2015-2019**

### **Goal 1: Improve the quality and timeliness of investigations into Maltreatment in Care and to ultimately decrease the rate of repeat maltreatment of children in our care.**

- **Objective 1:** Improve the quality and timeliness of investigations that require special handling; specifically reports of maltreatment of children who are in DFCS custody.
  - **Intervention 1:** Recruit and retain a highly trained and skilled workforce of investigators.
    - **Benchmarks and Timeframes:** Thirteen special investigators will be hired by June 30, 2014.
  - **Intervention 2:** Obtain ongoing specialized training for investigators to continue to elevate their skill level in investigating allegations of maltreatment.
    - **Benchmarks and Timeframes:** All Special Investigators will complete initial specialized training by October 31, 2014.
  - **Intervention 3:** Collaborate with CQI/SRU to continue to improve the quality and timeliness of investigations utilizing the SRU Review tool used to review every investigation into maltreatment of children in foster care.
    - **Benchmarks and Timeframes:** By July 30, 2014, the SIU will be conducting all investigations into maltreatment in care and 100% of them will be being reviewed by CQI/SRU reviewers.
- **Intervention 4:** Use MACWIS data and SRU review feedback to track and monitor investigation quality and timeliness.
  - **Benchmarks and Timeframes:** MACWIS data reports and SRU feedback in the form of HEAT tickets with Safety and Practice issues will be reviewed and acted upon on a daily basis in efforts to improve quality and timeliness of investigations.
- **Outcome:** One hundred percent of investigations into maltreatment in care will be initiated and completed within prescribed timeframes and be of such a quality that the safety, permanency, and well-being of children entrusted to our care is ensured.
- **Measure 1:** MACWIS data reports SBRD06 and SZ1271 will be used to track and monitor timeliness of investigations into Maltreatment in Care.

- **Measure 2:** CQI/SRU review instruments and feedback will be used to track and monitor quality of investigations into Maltreatment in Care.

### **Director of Field Operations**

The responsibilities are to coordinate and supervise the programs and activities of professional, technical, and any supporting staff in performing specific DFCS financial service functions or team efforts between DFCS Regional Directors, other field staff, state office staff, community partners and agency clientele to ensure uniform application of policy, practice and procedures. The Director of Field Operations works cooperatively with DFCS staff and staff from other MDHS divisions to appropriately budget resources and staff, implement overall agency initiatives through all federal titles and ensure that practices and outcomes meet quality standards set by the agency.

### **Continuous Quality Improvement (CQI)**

The DFCS CQI process is the primary means of promoting quality of service delivery to children and families, accountability within the DFCS, and fidelity to the Child Welfare Practice Model. The primary purposes for engaging in CQI activities are to promote positive outcomes for the children and families served by the Division by reinforcing the principles of the newly adopted Child Welfare Practice Model, ensure a consistently high quality of services delivered to children and families, and provide for accountability within MDHS to the goals, standards, and policies of the Department. To achieve these goals, it is essential for DFCS to: (1) institute structured processes that examine, evaluate, and act on quality-related issues within the agency and (2) involve a broad array of DFCS staff, families, and stakeholders in these processes. The DFCS CQI Unit structure is as follows:

Evaluation and Monitoring Unit (EMU): The EMU's major functions involve monitoring through case reviews and organized feedback on multiple levels. Currently there is one EMU Division Director, two EMU Supervisors and twelve EMU Regional Liaisons. The EMU specifically carries out the following responsibilities:

- Conducts random-sample baseline and annual follow up case reviews on a regional basis;
- Conducts ongoing monthly random sample case reviews at the county level;
- Provides case-level feedback to county staff on cases reviewed, provides feedback to supervisors and administrators on county-wide performance, and to State-level staff and stakeholders on county, regional, and statewide performance;
- Follows the corrective action tracking process for ensuring regional/county follow up on all EMU corrective actions identified thru the review process.
- Reviews data reports reflecting State, regional, and county performance on various child welfare indicators;
- Analyzes the findings of reviews, including qualitative and quantitative analyses, and compiles results into periodic reports that identify the strengths and areas needing improvement identified in the reviews;

- Hires Evaluation and Monitoring Liaisons for each region; staffs and leads regional CQI teams in each region implementing the Family Centered Practice Model

Safety Review Unit (SRU):

The SRU's major functions involve monitoring through case reviews and organized feedback on multiple levels. The SRU specifically carries out the following responsibilities:

- Conducts reviews on in care maltreatment investigations of children in foster care as identified by data from MACWIS weekly report;
- Provides safety and casework-related findings to county staff on cases reviewed, provides feedback to supervisors and administrators on county-wide performance, and to State-level staff and stakeholders on county, regional, and statewide performance;
- Follows the corrective action tracking process for ensuring regional/county follow up on all SRU/MIC corrective actions identified thru the review process.
- Reviews data reports reflecting State, regional, and county performance on various child welfare indicators;
- Analyzes the findings of reviews, including qualitative and quantitative analyses, and compiles results into monthly reports that identify the strengths and areas needing improvement identified in the reviews;
- Monitors case-specific improvement efforts resulting from the reviews.

The In Care Maltreatment Review process is addresses the maltreatment of children in foster care who reside in resource homes or group care facilities. The results of these reviews are used to guide further improvements to assure the safety, permanency, and well-being of children while in DFCS custody. These reviews may result in recommendations by the Office of CQI to the appropriate Regional Director for corrective action to be taken by DFCS staff and/or by resource home/group facility staff. Currently there are two SRU review staff and one supervisor in the process of being hired by July 1, 2014. In the interim these two SRU staff report to the EMU Division Director.

Foster Care Review (FCR):

According to Mississippi Youth Court law, 43-15-11, all children in the custody of DFCS must have a foster care case review, including a county conference, within every six month period of custody. The purpose of these reviews is to expedite the goal of moving children out of foster care and into homes intended to be permanent. Such permanency may be achieved by reunifying foster children with their parents, placing them with relatives, or by placing them with adoptive families. The review conference includes items for discussion which detail what the agency staff must do and what the child's parents must do to achieve the permanency plan for each individual child in custody. A court report is submitted for each review held that provides mandated information necessary for the court to enter a finding regarding the degree of compliance by the agency and parents with the service plan and regarding the safety, health and best interest of the child. Foster Care Reviewers are assigned a territory based on custody caseloads

and they are responsible for ensuring that every child in foster care receives an administrative review and county conference every five months. Reviewers set county conferences which include invitations to parents, the child(ren) in care, grandparents, resource parents, guardians *ad litem*, and all case assigned DFCS caseworkers to participate in the conference and provide information regarding the permanent plan for the child. The information provided at those meetings contributes to the overall mandated findings made by the Foster Care Reviewer which are reported to the court. Issues of concern that affect the immediate safety of the child and issues related to practice are reported and assigned to the Regional Directors (or Office of Field Operations if needed) for corrective action follow up. FCR staff complete quality assurance reviews on corrective action responses to ensure the reported concerns have been addressed. Currently there is one FCR Division Director, two FCR Supervisors, fourteen reviewers and one administrative staff in the CQI FCR unit.

CQI Data Reporting Unit (DRU):

The CQI Data Analysis Reporting unit is responsible primarily for data analysis and reporting to management case review data from the EMU, SRU and FCR. DRU provides data trends and analysis to assist DFCS management in making decisions to further improve performance measures thereby having a positive effect on outcomes for children and families. This unit is responsible for data analysis/reporting for CFSR PIP, federal reporting (AFCARS and NCANDS), statistical state wide reporting on child welfare indicators, data reporting for CQI Annual Report and any additional trends requested by the management team. DRU is responsible for the ongoing maintenance of FCR PAD reports developed to meet MSA requirements. Currently there is one Senior Business Analyst, one Business Analyst and one Program Manager comprising this team.

Complaints Resolution Unit (CRU):

The CQI complaints staff is responsible for processing personnel, protection and placement complaints for DFCS. Processing complaints involves daily phone/public contact with family members, concerned citizens, and public officials. Once a complaint is received, the case is researched in MACWIS. The investigations and case records are reviewed and the complaint is assigned to the Regional Director via the CQI tracking system. The Regional Director is allowed three (3) business days to review the complaint and have the county staff respond to the CQI complaint staff. The Regional Director or his/her designee then contacts the complainant to address their concerns. Once this contact is made, the CQI complaints staff follows up with the complainant to ensure that his/her concerns have been addressed and resolved. Corrective action details are reported back to the CQI Complaints staff for closing the assignment.

The CQI complaints staff also handles complaints/inquiries from State officials regarding their constituents. Once these requests are received, the case is reviewed in MACWIS by CQI Complaints staff and assigned to the appropriate regional director or state office staff for follow up and corrective action. The assignee reports back to the CQI Complaints staff for closing the assignment. In addition, the CQI complaints staff receives referrals from the intake staff. Each complainant is contacted and their informational questions or problems are either resolved or referred to the appropriate Regional Director for

assistance. Currently there is one Program Manager in this support role with one Program Manager providing back up for this task.

Mississippi Automated Child Welfare Information System Unit (MACWIS):

MACWIS is the statewide, case management data system utilized to manage and track an average of 3,500 children in foster care and over 5,500 children that have been in custody at some point in the current fiscal year, pursuant to Title IV-E and Title IV-B of the Social Security Act of 1935, as amended. The system supports the work of approximately 1200 users within DFCS.

The MACWIS Unit is the state wide support unit for the MACWIS information system. Support areas include:

- Help Desk Support - responsible for all calls statewide from workers with MACWIS application and hardware issues. They resolve user issues if possible and also serve as liaisons to the MDHS MIS department in tracking MACWIS incident reports that may result in call tickets to be worked by the MIS department to resolve user issues. Currently there is one Business Analyst Supervisor and two Help Desk staff providing this support.
- Business Analysts Support – responsible for requirements gathering and writing for system enhancements and reports development, data dashboard reporting/charting updates, assisting with QA/test of system enhancements. Currently there is one Senior Business Analyst Supervisor and three Business Analysts providing this support.
- Reports QA/Validation Support – responsible for validation of all CQI reporting, including MACWIS reports developed to meet MSA lawsuit requirements. As new MACWIS reports are developed, they go through a validation and QA process within the QA/validation support unit. After implementation, validated reports are scheduled for revalidation on a 6 month schedule. Currently there is one Program Administrator Supervisor and three Program Managers on this team.
- Hardware/Cell Phones/Scanning Support – the hardware team is responsible for supporting all DFCS users with the maintenance, repair, replacement of all computer equipment at State Office and all DFCS county offices (84) statewide. Equipment maintenance and inventory tracking of desktop computers, laptop computers, printers, Wyse terminals, wireless routers, and switches is part of the hardware staff's daily operations. The cell phone support team is responsible for distribution, maintenance, repair, replacement of cell phones and PDA devices to all DFCS staff. The scanning support staff is responsible for scanning all MACWIS reports generated from the mainframe system and distributed by the MIS Operations department. Currently there is one Lead System Administrator Supervisor, three Systems Administrators and one Program Specialist who make up this team.

SACWIS Project Status

The State and its Federal partners have realized significant benefits from MACWIS since the 2001 MACWIS implementation. However, the legacy system is nearing the end of its lifecycle.

The State realizes the necessity of proactively planning for a new system solution. The systems alternatives analysis contract with Walter R. McDonald & Associates (WRMA), which began April 2011 and ended June 2012, provided recommendations to the state to pursue a ‘transfer system’ as a system solution. DFCS is currently moving forward into the planning stages of its SACWIS system with the March 4, 2014 engagement of a Quality Assurance (QA) / Independent Verification & Validation (IV&V) vendor to work with the division during the planning phase and the entire system design, development, and implementation effort. After review of the WRMA Alternatives Analysis documents, the decision was made to conduct business workflow sessions with management staff which will lead into JAD sessions with DFCS staff to obtain more detail of the requirements. DFCS and MAXIMUS staff will be refining the requirements and business workflows to include in the Implementation Advanced Planning Document (IAPD) to the Federal Analyst and the RFP for the Design Development and Implementation (DDI) vendor. The State continues to communicate with the Children’s Bureau for guidance with the SACWIS project to ensure federal funding throughout the lifecycle of this project. With the SACWIS project underway, the following SACWIS project team has been formed with more staff to be added in the future:

- SACWIS Project Team – To support the SACWIS project, staff have been hired that currently report under the MACWIS Unit organizational chart. One Lead Business Systems Analyst supervisor and one Senior Programmer/Analyst have been added. One Lead Programmer/Analyst and one Senior Programmer/Analyst are in the process of being hired. Recently DFCS requested additional technical positions for the SACWIS project that are in the process of being approved. Previously, three MACWIS staff were merged into the SACWIS project team including one Business Systems Analyst II and one Special Projects Officer IV. In addition, the State is in the process of contracting with a Project Manager to lead this project through implementation of the SACWIS system. This project manager is slated to be on site during July 2014.

(See Appendix B: Quality Assurance System for more information.)

## **GOALS FOR FFY 2015-2019**

**Goal 1:** Design/Develop/Implement a replacement SACWIS-compliant case management data system.

- **Objective:** Design/Develop/Implement a replacement SACWIS-compliant case management data system to support DFCS social work practice, DFCS business rules, DFCS policy, MSA requirements, COA standards.
  - **Intervention 1:** Engage a Quality Assurance/Independent Verification and Validation (QA/IV&V) vendor to perform quality assurance/control functions through the design, development and implementation of the replacement system and to assist with requirements refinement preparing the RFP for the selection of a Design, Development & Implementation (DDI) vendor for the system build.

- **Benchmarks and Timeframes:** The timeframe for QA/IV&V vendor to begin project is March 2014. This vendor will be engaged throughout the project which could continue through 2017 or 2018 depending on the accomplishments of all teams in keeping with the project schedule.
  - **Intervention 2:** Engage a DDI vendor to design development and implement a SACWIS compliant case management data system for supporting all business processes for the DFCS.
    - **Benchmarks and Timeframes:** The timeframe for engagement of a DDI vendor is estimated to occur the latter part of 2015. This vendor will be engaged throughout the project which
  - **Intervention 3:** Implement infrastructure changes (i.e. database platform, network, equipment) to support the SACWIS system implementation for the DFCS.
    - **Benchmarks and Timeframes:** The timeframe for infrastructure implementation will follow the project schedule with technical requirements gathering occurring during planned joint application design (JAD) sessions.
- **Outcomes:**
  - Increase capacity of the Department to use information management system to support casework practice and related functions.
  - Increase ability to capture information needed for reporting and monitoring that is not currently available through the existing MACWIS system.
  - Increase ease of use of the information management system by the field, ideally leading to more complete and accurate data produced by the system.
  - Increase DFCS federal funding for SACWIS-compliant system.

**Goal 2:** Develop a CQI process for Performance Improvement Plans (PIP) across all regions based on performance results of yearly Evaluation and Monitoring (EMU) regional reviews.

- **Objective:** Create a detailed plan for organized performance improvement plans to guide the regions in improvements across data indicator areas in which performance is under the goal. This would be an assignment of the CQI sub team in working with the Regional Implementation sub teams across the state.
  - **Intervention 1:** Finalize plans that were begun with the development of CQI in MS directed toward regional PIP plans.
    - **Benchmarks and Timeframes:** The timeframe for developing this process is during State Fiscal Year 2015 which begins July 1, 2014 and ends June 30, 2015.

- **Intervention 2:** Prepare CQI, field staff, and Regional Implementation Teams to implement program improvement strategies based on the outcomes of CQI review processes.
  - **Benchmarks and Timeframes:** Timeframes for preparation and implementation of the PIP strategies will be determined by a regional implementation schedule for this effort drafted by the CQI sub team along with the Regional Implementation sub team.
- **Intervention 3:** Use the State CQI Sub-Team to monitor implementation activities.
  - **Benchmarks and Timeframes:** Timeframes for monitoring this effort will continue throughout the implementation period (to be determined) and continue thereafter as a part of the CQI program efforts.
- **Outcomes:**
  - Measureable improvements in the areas identified as weaknesses in the CQI review processes.
  - Greater attention to areas needing improvement by Regional Implementation Teams.
- **Measure 1:** All Modified Settlement Agreement MACWIS reports will show measured progress and performance around each data indicator for all regions.
- **Measure 2:** All Modified Settlement Agreement PAD (Periodic Administrative Determination) Foster Care Review (FCR) reports will show measured progress and performance around each data indicator for all regions.

**Goal 3:** Prepare the division for the upcoming Round 3 CFSR in 2018.

- **Objective:** Improve CQI processes to ensure compliance and consistency in the review process state wide.
  - **Intervention 1:** Develop consistent state wide review teams for regional EMU reviews to ensure a more consistent review process.
    - **Benchmarks and Timeframes:** The timeframe for this initiative is set for State Fiscal Year 2015 which begins July 1, 2014 and ends June 30, 2015.
  - **Intervention 2:** Ensure that CQI review processes comply with Federal expectations for CQI systems, including instruments, sampling strategies, training, etc.
    - **Benchmarks and Timeframes:** The timeframe for this initiative is to be determined across the next three years as the CQI unit continues to work with outside entities (Children’s Bureau, consultants).

- **Intervention 3:** Use CQI review processes to emphasize CFSR outcomes and performance indicators on an ongoing basis.
  - **Benchmarks and Timeframes:** This initiative will continue across DFCS prior to and after Round 3 CFSR as the CQI program continues internal improvements within its own unit and across all regions state wide. Available reports for CFSR indicators have been identified with the recent development of all MSA reports from MACWIS and PAD data along with available data from the EMU and SRU review processes.
- **Outcomes:**
  - A robust CQI process that meets Federal expectations for State CQI systems.
  - Ongoing Self-monitoring capacity for DFCS of child welfare outcomes and practices.
  - Improvements in CFSR outcomes and performance indicators prior to Round 3 CFSR in 2018.
- **Measure 1:** Identified Modified Settlement Agreement (MSA) MACWIS reports.
- **Measure 2:** Identified Modified Settlement Agreement (MSA) PAD reports.
- **Measure 3:** Identified Evaluation and Monitoring Unit (EMU) data reporting.
- **Measure 4:** Identified Safety Review Unit (SRU) data reporting.

**Goal 4:** Improve CQI Regional Sub Teams state wide.

- **Objective:** Strengthen CQI Regional Sub Teams for a more structured monitoring approach of specific data indicators based on each region's needs.
  - **Intervention 1:** Use Regional CQI Sub-Teams as participants in developing PIPs resulting from CQI review processes.
    - **Benchmarks and Timeframes:** The timeframe for this will follow the timeframe for Goal #2, Intervention #1 which is State Fiscal Year 2015.
  - **Intervention 2:** Use Regional CQI Sub-Teams to monitor progress made in implementing PIP activities.
    - **Benchmarks and Timeframes:** The timeframe for this will follow the timeframe for Goal #2 to be determined by a state wide regional implementation schedule.
  - **Intervention 3:** Provide technical assistance from the State Office to Regional CQI Sub-Teams to assist them in carrying out these activities.
    - **Benchmarks and Timeframes:** The timeframe for this will follow the timeframe for Goal #2 to be determined by a state wide regional implementation schedule.
- **Outcomes:**

- Increased activity within and outside the local child welfare agencies with regard to monitoring and making needed improvements.
  - Development of improvement strategies that reflect Region-specific strengths and needs.
  - Measurable improvements in Region-specific areas needing improvement.
- **Measure 1:** All Modified Settlement Agreement MACWIS reports will show measured progress and performance around each data indicator for all regions.
  - **Measure 2:** All Modified Settlement Agreement PAD (Periodic Administrative Determination) Foster Care Review (FCR) reports will show measured progress and performance around each data indicator for all regions.

**Goal 5:** Develop a more focused approach to ‘In Home’ cases.

- **Objective:** Provide additional Evaluation and Monitoring Unit reviews on in-home cases for improvement of services and prevention of children coming into custody.
  - **Intervention 1:** Re-evaluate the current CQI review sampling strategy to determine the proportion of in-home cases needed to satisfy Federal CQI expectations and the needs in MS.
    - **Benchmarks and Timeframes:** Timeframes for this effort are planned for State Fiscal Year 2015 through SFY 2016, coordinating with federal guidance, MSA requirements, and COA requirements to determine this strategy.
  - **Intervention 2:** Use increased data analysis to develop needed reports of outcomes and performance indicators with regard to in-home cases.
    - **Benchmarks and Timeframes:** Timeframes for this effort are planned for State Fiscal Year 2015 through SFY 2016, coordinating with federal guidance, MSA requirements, and COA requirements to determine this strategy.
  - **Intervention 3:** Use Regional Implementation Teams to promote improvements in in-home services based on areas of need identified in Region-specific reports/data analysis.
    - **Benchmarks and Timeframes:** Timeframes for this effort are planned for State Fiscal Year 2015 through SFY 2016, coordinating with federal guidance, MSA requirements, and COA requirements to determine this strategy.
- **Outcomes:**
  - Measurable improved outcomes and performance with regard to safety and the recurrence of maltreatment in-home cases.

- Increased capacity by MDHS to keep children safe in their own homes without needing to enter foster care.

- **Measure 1:** Identified Modified Settlement Agreement (MSA) MACWIS reports.
- **Measure 2:** Identified Safety Review Unit (SRU) data reporting.
- **Measure 3:** Identified SRU corrective action tracking reporting.

**Goal 6:** Improve validation of data reports.

- **Objective:** Further strengthen DFCS' capacity for ongoing validation of data reports and identification of reporting and user-related errors.
  - **Intervention 1:** Gradually transfer all ongoing report validation activities to the MACWIS Validation Unit (MVU), with technical assistance from DFCS contracted consultants.
    - **Benchmarks and Timeframes:** The timeframe for this intervention is scheduled for completion end of calendar year 2014.
  - **Intervention 2:** Transfer all responsibility for developing monthly Data Quality Reports to the MVU with technical assistance from DFCS contracted consultants.
    - **Benchmarks and Timeframes:** The timeframe for this intervention is scheduled for completion end of calendar year 2014.
  - **Intervention 3:** Strengthen the enforcement of the corrective action process when errors are identified.
    - **Benchmarks and Timeframes:** The timeframe for this intervention is scheduled to begin during calendar year 2014 and will be an ongoing initiative of the CQI Unit.
- **Outcomes:**
  - Increased awareness of common data report errors by field staff and State Office staff.
  - Improvements in the quality/accuracy of data reports produced.
  - Improvement plans/strategies that are better informed through the availability of accurate data.
- **Measure 1:** Identified CQI corrective action tracking reporting.
- **Measure 2:** Data Quality Reports.
- **Measure 3:** Error log reports provided by consultants during co-validation efforts measuring error rate for MACWIS Data Validation Unit in comparison to consultants data validation.

**Goal 7:** Build internal capacity for reports development/maintenance.

- **Objective:** Develop the in-house capacity to produce the many data reports now produced by a contract provider.
  - **Intervention 1:** Provide training and a transition process by contractor to Department staff to prepare them to take on the report-production activities.
    - **Benchmarks and Timeframes:** The timeframe for this intervention is scheduled for completion end of calendar year 2014.
  - **Intervention 2:** Examine and act on staffing needs to sustain the data reporting process.
    - **Benchmarks and Timeframes:** The timeframe for this intervention is scheduled for completion end of calendar year 2014.
  - **Intervention 3:** Ensure that current data reporting requirements are built into the new SACWIS system or data warehousing process in order that in-house staff can continue to produce needed reports.
    - **Benchmarks and Timeframes:** The timeframe for this intervention will follow the SACWIS system project schedule.
- **Outcomes:**
  - Increased agency capacity to produce needed reports.
  - Internal capacity to produce reports on more of an ad hoc basis than currently exists, in order to support improvement efforts.
  - A sustainable process for producing needed reports that is not reliant on the availability of funds for contracts

### Prevention/Protection Unit

The Prevention/Protection Unit within DFCS includes:

- Facilitation of Prevention Activities, including the Blue Ribbon Campaign during Child Abuse Prevention Month and collaborations throughout the year to promote awareness of ways to report child abuse and neglect, distributing prevention materials, advertisement campaigns targeting safe sleep environments for infants and dangers of leaving children in vehicles, helping to match resources to prevent abuse and neglect needs identified in communities;
- Monitoring of CBCAP grant and work of sub grantees;
- Monitoring CJA grant and work of sub grantee;
- Facilitation of Citizen Review Panels (CRP);

- Monitoring of CAPTA grant, including oversight for Mississippi Centralized Intake program (24-hour Child and Vulnerable Adult Abuse and Neglect Hotline);
- Monitoring of Child and Family Support Services Program (CFSSP) for Family Preservation, Family Reunification, and Family Support under grant for Promoting Safe and Stable Families (PSSF);
- Administration of Children’s Trust Fund (CTF) for prevention services;
- Participation on state-level Child Death Review Team (CAPTA);
- Administration of the Interstate Compact on the Placement of Children (ICPC);
- Administration of Fingerprint Program to support criminal background checks to protect children per Adam Walsh Act;
- Administration of the Central Registry program, and
- Other collaborations and initiatives regarding Prevention and Protection as recommended by CFSR, COA, and the MSA.

### **Child Abuse and Neglect Central Registry**

The central registry is a repository that maintains the names of individuals identified as substantiated perpetrators of abuse and neglect through investigations conducted by DFCS on or before July 1, 2002.

Mississippi Code Annotated Section 43-21-257 (3) of 1972 as amended provides for the establishment of the State Central Registry of substantiated abuse and neglect cases containing (a) the name, address and age of each child, (b) the nature of harm reported, (c) the name and address of the person responsible for the care of the child, (d) the name and address of the of the substantiated perpetrator of the harm report. “Substantiated Perpetrator” shall be defined as an individual who has committed an act(s) of sexual abuse or physical abuse that would otherwise be deemed as a felony or child neglect that would be deemed as a threat to life, as determined upon investigation by the Office of Family and Children’s Services. “Substantiation” for the purpose of the Department of Human Services Central Registry shall require a criminal conviction or adjudication by a youth court judge or court of competent jurisdiction, ordering that the name of the perpetrator be listed on the central registry, pending due process. The Department of Human Services shall adopt such rules and administrative procedures, especially those procedures to afford due process to individuals who have been named as substantiated perpetrators before the release of their name from the central registry.

In addition to the MS Code Ann. 43-21-257(3) ,P.L. 109-248 -The Adam Walsh Child Protection and Safety Act of 2006 signed into law on July 27, 2006 requires States to institute new procedures for conducting criminal background checks of foster and adoptive parents and child abuse and neglect registry checks of prospective foster and adoptive parents and adult members of their household.

The Child Abuse/Neglect Central Registry conducts background checks as requested by DFCS social workers and employers on current or prospective employees/volunteers who have the responsibility for child care/supervision, day care providers, nursing homes, hospitals, residential care providers, mental health providers, schools, boys/girls clubs/scouts, police/sheriff

departments and etc. This is retroactive for all individuals who have resided in the State within the past five years.

With the establishment of the State Central Registry, DFCS is also required to establish procedures to afford due process to individuals who have been named as substantiated perpetrators prior to the release of their names from the registry. During FY 2002, the Attorney General's Office accepted the assignment of conducting these administrative fair hearings.

#### Service Delivery

The Central Registry provides services to sister programs; Boys and Girls Clubs, mentoring programs, YMCA; child care facilities; day care centers; church ministries; mother's day out programs; community human resources; community action agencies; Mississippi foster and adoption agencies; out-of-state foster and adoption agencies; abroad foster and adoption agencies; head start centers; health care facilities; nursing homes; hospitals; medical centers; rehabilitation centers; police and sheriff departments; residential and group homes; in-state school districts; out-of-state school districts; youth courts; non-violence shelters; child abuse prevention centers; assisted family emergency centers; Youth Challenge; Navy Construction Battalion Centers, adult day care centers; other out-of-state agencies; volunteers; interns; and DFCS staff as a part of the criminal history background check.

When an individual's name is found to be listed in the central registry, a certified letter is mailed to the individual informing them of their status as being listed in the central registry and informing them of their right to an administrative fair hearing. Upon receiving the returned letter from the individual, the letter with other identifying documentation is then forwarded to the Attorney General's Hearing Officer who will schedule and preside over the individual's hearing.

No information can be provided to the requesting agency until such time as the administrative process has been completed and the opinion of the Attorney General's Hearing Officer has been rendered. When the opinion of the hearing officer is "shall not remain on the central registry" the individual receives a letter from the hearing officer that their name will be removed from the registry. The central registry application is then returned to the requesting agency with the area checked "no information found" in the central registry.

When the Central Registry Program receives a criminal conviction or adjudication by a youth court judge or court of competent jurisdiction, ordering that the name of the perpetrator be listed on the central registry the individual name is added to the central registry. And when they are checked against the Central Registry the application is returned indicating "felony information found" or "information found" depending on if the Central Registry received a Youth Court order or Order of Conviction. The child abuse and neglect central registry administrative fair hearing process services are available to adults 18 years of age and older. This service is without regard to income.

If the prospective relative, foster and/or adoptive resource placement is listed as a confirmed perpetrator and warrants due process in accordance to Mississippi Code Ann. Section 43-21-257 (3) of 1972, through a coordinated effort with the county worker, the due process is expedited in efforts to secure the most familiar and/or least restrictive environment for the child. The Attorney

General's Hearing Officer and the Protection Unit staff have coordinated efforts to maintain available administrative fair hearing dates and times to handle expedited relative placement hearings.

DFCS social workers request central registry checks as a part of the mandatory criminal history background check. The Central Registry request is used to assess the individual fitness to become a placement resource to ensure the requirements of placement safety and well-being are met.

The Protection Unit staff created an online Child Abuse/Neglect (CA/N) Common Central Registry Application form and a Historical Records check form that was implemented effective March 7, 2014.

Plans include increasing the efficiency of this program and improving the ease of access to this service for community partners in the state, other states, and the public.

### **Fingerprint Program**

The Adam Walsh Child Protection and Safety Act of 2006 (P.L. 109-248) was signed into law on July 27, 2006 and amended section 471 (a) (20) of the Act to require States to institute revised procedures for conducting criminal background checks of foster and adoptive parents and new procedures for child abuse and neglect registry checks of prospective foster and adoptive parents and adult members of their household.

DFCS conducts criminal history background checks by capturing fingerprints via Live Scan Systems, which is mandated by Adam Walsh Act of 2006 and Section 43-15-6 of the Mississippi Code. The electronic fingerprint Live Scan Systems are designed for ease of use and for capturing high quality fingerprint images to ensure superior acceptance rates and accurate criminal history information.

Live Scan Systems stationed statewide support DFCS Regional Resource units with licensing foster and adoptive resource parents, staff and the Interstate Compact on the Placement of Children (ICPC) unit with ensuring safety and well-being of children. DFCS conducts fingerprint background checks on all new employees, relative resource homes, resource homes, adoptive homes, ICPC placements, volunteers, anyone residing in the respective homes who is fourteen (14) years of age and older, and anyone that is entrusted with the care of the children to whom they provide services.

Additionally, the Live Scan Services has been extended to Residential Child Caring and Child Placing contracted providers through a Memorandum of Understanding (MOU). The MOU is offered to providers along with the Licensure Policy. Once the MOU is signed, DFCS will offer Live Scan Services. DFCS defrays the fees for fingerprinting submissions in lieu of private providers shouldering these fees for their respective foster and adoptive families who accept placement of children.

As a part of the criminal background check, the fingerprints are checked against the following databases:

- Mississippi Department of Public Safety (MDPS)
- Mississippi Criminal Information System (MCIC)
- Federal Bureau of Investigation (FBI)
- National Criminal Information System (NCIC)

When individuals are fingerprinted at any of the statewide locations, the criminal history results are returned from the referenced databases, processed by the Fingerprint Program and/or Criminal History Review Panel and routed electronically to the respective Regional Fingerprint Administrators, Operators and requesting staff. The staff file and document the criminal history results in MACWIS.

The Fingerprint Program, located at State Office, is responsible for processing and receiving every submission conducted statewide. Currently, there are four (4) employees; one (1) Program Manager and three (3) Program Specialists responsible for processing all submissions conducted statewide for DFCS and Contracted Providers.

Plans include increasing the efficiency of this program and improving the ease of access to this service for community partners in the state, other states, and the public.

### Permanency Planning Unit

This unit relates to Title IV-B, Part I (Stephanie Tubbs Jones Child Welfare Services), Adoption Services (including Adoption Assistance), Unaccompanied Refugee Minor Program, and Congregate Care (including Therapeutic Licensure). Other responsibilities include Foster/Adoptive Parent Retention and Recruitment Programs.

- **The Eligibility Unit:** ensures the availability and accessibility of effective, culturally competent services through education, training, innovation, monitoring and promotion of ongoing quality improvement and utilization of all areas of Title IV-E eligibility. The Eligibility Unit provides individual entitlement for qualified children, partnership with universities to build social worker workforce, and maximize potential strategies to increase state and federal funding in support of Title IV-E.

The Eligibility Unit continues to ensure and implement existing services and newly created services to utilize for qualified children throughout the State of Mississippi. The Eligibility Unit continues to assist courts throughout the State of Mississippi in achieving prompt permanency hearings, as well as continuing discussions with county judges concerning requirement of IV-E eligibility.

The Eligibility Unit coordinates revisions with the Policy Unit regarding procedures within the unit required by the MSA. The Eligibility Unit implements various strategies and proposed principles for funding which outline short and long-term actions that build and utilize vital services to support Title IV-E.

Mississippi had a Federal Title IV-E Foster Care Eligibility Review in August 2014. DFCS was initially cited for six errors, but two were reverses; thereby resulting in a substantial compliance. DFCS was not placed on a PIP nor will be subjected to a Secondary Review.

**Goal:** Developing an eligibility protocol sheet to be entered in the DFCS Connection website for county staff to go to for further instructions when needed, as well as developing a Power Point, self-paced training for county staff to access according to their availability.

## **Interstate Compact for the Placement of Children**

### Description of Services

The Interstate Compact on the Placement of Children (ICPC) is a contract among all fifty states, the District of Columbia and the US Virgin Islands. The Compact authorizes states to work together to ensure that children who are placed across state lines for foster care, adoption and residential placements receive adequate protection and support services. The ICPC Unit establishes procedures for the placement of children and secures responsibility for agencies and individuals involved in placing children. The Compact is an important tool for ensuring safety, permanency and wellbeing for children with potential caregivers who do not reside in the same state. The Deputy Compact Administrator and Alternate provide technical assistance and consultation pertaining to ICPC. This program provides an array of services which includes case management, assessments, training and data collection.

During FFY 2014, there were approximately 1,233 ICPC cases handled either for placement of children from other states into Mississippi or placement of Mississippi children in other states with relatives. This number includes closures, approvals, Regulation 7 Priority Placements (expedited referrals that must be completed in 20 workdays), disruptions and residential treatment facility placements. During FFY 2014, 188 ICPC adoption cases were handled. As of January 1, 2013, DFCS no longer process requests for international adoptions. During FFY 2014, ICPC processed a total of approximately 1,421 cases.

Plans include increasing the knowledge and skill of DFCS staff/courts and tracking to improve quality, efficiency, and timeliness of the ICPC process.

## **Administration Unit**

The Administration Unit is responsible for DFCS personnel transactions; property inventory; requisitions for equipment and supplies; space planning for staff increases, sub grants; performance-based contracts; makes reports to the Administration for Children and Families (ACF) Children's Bureau regarding the CFSP, CFSR, APSR, PIP, collaboration with the Mississippi Band of Choctaw Indians and ICWA Training for the judiciary, collaboration with the AOC for training DFCS staff and judiciary; COA Risk Management Prevention (RPM) Standards and drafts responses and formal plans required by the MSA.

## **Budget and Financial Planning Unit**

The Budget & Financial Planning Unit safeguards the financial interests of DFCS through its coordination with the Agency's procurement process, grants management, monitoring of county bank accounts, comprehension and implementation of the budgetary authority available to DFCS. This unit mediates communications through other Divisions of the Agency and federal partners to support DFCS' mission and coordinates with Federal and State Agencies to ensure compliance with applicable laws and regulations in regard to Federal and State funding;

### **GOALS FOR FFY 2015-2019**

**Goal 1:** Maximize federal funding to support and enhance existing programs within the Division of Family and Children's Services.

- **Objective:** Explore untapped sources of funding for services and supports and apply for various grant announcements which support key areas of focus for the Division of Family and Children's Services.
  
- **Outcomes:**
  - Assist larger number of clients.
  - Provide more community-based family support programs to assist families in remaining intact.
  - Provide additional tools and supports to enhance the quality of services.

**Goal 2:** Financing to improve the workforce and provider network.

- **Objective:** Support a broad, diversified, qualified workforce and provider network.
  - **Intervention 1:** Enable providers to be reimbursed with diverse funding streams, including billing of Medicaid for therapeutic placement services.
  - **Intervention 2:** Fund workforce development activities such as workforce analyses, and recruitment and retention activities.
  - **Intervention 3:** Fund advances in information technology to improve services.
  - **Intervention 4:** Reimburse providers in a timely manner so that smaller providers can participate in the service system.
  - **Outcomes:** A competent workforce, effectively and efficiently improving outcomes for children and families, and sufficient number and types of providers to offer quality services and supports.

**Goal 3:** Financing for accountability.

- **Objective:** Incorporate utilization and cost management mechanisms within the State Automated Child Welfare Information System to ensure accurate service utilization and cost data are available and used for making fiscal and funding decisions.
- **Outcomes:**
  - Service utilization and child welfare costs are monitored and managed to determine the costs and effectiveness to the agency for various programs and services.
  - Knowledge of how each program and/or unit is spending on services and supports for children and families.
  - Projections of the amount and types of services and supports that children and families will utilize in the future.
  - Projection of how much each program and/or unit will potentially spend to fund these services and supports.
- **Measure 1:** Identify utilization patterns and expenditures associated with high costs and/or poor outcomes.
- **Measure 2:** Determine total cost of child welfare programs and services.
- **Measure 3:** Determine costs of services dependent upon whether provided as direct and/or referral services to children and/or families by caseworkers associated with applicable funding sources.
- **Measure 4:** Determine costs of services by case types for children and/or families served.

**Benchmarks and Timeframes:** The Budget & Financial Planning Unit intends to accomplish the established goals, objectives and outcomes by the end of Year 5 of the Child and Family Services Plan which ends September 30, 2019.

### Policy Unit

The Policy Unit was created to coordinate revision of all sections of the DFCS Policy Manual and to ensure the existence and consistency of a current and adequate DFCS Policy Manual. This Unit also ensures that DFCS policy addresses necessary federal and state mandates along with the safety, permanency and well-being of children through the outlining of a strong Family Centered Practice Policy. A Division Director II position was created within the Policy Unit for Performance Based Contracting in May of 2014. The position is responsible for the development and coordination of Mississippi's performance based contracting model (PBC), which is mandated by the Olivia Y Modified Settlement Agreement.

Inclusion of the principles and practices of the Olivia Y. Modified Settlement Agreement (MSA), Council on Accreditation (COA) standards, and the Mississippi Child Welfare Practice Model are essential in creating a revised DFCS Policy Manual and the development of performance based contracts.

The Policy Unit is required to make the Manual available to all staff via the DFCS Connection Web, as well as issue Bulletins of draft and final rule policy revisions.

Since the inception of the Policy Unit in August 2009, a Policy Sub-Team has been developed to support addressing DFCS policy needs and questions. The Policy Sub-Team also assists in the development of new policy, reviewing and recommending changes when necessary. The Policy Sub-team consists of different representatives from State Office and Regional DFCS staff.

All sections of the DFCS Policy Manual have been revised and approved as agency policy through the prescribed process. The DFCS Policy Manual has been posted to the 'DFCS Connection' web site for ease of access for every DFCS staff, as final rule policy.

Up to the present time, the following sections of the DFCS Policy Manual have been revised and are final rule policy:

- Section A (Administration)3/12/15;
- Section B (Intake and Assessment)7/18/14;
- Section C (Prevention/Protection, In Home Services)7/18/14;
- Section D (Foster Care) 4/29/15;
- Section E (Eligibility)5/29/13;
- Section F (Licensure)3/12/15;
- Section G (Adoption)4/29/15;
- Section H (Interstate Compact for Placement of Children)3/13/12;
- Section I (Limited English Proficiency)3/25/2014.

The goals of the Policy Unit are to revise and develop policies to meet the requirements of federal and state mandates or practice changes; make informed policy and practice decisions pertaining to PBC implementation; inform and guide DFCS staff of revised policies and procedures in coordination to the MSA, COA standards, and the Mississippi Practice Model, in relation to DFCS practice and policy needs.

### **Professional Development and Training and Education Program**

The DFCS Professional Development Unit is under the supervision of the Director of DFCS. Training for new hires and staff development is supported by DFCS Training Coordinators and contractual staff at universities in the state. The Training Program staff currently consists of one Bureau Director, one Family Protection Training Director, one Director of Workforce Development, ten Training Coordinators, two Program Specialists, three Special Projects Officers and one Secretary Principal.

The Professional Development Unit partnered with The University of Mississippi to create and deliver a Pre-Service training and Clinical Supervisory Training. Great emphasis has been placed on quality competency based training for newly hired DFCS Family Protection Specialists and Family Protection Workers.

The training curriculum incorporates the MACWIS, the Practice Model, COA, and updates relevant to the MSA. The training is continuously updated to reflect state and federal mandates, agency policy, practice changes and a formal revision annually. The model for pre-service training consists of nine weeks of training. There are alternating weeks of classroom instruction and on-the job training. There are 4 weeks of each and training ends with a week of MACWIS training in the computer lab. The portion of this training consists of 160 hours of on-the-job training where the trainee works specifically with a team that includes a training buddy, the supervisor and a DFCS Training Coordinator. Through each of these four weeks the trainee completes a manual that complements the classroom training while giving hands-on experience as well as classroom knowledge.

The Training staff continues to provide financial and clerical training and assistance to front line staff and Area Social Work Supervisors concerning the MACWIS bookkeeping system. Clerical training is provided for new clerks and county bookkeepers as needed. The Clerical Manual is revised as needed to ensure that instructions regarding policy, procedures, and MACWIS are updated.

The mission of the Professional Development Unit is to provide quality training to enhance the knowledge, skills and abilities of DFCS staff and to prepare staff to assume their responsibilities.

The agency continues to encourage staff to return to school to obtain a Master's Degree in Social Work through the agency's Professional Enhancement Scholarship Program. In addition to this scholarship, the agency has entered partnerships with universities in the state to provide a cohort that offers classes on a schedule that accommodates staff employed with the agency.

## WORKFORCE INFORMATION

### *Recruitment*

The recruitment of child welfare staff is a multi-pronged process in Mississippi. The State Personnel Board acts as the hiring agent for state agencies. The State Personnel Board provides access to registered human resources personnel to an Excel spreadsheet that reflects each position, name of incumbent, salary and other limited information as of the close of business the prior business day. The MDHS Human Resources Manager receives that spreadsheet every Friday to create a report. Only the position titles of Family Protection Specialists, Family Protection Workers, and Area Social Work Supervisors remain. This list allows for the ability to create a count function, sort by classification, sort by name, separate filled from vacant PINs, and calculate a total for each category. The totals are transferred to the chart contained in the Social Work Analysis weekly report. This report provides a snapshot of where the agency stands for recruitment and retention purposes.

When recruiting a new employee, the hiring manager completes the paperwork and when a properly signed request to fill a position (Form 218) is received in the Human Resources (HR) office, it is routed to executive management for approval. Once approved and returned to the HR office, it is included on the next Promotional Opportunities announcement sent out to all MDHS employees. At the same time, an electronic request to advertise is sent to the State Personnel Board via the NeoGov applicant/announcement system. The State Personnel Board then ensures

that the job advertisement is posted on the State Personnel Board website as soon as it is approved.

DFCS created 13 regional recruitment teams that visit assigned colleges and universities in their local area to speak to graduating BSW and MSW students about the prospect of employment in the field of child welfare. These recruitment teams were responsible for making visits to the institution of higher learning 3 times per year (during the Spring, Summer, and Fall semesters), during the 2014 year. The team was very well received in some colleges and universities but also had extreme difficulty being effective in others. A shift was made after the spring semester and only a few visits were made in the summer and fall semesters. The Director of Workforce Development as well as representatives from DFCS and MDHS Human Resources have attended numerous job fairs and recruiting events throughout the state within the past year, with a targeted focus on the recruitment of Area Social Work Supervisors due to the quickly increasing number of front-line employees.

Region I North	Union University MSW (Jackson, TN) Rust College BSW University of Mississippi-Southaven BSW
Region I South	University of Mississippi- Oxford MSW University of Mississippi- Tupelo BSW
Region II East	MS Valley State University MSW
Region II West	University of Arkansas-Little Rock MSW Delta State University BSW
Region III North	Belhaven University BSW Mississippi College BSW
Region III South	Jackson State University MSW
Region IV North	University of Alabama MSW Mississippi State University – Starkville BSW
Region IV South	Mississippi State University - Meridian
Region V East	University of Southern Mississippi BSW Alcorn State University BSW
Region V West	Louisiana State University
Region VI	University of Southern Mississippi MSW
Region VII East	University of South Alabama MSW
Region VII West	Tulane University MSW

The agency has continued licensure preparation workshops at no cost to DFCS staff on a bimonthly basis. Many current DFCS employees are qualified for promotion to an ASWS position with the exception of holding state licensure to practice social work. The intention of the workshops is to thoroughly prepare staff to take and pass the Mississippi Licensure Examination and become eligible for promotion into supervisory position. The workshops have been well received and a favorable pass rate has been achieved among those who have attended the workshops and gone on to take the licensure examination.

DFCS recognized the critical need to fill positions in the three coastal counties and Hinds County as there was a large number of vacant positions and a very high turnover rate of employees in Mississippi Annual Progress and Services Report  
FY 2016 APSR

those four counties. The Division of Human Resources along with DFCS management determined that efforts had been made through job fairs, media advertisements, and through the posting of openings with the State Personnel Board, but those efforts had not produced any measurable increase in employment in the four identified counties. MDHS management approved DFCS' proposal to request 15% recruitment flexibility for certain job classifications (see below) in those four counties, which was subsequently approved by the State Personnel Board. The recruitment flexibility allows DFCS to hire new employees at 15% above the starting salary for the job they are hired into. An additional 20% type duty location pay was added for these job classifications in Harrison and Hancock Counties due to critically low staffing numbers. This recruitment flexibility has been significantly helpful in the recruitment of eligible candidates in these counties. In addition to Hinds, Harrison and Jackson counties the management team determined the same structure was needed for Forrest County. A table of DFCS positions with authorized recruitment flexibility is as follows:

<b>Job Title</b>	<b>Starting Salary</b>	<b>Starting Salary w/ Recruitment Flex in Hinds/Jackson Counties</b>	<b>Starting Salary w/Recruitment Flex + Type Duty Location Pay in Harrison &amp; Hancock Counties</b>	<b>Starting Salary w/Recruitment Flex + Type Duty Location Pay Forrest County</b>
Family Protection Worker I	\$23,643.58	\$27,190.12	\$31,918.83	\$31,918.83
Family Protection Specialist	\$27,615.55	\$31,757.88	\$37,280.99	\$37,280.99
Family Protection Specialist, Senior	\$30,049.94	\$34,557.43	\$40,567.42	\$40,567.42
Family Protection Specialist, Advanced	\$32,700.43	\$37,605.49	\$44,145.58	\$44,145.58
Area Social Work Supervisor	\$37,511.76	\$43,138.52	\$50,640.88	\$50,640.88

Due to the critical need to recruit Area Social Work Supervisors throughout the State, DFCS worked with the Mississippi State Personnel Board to revise the requirements for the position of ASWS to broaden the pool of qualified candidates. The current qualifications and job titles for front line staff and supervisory staff are listed in the table below:

<b>Job Class</b>	<b>Education/Experience Requirements</b>	<b>Revised Education/Experience Requirements (as of 4/1/14)</b>
<b>Family Protection Specialist</b>	Bachelor's degree in SW or LSW	Bachelor's degree in SW or LSW
<b>Family Protection Specialist, Sr.</b>	2 years' experience and LSW	2 years' experience and LSW

<b>Family Protection Specialist, Advanced</b>	4 years' experience and LSW	4 years' experience and LSW
<b>Area Social Work Supervisor</b>	LMSW and 4 years' experience or LSW and must have completed 30 semester hours of graduate level SW education or LSW and 5 years' experience in SW	LMSW and 4 years of experience or LSW and have a Master's Degree in social work or related field or be enrolled in and/or accepted into (proof required) a graduate level social work or related field education program at an accredited institution of higher learning and two years of experience in SW

**DIRECTOR OF WORKFORCE DEVELOPMENT**

DFCS hired a staff liaison between the universities and DFCS to promote collaboration in the supplying and training of social workers. The education liaison networks with colleges and universities both through workforce development and advancement of degrees for agency staff. Some of the tasks the liaison completes are: participation in career fairs across the state; processing and tracking scholarship applicants and their reimbursement paperwork for the Professional Enhancement Scholarship; serving on several sub-teams within the agency. The Director of Workforce Development also coordinates the licensure workshops that are conducted bi-monthly for staff in the regions seeking to sit for the social work licensure exam.

**MSW Program for Currently Employed Staff**

- DFCS awarded contracts to the University of Mississippi and University of Southern Mississippi to provide necessary coursework for caseworkers and supervisors employed with DFCS to earn their Master's in Social Work (MSW). University partners support the mission and values of DFCS as reflected in the Practice Model that is being implemented throughout various regions of the State. Each university has assembled cohorts for DFCS employees and classes are scheduled in conjunction with their work hours to include the agency's compressed work schedule. The MSW cohorts have been designed and implemented specifically for the non-traditional, child welfare employed MSW students.
- If the student/employee seeks application for the Professional Development Scholarship they must achieve a grade of "B" or higher to receive reimbursement for their tuition, fees and books. The field placements must also be completed within DFCS and they must commit to serving at the agency for three years after graduation. Those students who fail to complete three years with the agency after graduation may be required to repay reimbursements by the agency for tuition, fees and books.

**GOALS FOR FFY 2015-2019**

The Professional Development Unit seeks to enhance the trainings that are offered through the unit as well as the training offered through consulting and university partners. The ultimate goal is to adequately prepare workers for field readiness. Plans are to continue to grow the unit to support ongoing training as well as on-the-job training.

**Goal 1:** A workforce who is trained prior to receiving a caseload within the agency. 100% of newly hired frontline staff and supervisors will complete 270 hours of pre-service training.

**Objective:** 100% of newly hired frontline staff and supervisors will complete 270 hours of pre-service training.

- **Intervention:** Staff will attend 270 hours of training.
  - **Benchmarks and Timeframes:** The training calendar will be published by July 1 of each year for directors to plan start dates for training for newly hired staff.
- **Measure:** Training hours will be tracked in a manual tracking system by the Professional Development Unit.
- **Outcome:** Staff trained in compliance with DFCS policy.

**Objective:** 80% of staff will pass (score of 70 or higher) the test administered at the end of each classroom training session of pre-service training.

- **Intervention:** Test will be administered weekly at the end of each classroom training week session.
- **Measure:** A manual report will be used to track the test scores on an annual basis.
- **Outcome:** Staff will be knowledgeable of the subject areas taught in pre-service training.

### Resource Development Unit

The DFCS Bureau of Resource Development is dedicated to connecting children and families to resources for the purpose of helping them achieve permanency, wellbeing and safety. The Resource Development Unit was created to enhance access to services and/or build an array of services for the children and families served by DFCS. The Resource Development Unit was created July 2010. The Unit is dedicated to ensuring the compatibility of existing services and newly created services with the principles and practices required by the MSA, the Administration for Children and Families (Children's Bureau), COA standards, and the Practice Model.

Using the mission stated above, a five-year plan was developed to address the transformation of our service system. The goals and objectives will guide DFCS action to utilize the service system for the best services possible for our children and families. Each goal includes objectives, interventions, and outcomes. Furthermore, unless specified, these goals and

objectives are inclusive of the population DFCS is charged to serve. Services developed and/or provided will take into account the cultural and linguistic needs of diverse populations.

The Resource Development Unit collaborates with provider nonprofit agencies and searches for new resources for the state. A Statewide Resource Directory is maintained on the MDHS website for the use of field staff as well as the general public.

The Interpreter Program was created to assist field staff with Limited English Proficiency (LEP) clients. There are interpreters in the field and DFCS contracts with interpreters of any given language needed, including American Sign Language (ASL) for hearing impaired clients.

An Educational Liaison provides training, assistance with obtaining educational services, and intervening with school districts to seek services for our foster children. Based on federal requirements we are responsible for services to be provided for our children. Currently there are 1 supervisor and 4 educational liaisons that serve the children in the State of Mississippi. The Educational Liaisons are responsible for training our field staff on the following:

- Caseworkers shall review the educational record of each child who enters custody for the purpose of identifying the child's general and, if applicable, special educational needs and shall document the child's educational needs within 30 calendar days of his/her entry into foster care.
- Caseworkers shall take reasonable steps to ensure that school-age foster children are registered for and attending accredited schools within three business days of initial placement or any placement change, including while placed in shelters or other temporary placements.
- Reasonable efforts shall be made to ensure the continuity of a child's educational experience by keeping the child in a familiar or current school and neighborhood, when this is in the child's best interests and feasible, and by limiting the number of school changes the child experiences.

The training curriculum consists of the information stated above, training on Individual Educational Plans (IEP) and the Individual Disability Education Act (IDEA). As of May 2014 all DFCS Regions have completed the educational training. Beginning July 2014, ongoing training will be held four times annually to keep the field staff informed of the necessary information to best serve our children in the education realm.

The Resource Development Unit has a Nurse IV Program Manager that works with the Magnolia Health Plan to provide medical, dental and mental health services for our children. Magnolia Health Plan is a managed care program through the Division of Medicaid (DOM). They provide services for approximately 4,500 of our foster children. There are 1 nurse manager and 3 field nurses for the entire state. The Nurse Program Manager is responsible for carrying out the Psychotropic Drug Plan.

(See Appendix B: Health Care Oversight and Coordination Plan, and Appendix C: Psychotropic Drug Plan)

The Therapeutic Placement and Treatment Coordination Unit was moved to the Resource Development Unit as of February 2015. This unit provides assistance to case workers in securing hard to find placements for foster children. This unit consists of 1 director and 8 team members.

The Resource Development Unit collaborates on an ongoing basis by attending and participating in other state child serving agencies and private provider agencies meetings and advisory panels including the following agencies and panels: Mississippi Department of Mental Health, Division of Medicaid, Mississippi Department of Health, Mississippi Department of Vocational Rehabilitation, Mississippi Department of Education and the Special Education Advisory Panel (SEAP), Mississippi Families as Allies, Inc., Community Mental Health Center MAP Teams, State Level Case Review, First Steps, ARC of Mississippi, MTOP Grant Executive Steering Council, Interagency Coordinating council for Children and Youth (ICCCY), Interagency System of Care Council (ISOCC), and Governor's Task Force for Human Sex Trafficking. Regional Implementation Team (13 statewide), and State Office Sub-teams, as well as internal implementation meetings and sub-teams.

### **GOALS FOR FFY 2015-2019**

**Goal 1:** Increase access to community and statewide services to improve safety, permanency and well-being outcomes of children.

- **Objective 1:** Maintain a Resource Directory via the MDHS Website to provide not only to DFCS field workers, but also to provide to community resource providers.
  - **Intervention:** Update the DFCS Statewide Online Resource Directory.
    - **Benchmarks and Timeframes:** Resource Directory will be updated on a yearly basis throughout the five year plan.
      - **Outcome:** Information for local community services in each county in the state will be available to the agency and the public.
- **Objective 2:** Provide educational training to DFCS field staff on the three educational services that are required by the Modified Settlement Agreement i.e. 1) review educational record of each child that enters custody to identify the child's general and, if applicable, special educational needs within 30 calendar days of his/her entry into foster care, 2) ensure that school-age foster children are registered for and attending accredited schools within three business days of initial placement, 3) all reasonable efforts to ensure the continuity of a child's educational experience by keeping the child in a familiar or current school and neighborhood, when in the child's best interests and feasible, and by limiting the number of school changes the child experiences.
  - **Intervention 1:** Provide workshops through the DFCS Professional Development unit.



- **Measure:** Data will be captured via MACWIS reports for physical assessment and comprehensive assessments. Mental and Dental assessments are captured via CQI case reviews, Foster Care Review and Periodic Administrative Determination (PAD) Reports.
- **Objective 5:** All foster children receiving psychotropic medications will be monitored to ensure safe and appropriate usage of the medications.
  - **Intervention:** The Program Manager Nurse will provide oversight of psychotropic medications for foster children. A Mississippi Psychotropic Medication Monitoring Plan has been developed.
  - **Outcome:** All foster children will receive safe and appropriate use of psychotropic medications.
  - **Measure 1:** Data will be provided by Magnolia Health Plan.
- **Objective 6:** Find appropriate treatment services for therapeutic placements.
  - **Intervention:** Assessing and determining specific needs and advocating for those needs to be met by a treatment provider.
  - **Outcome:** The children have better placement stability and achieve timely permanency.
  - **Measure:** Mississippi is moving toward Performance Based Contracting for therapeutic service providers to enhance timely permanency and placement stability.

#### IV. TRIBAL CONSULTATION

DFCS and the Mississippi Band of Choctaw Indians (MBCI) made great progress in achieving the cooperative goals during the reporting period. DFCS maintained a collaborative relationship with the MBCI. DFCS continues to offer assistance to the MBCI in such areas as joint training, Independent Living services, foster care and adoption services.

The tribes of affiliation, as well as Indian parents, are notified any time DFCS is involved with a child or family that meets tribal membership requirements. The MBCI is available to assist DFCS with tribal identification and notification as needed. DFCS and Choctaw Social Services made cooperative efforts to identify potential Native American resource parents.

MBCI is notified of any state proceedings involving tribal children and given the opportunity to assume jurisdiction or authority at any point in the proceedings. In March 2014, ICWA posters were mailed to youth court judges, referees and chancellors requesting that the posters be placed on the door or near the entrance to the courtroom. The poster instructs persons with Native American heritage to let the court know so that their rights under ICWA can be protected.

Active case planning is pursued to maintain or reunite Native American families as soon as safely feasible when safety concerns are identified. Choctaw Social Service's staff attended trainings on DFCS Practice Model Implementation, Maltreatment Training, Conducting Family Team Meetings and Safety and Risks Assessment tools. DFCS staff participated in tribal training on the Adam Walsh Act.

The DFCS Workers ask the family the following questions to gain knowledge in deciding what is in the best interest of the child and document the discussion in the narrative section of the Mississippi Automated Child Welfare Information System (MACWIS):

1. Is parent or child of Native American heritage?
2. Is parent eligible for tribal membership?
3. Is parent registered with Native American tribe?
4. Is child eligible for tribal membership?
5. Has child been registered with Native American tribe?
6. Does the family live on tribal land?

The Mississippi Band of Choctaw Indians or any other Indian tribe to which the child belongs, has the right to accept or deny jurisdiction of the child and to help with placement resources. A tribal court may assume jurisdiction over any Native American child whether the child is living on or off a reservation at any time.

The tribe is be notified of any court hearings involving an Indian child. Notification is provided immediately, by telephone and certified letter, to the tribe when a Choctaw child, or other Indian child, is taken into DFCS custody. If services are being provided by DFCS and the child holds membership in a tribe or is eligible for tribal membership the tribe may assume jurisdiction at any point in the service provision process, including the investigation process and foster care services.

The tribal lands of the Mississippi Band of Choctaw Indians are found in eight counties in Mississippi: Neshoba, Attala, Jones, Kemper, Leake, Newton, Scott and Winston.

Information about children who are determined to be members of a tribe other than Choctaw are provided to the District Worker, Bureau of Indian Affairs, Eastern Area Office, and Washington, D.C. If the tribe is unknown, DFCS shall contact the Mississippi Band of Choctaw Indians who is willing to help identify the child's tribe and refer appropriately.

(See <http://www.neshoba.org/community/ms-band-choctaw-indians.php>)

MBCI Chief Justice Kevin Briscoe (formerly Senior Youth Court Judge) is actively involved with DFCS and attended the Permanency Summit with DFCS staff in November 2010. DFCS had extensive Tribal participation to develop Indian Child Welfare Act (ICWA) training in 2011, 2012, 2013, 2014 and 2015 on the MBCI Reservation.

ICWA training is included in the PreService Training curriculum In addition, the State of Mississippi is in the process of improving collaboration with the MBCI Social Services in coordinating protective service cases related to children of Choctaw families who are not

covered or eligible for services through the Mississippi Band of Choctaws or their Social Services.

DFCS was invited to collaborate with MBCI for the Tribe's Child Abuse Awareness KICK Celebration on April 16, 2014.

### **Measurement of ICWA Contact**

#### Narrative Contact Needed and Families with Native Heritage Reports

As of April 2010, the ICWA Narrative Contact Needed and Families with Native Heritage report in MACWIS indicates that of the 4,915 open cases, 4,079 show ICWA contact was made and 836 show no ICWA contact was made. The percentage of ICWA contact statewide is 82.99%.

As of April 2011, the ICWA Narrative Contact Needed and Families with Native Heritage report in MACWIS indicates that of the 4,780 open cases, 3,792 show ICWA contact was made and 988 show no ICWA contact was made. The percentage of ICWA contact statewide is 79.33%. [Report MWZICW2S – ICWA Narrative Contact Needed & Families with Native Heritage]

As of April 2012, the ICWA Narrative Contact Needed and Families with Native Heritage report in MACWIS indicates that of the 1,908 open cases, 1,425 show ICWA contact was made and 988 show no ICWA contact was made. The percentage of ICWA contact statewide is 74.68%. [Report MWZICW2S – ICWA Narrative Contact Needed & Families with Native Heritage]

As of April 2013, the ICWA Narrative Contact Needed and Families with Native Heritage report in MACWIS indicates that of the 1,719 open cases, 1,145 show ICWA contact was made and 573 show no ICWA contact was made. The percentage of ICWA contact statewide is 66.66%. [Report MWZICW2S – ICWA Narrative Contact Needed & Families with Native Heritage]

As of April 2014, the ICWA Narrative Contact Needed and Families with Native Heritage report in MACWIS indicates that of the 4,553 open cases, 2,371 show ICWA contact was made and 2,182 show no ICWA contact was made. The percentage of ICWA contact statewide is 52.07%. [Report MWZICW2S – ICWA Narrative Contact Needed & Families with Native Heritage]

### **A. ICWA CONFERENCE**

#### First Annual ICWA Conference

On June 9-10, 2011, MBCI hosted the first collaborative cross-training between the MBCI, the Mississippi Judiciary and DFCS at the Pearl River Resort. The conference was well attended with approximately 160 participants, including MBCI Drummers, Elders Dancers, the current Choctaw Princess and Choctaw Children Dancers. The ICWA Conference was developed and sponsored by The MBCI Model Court, Forrest County Model Court, AOC and DFCS Court Improvement Workgroup. This conference was made possible by funding through the AOC Court Improvement Program. The Mississippi Judicial College provided all of the logistic services of equipment, location, meeting rooms, meals, registration and took care of many more

behind-the-scenes details. The keynote speaker was provided by the National Resource Center on Legal and Judicial Issues in conjunction with the National Resource Center for Tribes.

Participants, tribal and legal, from at least ten states other than Mississippi participated in the ICWA Conference: Nevada, California, New Mexico, Washington, Oregon, Minnesota, Iowa and Texas. The Pechanga Tribe from Temecula, California attended. Representatives from the Casey Organization, the National Council of Juvenile and Family Court Judges, the NRC for Tribes, the NRC for Legal and Judicial, the Department of Education, the Judiciary, including Chancery Judges, County Court Judges, Youth Court Judges and Referees, Prosecutors, Youth Court Defenders, Youth Court Counselors, Guardians *ad litem*, Attorney General's Office, Tribal Attorney General's Office, Office of Administrative Courts and individual attorneys, the Executive Director of the Mississippi Department of Human Services, the Deputy Administrator of Family and Children's Services, Director of Field Operations, DFCS Social Workers, the Director of MBCI Department of Family and Community Services and MBCI Social Services staff were in attendance.

#### Second Annual ICWA Conference

The second ICWA Conference, "Pathways to Justice" was held May 31-June 1, 2012, hosted by the MBCI at the Golden Moon Pearl River Resort in Choctaw, Mississippi, with approximately 200 participants. Tribal nation representatives from throughout the United States attended this historic conference including: the Alabama Coushatta Tribe of Texas, the Miami Tribe of Oklahoma, the Blackfeet of Montana, Pomo of California, the Coast Miwok of California, the Pawnee Nation of Oklahoma, White Earth Indians of Minnesota, Lakota Indians of North and/or South Dakota, Tlingit Indians of the Pacific Northwest, Yaqui Indians of Arizona, Oueaha Indians of Nebraska, Choctaw Nation of Oklahoma and Mississippi Band of Choctaw Indians.

#### Third Annual ICWA Conference

The third annual Indian Child Welfare Act Conference convened August 14-16, 2013 at the invitation of the MBCI on the Choctaw Reservation, Pearl River Resort. Approximately 200 persons participated in the conference including registered participants, speakers, MBCI Elder Dance Group, MBCI Drummers, MBCI vendors and DFCS vendor. According to several National Resource Centers, Mississippi is the first State in the United States to develop this depth of collaboration with the federally recognized sovereign Tribe – the MBCI, who reside within the borders of Mississippi.

#### Fourth Annual ICWA Conference

The fourth annual ICWA Conference convened on August 14, 2014 at Choctaw, Mississippi. The keynote speaker, Judge Monica Zamora, will spoke about collaboration, and attorney Melodie McCoy discussed current cases involving Native American children.

#### Fifth Annual ICWA Conference

The fifth annual ICWA Conference convened on August 13, 2015 at Choctaw, Mississippi. The keynote speaker, Victoria Sweet, spoke about human trafficking, violence against Native women, ICWA compliance, protection orders, and intergenerational trauma. Withelma "T" Ortiz Walker Pettigrew spoke about ending domestic child trafficking and reforming the child

welfare, juvenile justice and mental health social systems designed to protect children. Michael Petoskey, Chief Judge, the Tribal Court Judiciary Pokagon Band of Potawatomi, and Timothy Connors, Judge, Washtenaw County Trial Court, Ann Arbor, Michigan, spoke about Tribal-State collaborations. There were 170 conference attendees, 35 Elders and approximately 10 vendors.

## **B. MOU BETWEEN THE MBCI AND DFCS**

Following the first ICWA conference on June 22, 2011, negotiations reopened toward a Memorandum of Understanding between the MBCI and DFCS. Representatives from the MBCI judiciary, Tribal Attorney General's Office and DFCS drafted the Memorandum and presented it to the Tribal Counsel April 10, 2012. The MOU was signed October 25, 2012. The objectives of the MBCI and DFCS are to promote the safety and proper placement of Choctaw children. The MOU sets forth the respective duties for cases involving Choctaw children as described below:

- MBCI agrees to respond to any allegation of abuse or neglect within the Reservation; determine whether the child is an "Indian child" subject to the authority of MBCI; to assist with placement of Choctaw children with Choctaw families; to aid the State in identifying Choctaw families and other tribal families living off-Reservation who may be eligible to serve as State "DFCS Resource Families"; to establish procedures to assist all State caseworkers when conducting monthly in-home assessments of Choctaw children on-Reservation; to jointly provide training once a year related to Choctaw culture and established protocols; to testify in State court proceedings involving Choctaw children living off-Reservation, whether or not they have assumed authority over the child; to report criminal charges in the appropriate jurisdiction if MBCI is the investigating agency; to accompany DFCS workers when visiting Choctaw children on-Reservation.
- DFCS agrees to respond to any allegation of abuse or neglect, including families of Choctaw heritage; to determine if a child is an "Indian child" and contact MBCI immediately so they can assume authority; to jointly train annually these protocols; to testify in Tribal Court proceedings involving Choctaw children living on and off-Reservation; to make every effort to place Choctaw children living off-Reservation with Choctaw families; to report criminal charges in the appropriate jurisdiction if they are the investigating agency; to comply with agreed procedure for monthly in-home assessments of Choctaw children on-Reservation; to provide MBCI with the Mississippi Central Intake phone number for all reports of abuse or neglect involving Choctaw children off-reservation; and to accompany Tribal workers, if requested, to visit Choctaw children off-reservation.

## **GOALS for FFY 2015-2019**

**Goal 1:** Include Choctaw Social Services in training opportunities available to DFCS staff as appropriate, and have regular meetings with tribal staff and administration on all levels at least twice a year.

- **Objective:** Provide cross-training between the Tribe and DFCS and establish regular communication on all levels at least twice a year.
  - **Intervention 1:** Notify the Tribe of training opportunities
  - **Intervention 2:** DFCS staff and Social Services staff meet at least twice a year to identify issues or barriers to permanency for Native American children.
    - **Benchmarks and Timeframes:** In counties with tribal populations, between January-June, schedule one meeting; and between July-December, schedule second meeting

**Goal 2:** Collaborate with the Mississippi Band of Choctaw Indians, the Choctaw Model Youth Court, Administrative Office of Courts, National Council of Juvenile and Family Court Judges, The Mississippi Judicial College, National Resource Centers and the Attorney General’s Office at Choctaw to produce Annual Indian Child Welfare Act Conferences

- **Objective 1:** Promote understanding of cultural diversity and train judiciary and DFCS on the Indian Child Welfare Act requirements.
  - **Interventions:** Request technical assistance from the National Child Welfare Resource Center on Legal and Judicial Issues, National Resource Center for Tribes, National Council of Juvenile and Family Court Judges, Choctaw Model Youth Court and Mississippi Administrative Office of Courts to sponsor the Annual Indian Child Welfare Act Conference.
    - **Benchmarks and Timeframes:**
      - April 2014, and annually thereafter, collaborate with the Tribe, National Resource Centers, to plan and develop the Annual ICWA Conference. The Mississippi Judicial College will draft and send out Save-the-Date notices to the judiciary and attendees from past conferences.
      - May 2014, and annually thereafter, collaborate with the Tribe, DFCS and Administrative Office of Courts (AOC) to identify speakers, subjects, and theme for the Annual ICWA Conference.
      - June 2014, and annually thereafter, collaborate with the Tribe, DFCS, AOC, and The Mississippi Judicial College regarding location, food service, technical requirements, registration, and CLEs, CJs and CEs for participants at the Annual ICWA Conference.
      - July 2014, and annually thereafter, collaborate with the Tribe, DFCS, AOC, The Mississippi Judicial College and the National Resource Centers to finalize plans for the Annual ICWA Conference.

- August 2014, and annually thereafter, host the Annual ICWA Conference; develop goals for the next year, evaluate the conference and identify changes based on the evaluations, set date for initial collaboration on the next year's conference.
- **Measure 1:** Compare number attending with prior years to see if conference is reaching the target audience.
- **Measure 2:** Compare type of attendees: (a) number from Tribe; (b) number of out-of-state tribes; (c) Number of DFCS staff; (d) number of judges, referees and chancellors; (e) number of court personnel; (d) number of service providers; and (f) number of other agency personnel.

**Goal 3:** Annually, or more often as needed, update the state listing of all tribes, national contact persons and contact information.

- **Objective:** Ensure that DFCS staff and Tribal Social Services staff have current contact information for all tribes.

**Goal 4:** Preserve Native American families in a culturally sensitive manner.

- **Objective 1:** This goal includes improving the percentage of ICWA contacts documented in MACWIS.
  - **Intervention:** The Family Service Plan ICWA tab located in MACWIS requires the worker to answer Native American Heritage questions concerning any child in the case who is under age 18 or any child in the case who is in DFCS custody, regardless of age.
- **Objectives:** This goal includes culturally based prevention and protection services as well as ensuring any Indian children removed from their homes be placed with priority given to relatives, other Choctaw families, and other tribes. They will only be placed with families outside the Indian culture as a last resort. Placement with relatives on the reservation will require a home evaluation and foster care licensing of the relatives any time the tribe does not assume jurisdiction of the children to be placed. These homes must meet all DFCS licensing requirements.
  - **Interventions:** DFCS agrees to include potential Choctaw foster parents, both on and off the reservation, in the pre-service foster parent training provided to all potential DFCS foster parents. DFCS has a goal of licensing two to five off reservation Choctaw families as foster parents. This will aid in fostering connections with families and the tribe. A Resource Worker will be specifically assigned to Neshoba County to assist in establishing permanent placements within the community where tribal connections and culture are most readily available.

## V. CHAFEE FOSTER CARE INDEPENDENT LIVING PROGRAM/EDUCATION AND TRAINING VOUCHERS

The Independent Living Program (ILP) helps adolescents acquire basic life skills in their progress from dependency toward self-sufficiency. Youth are eligible for Independent Living Services based on the following criteria:

- Youth in care, ages 14 until their 21<sup>st</sup> birthday, are eligible for all Independent Living Services except for criteria placed on the Educational and Training Voucher program;
- Youth who leave custody, ages 18 to their 21<sup>st</sup> birthday, are eligible for after-care services until their 21<sup>st</sup> birthday;
- Youth who enroll in post-secondary educational and vocational programs may be eligible based on the criteria detailed in the Educational and Training Voucher (ETV) Program section.

All youth must have the opportunity to participate in independent living preparations, without regard to the youth's permanent plan. Refusal by the youth to participate is not a valid reason for non-participation. Independent Living Services are mandatory and not optional for all youth in care who are at least 14 years old or less than 21 years old. All youth in care are eligible and appropriate to receive Independent Living Services, based on the child's best interest. Some services are provided through a contractual agreement to include life skills training, retreats, youth conferences, and other services deemed appropriate. The Mississippi Band of Choctaw Indian Tribe youth are eligible for Independent Living Services based on the same criteria for DFCS youth in care. At this time, the MBCI administers their own Independent Living program.

#### **A. EDUCATIONAL AND TRAINING VOUCHER PROGRAM (ETV)**

The ETV Program, enacted in 2001, provides Mississippi with supplemental resources to meet the educational and training needs of youth aging out of foster care including post-secondary educational and vocational programs. This program makes vouchers of up to \$5,000 per year available to eligible youth attending institutions of higher education. This includes youth who have left foster care because they attained 18 years of age but have not yet attained 21 years of age; youth likely to remain in foster care until 18 years of age, commensurate with the State criteria used to determine eligibility for the program; and former foster care recipients, age 21 and younger. Students participating in the voucher program at age 21 and making satisfactory progress toward completing their course of study or training may continue up to age 23. Mississippi will provide vouchers to youth who are adopted from foster care after age 16 but have not yet reached 21 years of age. DFCS will comply with the Program Instructions that explains the CFCIP and ETV Programs by the implementation of the plan. Various methods have been described to ensure that the total amount of educational assistance to a youth under this program and any other Federal assistance program does not exceed the total cost of attendance. DFCS will strive to ensure and avoid any duplication of benefits under this and any other Federal assistance program.

During DFCS' first year of implementation of the Chafee Educational and ETV Program, several barriers resulted in Mississippi not utilizing the federally allocated funds. The following barriers were identified:

- Time required of social workers in completing the process, and shortage of workers.
- Cumbersome application and approval process

- Ineffective marketing of the ETV program

To maximize these funds for youth, DFCS requested technical assistance from the National Child Welfare Resource Center for Youth Development. To improve the use of ETV funds, the technical assistance will target the following areas:

- Strategies to more effectively administer the State's ETV funds;
- Clarification of "allowable expenses" as defined by the Higher Education Act of 1965; and
- Mississippi ETV application, approval, and award process.

The following strategies were implemented:

- Enlisted Southern Christian Services for Children and Youth (SCSCY) to assist youth with the application process to decrease the time required of DFCS social workers;
- Eliminated unnecessary steps in the ETV application approval and award allocation process; and
- Provided information on the ETV program to all interested parties including youth in care, foster and adoptive parents, group homes, residential facilities, mentors, stakeholders, secondary and post-secondary educational institutions.

The State Independent Living Coordinator attended various meetings to market the ETV Program in which youth were present and had the opportunity to discuss the ETV procedures and application process. The board meeting with the Court Appointed Special Advocate (CASA) included representatives from the courts, Attorney General's Office, and other helping professions. Various questions were asked and responded to of the possibilities of using ETV funds.

Mississippi's plan is to continue to use the assistance of SCSCY, along with agency staff to assist in identifying youth who are eligible for the ETV funds. The Scopes of Services details the services that will be provided by the Providing Resources, Education and Preparation to Adolescents Reaching Emancipation (PREPARE) Independent Living Specialists who assist eligible youth with the ETV application process. The plan for the new ETV approval process was shared with the DFCS Director, the seven Regional Directors, and all State Office Unit Directors. The State Independent Living Coordinator provided an in-service training, question and answer session on the revised ETV process with the PREPARE Program Director, the two Senior Independent Living Specialists, the seven Independent Living Specialists, and the Independent Living After-Care Specialist. The revised ETV Process has been well received by all.

The revised ETV approval process is as follows:

- Independent Living Specialists will assist in identifying eligible youth;
- The Independent Living Specialists coordinate financial aid application/packet with youth including the Free Application for Federal Student Aid (FASFA), Mississippi Tuition Assistance Grant (MTAG) and Institutional;

- The youth must first apply for, and have received confirmation and/or disapproval notices from applications made for the Pell Grant, MTAG, scholarships, or other grants for which the youth may have applied. The Independent Living Specialist must also factor in the sources and amounts of any other funds that may be available to the youth.
- The Independent Living Specialists coordinate ETV application with youth; and sends application to the County of Responsibility (COR) Social Worker and ASWS for signature; upon obtaining signatures;
- The Independent Living Specialists send ETV application to State Independent Living Coordinator for review;
- The State Independent Living Coordinator sends the ETV notification to the DFCS Administration Unit Director to ensure the county of responsibility has ample State Funds in the Mississippi Automated Child Welfare Information System (MACWIS) for the county to select an Education and Training Voucher Support Service;
- The State Independent Living Coordinator notifies (by phone or e-mail) the County of Responsibility (COR) Social Worker to expedite notice to enter the ETV support service request in MACWIS by selecting the Education and Training Voucher Support Service;
- County of Responsibility social worker enters the ETV request in MACWIS;
- A tickler (electronic notification) is received by the Area Social Work Supervisor to review/approve the ETV request in MACWIS;
- A tickler (electronic notification) is sent to the State Independent Living Coordinator;
- The State Independent Living Coordinator reviews/approves the ETV request in MACWIS;
- The ETV tickler (electronic notification) goes to the County of Responsibility Bookkeeper to be expedited;
- The County of Responsibility Bookkeeper prepares payment for the approved ETV Support Service provider (vendor or youth).

While the ETV application approval process has been revised, additional assessments of the process are still needed to improve timely approval. The National Resource Center for Youth Development (NRCYD), the Strategies for Assessing Independent Living Services (S.A.I.L.S.) Committee, and the State Independent Living Coordinator are collaborating to identify steps that can be taken to further reduce barriers for timely application approval. Strategies already in place to accomplish this task include:

- The SCSCY contract renewal was modified to include a revised scope of services based on the assistance with the application process.

ETV funds are used to assist foster youth and former foster youth with funds to successfully transition toward self-sufficiency. The availability of the funds will empower DFCS staff with the bargaining tools to encourage youth to attend college or vocational training schools. The expected outcomes of maximizing the ETV funds are:

- Youth will be able to enroll and complete post-secondary and vocational programs;
- Youth will be more marketable and able to broaden the spectrum of job opportunities;
- Youth will be able to afford better housing and transportation;

- Youth will be able to be more self-sufficient; and
- Youth will have an opportunity to break the cycle of dependency on the State.

DFCS plans to offer the following through ETV funds:

- Assisting with room and board for youth attending college;
- Assisting with enrolling eligible youth into a computer camp to train them on computer skills;
- Purchasing computers for youth participating in the ETV Program;
- Assisting with child care vouchers;
- Assisting with travel expenses to included insurance payments;
- Assisting with car insurance (liability);
- Assisting with membership to school related organizations;
- Assisting with preparatory test and study materials; and
- Providing payments for travel expenses incurred when going home for holidays or vacations, or payments for other housing when the college dormitories are closed.

	<b>Total ETVs Awarded</b>	<b>Number of New ETVs</b>	<b>Ongoing</b>
Final Number: 2013-2014 School Year (July1, 2013 to June 30, 2014)	101	45	56
2013-2014 Year* (July 1, to June 30, 2015)	106	38	68

#### **B. NATIONAL YOUTH IN TRANSITION DATABASE (NYTD)**

The Mississippi NYTD 2014 A Served Population and Baseline Population files were submitted to ACF on April 15, 2014. The Served Population A file contained 285 records and the Baseline Population A file contained 67 records. The files met the reporting requirements and were in compliance and error free. The NYTD 2014 Served Population and Baseline Population files were submitted to ACF on November 4, 2014. The Served Population B files contained 443 records and the Baseline Population B files contained 89 records. The files met the reporting requirements and were in compliance and error free.

The 2015 Follow Up (21) population and Served population reporting period began on October 1, 2014. The 2015 A Follow Up (21) and Served Population files will be submitted to ACF by May 15, 2015 and the 2014 B Follow Up (21) and Served Population files will be submitted to ACF by November 14, 2015.

The Independent Living Unit is currently working with MACWIS, MIS and the Policy Unit to address some observations made by Miguel Vierya at ACF concerning some of the data elements in our NYTD file submissions. Data elements 21, 22, 29, 30, 31 and 32 all have zero in the data

field captured. Miguel's intention was to make us aware of services we are providing but not capturing.

The Independent Living Unit is requesting the following data mapping changes in MACWIS to ensure accurate data collection required for the National Youth in Transition Database (NYTD):

Element 21 Academic Support is mapped to IL GED and GED Prep.

Element 22 Post Secondary Educational Support is mapped to SAT and/or ACT.

Solutions to Address Element 21 and 22:

- Update On the Job Training Manual (OJT) to reflect where data for element 21 and 22 is to be entered.
- Update the Mississippi Automated Child Welfare Information System (MACWIS) Pre-Service Training to reflect where data for Element 21 and 22 is to be entered.
- Request Reports from the Mississippi Information System (MIS) for youth reporting zero (0) to do Quality Assurance (QA) prior to file submission.

Element 31 Room and Board Financial Assistance is mapped to housing in the Services Tab. This element will be mapped to the youth's Board Payment paid by the state with defined parameters. Technical Assistance will be requested from Miguel Vieyra and Anthony Bingham to ensure that we are within federal compliance guidelines with remapping Element 31.

Element 32 Education Financial Assistance is mapped to GED and Tutoring in the Services Tab. This element will be mapped to Educational Training Voucher payments requested for youth in the Services Tab..

The Independent Living Unit provides quarterly training to all DFCS staff. This training focuses on Independent Living policy, Independent Living services and Roles and responsibilities of the workers. Included in this training is NYTD specific documentation instructions and data requirements.

The responses captured during the Baseline and Follow-Up Population Surveys have been compiled and posted on the Mississippi NYTD portal. This data is being used to better identify the needs expressed by the youth. Once the needs are identified, the Independent Living Curriculum will be modified to address the needs expressed by the youth. The data capture through the surveys allows us to provide services to youth based on their personal experiences, which better prepares them for successful transition to independence.

*Services that promote the healthy development of children and youth, promote permanency for all children and help prepare youth emancipating from the foster care system for self-sufficiency and independent living.*

**Program:** Independent Living Skills (ILS) Group Services is offered to youth in DFCS custody.

**Service Delivery:** The ILS service has been traditionally offered to youth beginning at age fourteen (14) in a small group setting in their County of Responsibility (COR) or their County of Service (COS). The Independent Living Specialist (contractor) uses a curriculum that has been approved by MDHS to teach life skills to promote self-sufficiency. In an effort to improve service delivery ILS have been modified to Independent Living Skills Retreats. The ILS retreats are held for one and a half days. Youth are required to take a pre-test and a post-test to measure skill/knowledge attainment.

**Curriculum/Life Skill topics:** Core concepts of the Casey Life Skills curriculum were used to develop the ILS curriculum. Additional resources from the National Resources Center for Youth Development and the Jim Casey Foundation were used to create a more robust curriculum. The topics covered are: Standing Strong, Living Life on Purpose, Make a fresh Start, Thinking Ahead, Social Awareness, and The Power of Independence.

**Program: Independent Living Apartment Placement**

An Independent Living Placement is a placement in an apartment house, or rooming house with supervision from a licensed placement agency. A youth who has attained age 18, meets the requirements listed in the "Responsibilities of the Youth" and is in the custody of DFCS will be considered for placement. A youth, who has attained age 17, in addition to the above requirements, must obtain a high school diploma, certificate of attendance or GED.

**Responsibilities of the Youth:**

- Be capable of creating a budget based on income and living within the created budget;
- Be employed and/or attending school with a plan to meet the needs of his/her budget;
- Be an active participant and maintain involvement in the ILP;
- Have a plan to cover the initial expenses;
- Be willing to sign and comply with a contract from the licensed placing agency, delineating specific rules and requirements. If the contract is not satisfactorily met, the youth must leave the Independent Living Placement Program;
- Teen parents shall provide verification of completing parenting classes; and
- Be willing to allow planned and unplanned visits to the residence by the Worker, the Specialist, the Placement Agency, and other DFCS staff.
- Provide assistance to DFCS Worker to secure necessary documentation.
- If the youth wishes to live with a roommate(s), the roommate(s) shall be a biological sibling who is also in DFCS custody.

**Program: Aftercare Services**

- Special financial assistance shall be provided for youth ages 18 until their 23<sup>rd</sup> birthday who left custody on or after attaining age 18. These services are available to youth **in crisis** who need additional temporary assistance to continue in the process of transitioning towards self-sufficiency. Youth may enroll in the after Aftercare Program through Southern Christian Services for Children and Youth (contract provider). Aftercare Services may include rent deposits, rent, utility deposits, utility payments, food and household supplies, and child care. Payment must be made to the vendor(s) and receipts kept in Southern Christian Services case file. These services are available to the

youth in the county where the youth currently resides by contacting the Transitional Care Coach. He/she will have to provide documentation or a statement from the court that the youth has been released from MDHS custody.

**Service Delivery:** The COR Worker assesses the youth's needs before creating a plan of action with the youth. The COR shall also assure that all other financial assistance options must be explored and exhausted prior to requesting aftercare services. The COR Worker must complete a Case Management service in MACWIS. All requests for funds will be reviewed and considered for approval on a case-by-case basis by the Independent Living State Coordinator.

***Independent Living Stipends:***

- **Pre-Assessment Stipend (Initial):** A \$25.00 stipend is available to all youth who complete a Life Skills Pre-Assessment form. This stipend is only given upon initial enrollment in the Independent Living Services. The Independent Living Specialist will document the completion of the pre-assessment and will notify the COR Worker that it has been completed by the youth. The Worker will submit the stipend request to the Independent Living Coordinator through MACWIS under State Funds.
- **Post-Assessment Stipend (Final):** A \$25.00 stipend is available to all youth who participate in the Independent Living Program and complete a Post-Assessment. This stipend is given after completion of the Post-Assessment upon being released from custody. The Independent Living Specialist will document the completion of the post-assessment and will notify the COR Worker that it has been completed by the youth. The Worker will submit the request to the Independent Living Coordinator through MACWIS under State Funds.
- **Life Skills Training group Stipend:** A \$20.00 stipend can be earned for the completion of six (6) Skills Hours. These skills groups are available through the Independent Living Specialist. The Specialist will document earned skills hours and will notify the COR Worker that the youth has accumulated the required hours. The Worker will submit the request to the Independent Living Coordinator through MACWIS under State Funds. Youth will receive hour for hour credit for skills group participation. This stipend will be issued directly to the youth. Teen parents shall receive six (6) hours for completion of parenting classes.
- **Youth Opportunity Training Stipend:** A \$20.00 stipend can be earned for attending a Youth Opportunity Training. These trainings are planned through the Independent Living Specialist. The Specialist will document satisfactory participation in the training and will notify the COR Worker. The Worker will submit the request through MACWIS under State Funds. This stipend will be issued directly to the youth.
- **Youth Conference Stipend:** A youth will receive a \$30.00 cash stipend for successful completion of participation in the annual conference. The Independent Living Program's private contractor will pay this stipend to the youth at the completion of the conference. (Youth are eligible to receive a \$30.00 Youth Conference Allowance prior to attending the Youth Conference. The stipends will be requested in MACWIS by the COR Worker.)
- **Newsletter Stipend:** A \$15.00 stipend is available to youth who submit an article, poem or other creative writing, as well as a letter to the editor, or an editorial to the State Independent Living Coordinator for consideration for publication in any MDHS

publication. The youth may send the submission directly to the State Independent Living Coordinator, MDHS Placement Unit, the COR Worker or the COS Worker who may submit the writing for the youth. The COR Worker will request the stipend in MACWIS and, upon approval, will issue the check directly to the youth.

- **Senior Year Stipend:** A \$350.00 stipend is available to help defray senior/final year expenses for youth receiving a diploma, GED or a Certificate of Attendance at the close of the school/program year in which the stipend is requested. The youth shall also be a participant in Independent Living Program activities. This stipend should be requested during the youth's senior year, in MACWIS, by the COR Worker under State Funds. This stipend must be issued to the vendor(s). A re-imbusement payment may be issued to an individual/party, including the youth, in the event a purchase was made, and proof of payment was rendered. An itemized receipt must be presented to the COR bookkeeper before a check can be issued. A statement from the youth's school verifying enrollment, as a senior/final year with anticipated graduation/completion being that same academic/program year, must be filed in the paper case record in the county. Typical senior/final year expenses include, but not limited to, pictures, invitations, cap and gown, prom attire, senior trip expenses. All purchases must be receipted and all receipts kept in the COR office.
- **High School Graduation Stipend:** A \$100.00 Graduation Stipend is available to all youth in custody who receive a high school diploma. A copy of the diploma must be filed in the paper case record in the COR office. This stipend can be accessed from the appropriate MACWIS screen. This one-time should be issued to the youth as a graduation gift to spend as the youth wishes. A signed receipt from the youth must be sent to the bookkeeper in the COR.
- **GED (General Equivalency Development)/Certificate of Attendance Stipend:** A \$100.00 Stipend is available to all youth in custody who receive a Certificate of Attendance, or pass the GED. A copy of the certificate or diploma must be filed in the paper case record in the COR office. This stipend can be accessed from the appropriate MACWIS screen. This one time stipend should be issued to the youth as a gift to spend as the youth wishes. A signed receipt from the youth must be sent to the bookkeeper in the COR.
- **College Bound Stipend:** A \$300.00 College Bound Stipend is available to youth in care who plan to attend a post-secondary education program. This stipend is requested through the appropriate MACWIS screens after the COR Worker receives verification that the youth has been accepted in a post-educational program. This stipend must be issued to the vendor(s). A reimbursement payment may be issued to an individual/party, including the youth, in the event a purchase was made, and proof of payment was rendered. An itemized receipt must be presented to the COR bookkeeper before a check can be issued. All purchases must be receipted and all receipts kept in the COR office. Allowable purchases are items needed to furnish a residence (on or off campus) such as, but not limited to: bedspread, curtains, rugs, refrigerator, microwave, trunk, bookcase, small appliances, computer, furniture items, and books/resource materials.
- **College Graduation Stipend:** A \$100.00 stipend is available for youth until their 21<sup>st</sup> birthday who complete a two-year community college, four-year college/university or full completion of a vocational program. Upon proof of graduation, this one-time stipend

should be requested in MACWIS by the COR Worker and must be given to the bookkeeper in the COR.

- **Start-Up Stipend:** A \$300.00 Start-Up Stipend is available to youth who leave care after turning age sixteen (16) and who have participated in the available Independent Living Program activities. The youth must have been in care for a minimum of six (6) months. This stipend may be requested during the six months prior to release from custody and up to the six months following release from custody. Youth who have been approved for the Independent Living Placement, shall have the option to utilize this one-time stipend upon approval. This stipend must be issued directly to the vendor(s). A reimbursement payment may be issued to an individual/party including the youth in the event a purchase was made and proof of payment was rendered. An itemized receipt must be given to the COR bookkeeper before a check can be issued. All purchases must be receipted and all receipts kept in the COR office. Acceptable purchases may include any items associated with the establishment of a home such as, but not limited to: dishes, cooking utensils, appliances, linens, furniture, cleaning supplies, curtains, and rugs. The COR Worker should request this one-time stipend through the appropriate MACWIS screens. A youth released from custody at age 17 or older and already has a job may use a portion of this stipend to assist in the purchase or repair of a vehicle, if the vehicle is needed in the youth's job and as long as the youth already has the minimal essential items needed to live independently. This youth must show proof of having a driver's license and State required liability insurance.

**Teen Advisory Board (TAB):** The mission of the Teen Advisory Board is to promote youth leadership and self-advocacy. The Teen Advisory Board aims to accomplish this mission by using the members' abilities to analyze strengths and weaknesses, set and reach personal goals, and develop self-confidence and self-motivation. Teen Advisory Board members express leadership by being role models in their communities and teaching, guiding, and influencing others to be of service.

TAB participation is currently limited to three (3) youth per region, with additional TAB members as advised by the TAB Coordinator in order to cover gaps in representation or youth leaving care.

Participation in the Teen Advisory Board entails the following responsibilities for the youth:

- Monthly attendance at Regional Meetings held in all 13 MS DHS Regions
- Quarterly attendance at State-Wide Meetings
- Participation in IL Skills Retreats as Color Group Leaders
- Provide youth perspective in planning IL activities and conferences
- Contribute to the production of a quarterly newsletter for all youth in care

Benefits to Teen Advisory Board participation:

- Priority slots at IL Skills Retreats
- Stipend for participating in State-Wide Meetings
- Leadership and Self-Advocacy training

- Opportunity to effect positive change in the foster care system

Leadership training for Teen Advisory Board members will focus on the areas of developing personally, driving change, and leading others. This training will be accomplished at Regional Meetings in addition to TAB business. Currently, the TAB agenda comprises:

- **TAB Development**
  - Developing the quarterly newsletter
  - Instituting after-care services for youth aging out of care
  - Publicizing youth rights
- **Permanence**
  - The right of siblings to be placed together
  - Opportunities for youth to connect with extended family
  - Family visitations with extended family, similar to sibling visitation
  - Re-considering reunification for youth who remain un-adopted after termination of parental rights
- **Housing**
  - Less punitive rules in group home placement
  - More privileges and freedoms for youth placed in group homes
- **Health & Mental Health**
  - Extend Medicaid support for youth 18 and older
- **Financial Capability**
  - Receipt of living allowance from foster parents
    - Use of a contract to hold foster parents accountable
    - Contingent upon developmental readiness
  - Savings accounts for youth exiting care
  - Financial education for youth
  - Hygiene products paid for separately from living allowance
  - Increased clothing allowance
  - Financial stability for youth aging out of care
  - Priority for youth in care for items at state auctions such as computer equipment and vehicles
  - Low cost insurance for youth aging out of care
- **Social Capital/Developing Independence**
  - Provide more opportunities to develop independence.
  - Address the issue of youth becoming conditioned to needing permission for everything.
  - Address the issue of stigmatization caused by the need for home inspections and background check required for spending time with friends.
  - Greater youth involvement in case planning.
  - Make case planning a youth driven process.
  - Offer a complaint hotline for youth that will be monitored and investigated.
- **Education**
  - Easier access to out-of-state secondary education
  - Less restrictive use of ETV funds
- **Systems/Staffing**

- More caseworker visits
- Better foster parent training
- Additional caseworker requirements:
  - Transport youth to required planning/team/court/meetings.
  - Visit youth more often.
  - Receive face-to-face feedback from youth effectively.
  - Better inform youth in care as to policies and navigating the foster care system.
  - Provide an explanation for court participants, such as the judge, guardian ad litem, CASA worker, etc.

**Independent Living Objectives:**

- The sub grantee will employ Program Director who will coordinate all facets of the Independent Living Program state wide from a central office, preferably in the Jackson area where coordination with State Office can be maintained, two (2) senior Independent Living Specialists, seven (7) Independent Living Specialists and one (1) After-Care Specialist;
- Assist stakeholders ages 14 to 21 in preparing for adulthood and self-sufficiency to ensure safety, permanency and wellbeing;
- Form working collaborations with community partners to assist stakeholders while in foster care and after emancipation;
- Educate youth in the areas financial management, housing, community resources, employment, communication, social development, abstinence, decision making and healthy decisions;
- Recommend possible alternatives for stakeholder’s in-care transitioning to adulthood that might increase the effectiveness of self-sufficiency;
- Implement the National Youth in Transition Database (NYTD) to track stakeholders at the age of seventeen (17), nineteen (19), and twenty-one (21).

**Independent Living Goal:**

To provide youth and young adults in-care and transitioning out of care with an array of services and resources to assist them in making a successful transition to become independent adults.

**Action Steps:**

- Independent Living will provide community awareness of the needs of stakeholders in and out of care by participating in available local forums and focus groups to openly express and advocate for services/resource to benefit stakeholders.
- Provide Independent Living Training to MDHS/DFCS staff and MDHS/DFCS licensed Resource Parent Training through quarterly Independent Living trainings, conferences, foster/resource parent trainings and/or other venues.
- Provide youth age 14 to 21 with life skills education through Life Skill Module training.

- Provide Aftercare services to youth age eighteen (18) to age twenty-three (23) through to assist in helping youth make a successful transition to adulthood.

## **VI. MONTHLY CASEWORKER VISIT DATA AND STATE PLAN REQUIREMENTS**

DFCS continues to look at various options to utilize the available IV-B Subpart 2 funding, recognizing that the quality of front-line staff, worker turnover, high caseloads, overwhelming administrative burdens, lack of supervisory support and the minimal level of knowledge and experience of staff are some of the challenges of public child welfare staff recruitment and staff retention that can affect children's safety and permanency. Systemic improvement, such as accreditation and the enhancement of supervisory training and supports are expected to lessen worker stress by improving the working environment. The Accreditation process has facilitated high-quality service delivery because it requires reasonable caseloads and reduces the number of staff a supervisor must oversee. Supervisory training that focuses on leadership skills and clinical practices will help in improving communication and decision making.

MACWIS allows for tracking the caseworker visits with the child. The criterions for this contact to be counted are:

- Any assigned DFCS caseworker responsible for the child (either from the county of responsibility/jurisdiction or the county of service) must be the same person who made and documented the visit
- At least one visit must have occurred in the child's placement setting
- The visit must be documented as:
  - Foster Child
  - Face-to-Face visit
  - Child's name shall be included as a participant
  - Location of the visit (or home/placement setting contacts)

All children who are in DFCS custody are included in the reporting population.

DFCS policy requires the County of Responsibility (COR) worker to maintain twice monthly face-to-face contact with all foster children placed in the COR County. If a foster child remains in Mississippi, but is placed outside the COR, the County of Service (COS) worker is responsible for making the monthly face-to-face visits with the child, beginning the calendar month after the child is placed (the COR worker will see the child in the placement month).

The assigned DFCS direct service worker, regardless of whether a child's foster care placement is being directly supervised by DFCS or by a contract agency, shall meet with the child in person and, where age-appropriate, alone at least twice monthly to conduct such visits. During these visits, the worker will assess the child's safety and well-being, service delivery, and achievement of permanency and other service goals. This assessment should be on-going and the need for more frequent visits by the Worker should be documented. At least one of the monthly visits must be in the placement setting. Visiting with the child outside the placement setting is suggested in order to

allow the child to freely express his/her feelings about the placement. The COR Worker will also visit the child quarterly in the placement setting. Twice monthly contacts will be documented in MACWIS within 5 working days of the visit.

In the cases where special circumstances exist, including, but not limited to, children with ICPC placements or children who are on runaway status, an explanation must be documented in the narratives as to why contact was not possible. Children in custody, who are placed out-of-state in facilities or with relatives and are not being seen by the receiving state staff, should be seen once every six months by Mississippi DFCS staff and the visit documented in MACWIS. (42 U.S.C. 675 § 475(5)(A)(ii)). More frequent contact may be required at the discretion of the ASWS.

DFCS requests that all children placed through ICPC in another state receive contacts at a minimum of once a month in the placement setting by the worker in the receiving state. It is also the expectation of DFCS staff to have contact with children placed through ICPC in Mississippi to be seen according to policy for Mississippi children.

Some children may be in care in Mississippi, but their parents or primary caretakers have moved out of state. Even if Mississippi has requested that the state of residence work with the parents, the Mississippi direct service worker must continue to maintain bi-monthly face-to-face contact with the child. A report on such visits is submitted to the child welfare agency of the state where the child's parents are located so the state of residence may be able to share with the parents the child's safety and well-being.

If the child in custody is being seen face-to-face once a month in the placement by the receiving state staff, a report on the visit by the Receiving State Staff should be sent to the DFCS of the state in which the child's parents reside so that DFCS may share the information with the child's parents. The report must detail the child's circumstances and the extent to which the out-of-state placement meets the child's best interest or special needs.

If the Receiving State has not reported the face-to-face contact for the month, DFCS staff must contact the Receiving State for the information. This information shall be entered in MACWIS. More frequent contact including telephone calls and emails shall be made by the COR Worker. The specifics of the annual report are defined by the Children's Bureau Program Instruction (ACYF –CB-PI-12-01) issued January 6, 2012:

- For each FFY's 2012 – 2014: The total number of visits made by caseworker on a monthly basis to children in foster care during a fiscal year must not be less than 90% of the total number of such visits that would occur if each child were visited once every month.
- For FFY 2015 and each FFY thereafter: The total number of visits made by caseworker on a monthly basis to children in foster care during a fiscal year must not be less than 95% of the total number of such visits that would occur if each child were visited once every month.
- FFY's 2012 and thereafter: At least 50% of the total number of monthly visits made by caseworkers to children in foster care during a fiscal year must occur in the child's residence.

Under this instruction, Mississippi is not required to report visits for youth in foster care who are age 18 and older. Mississippi is required to report caseworker visit data for youth who meet the following criteria:

- Experienced at least one full month in custody during the reporting FFY
- Children placed in an out-of-state foster care placement are included in the data reporting population of the state that has placement and care responsibility
- Children who are on trial home visit
- Children who are on run away status from a foster care placement
- Children in foster care who are covered by a title IV-E agreement between the State title IV-E agency and an Indian Tribe or another agency

To prevent duplication of the number of children in the reporting population, a child with more than one foster care episode during the 12- month period is considered one child.

<b>Reporting Year</b>	<b>Projected Face-to-Face Contact</b>	<b>Projected Contact in Placement Setting</b>
2013	90.0%	58.08%
2014	90.0%	58.08%
2015	95.0%	58.08%
2016	95.0%	58.08%

DFCS FFY 2013, 2014 and 2015 Worker/Child Contact is as follows:

<b>Reporting Year</b>	<b>Face-to-Face Contact</b>	<b>Contact in Placement Setting</b>
2013	66.20%	88.38%
2014	87.17%	92.78%
2015	86.22%	91.27%

Mississippi is required by the MSA to make two caseworker visits with child, with one visit in the placement, and the visit must be made by the assigned worker, which exceeds the federal requirement above.

The supervisor training listed below is focused on improving the quality or supervision with the goal of improving upon the quality of work done in the field. The supervisors will be presented with data regarding their units that will speak to quality visits with children. Individual professional development plans will be developed with supervisors regarding underlying

conditions, barriers, needs that cause visits to not be what is needed. Coaches will determine the skills that can be built by training and targeted specific coaching that will improve direct practice, including quality visits. Supervision is the link that needs to be built up that will lead to quality visits

**Intensive Supervisory Support** activities are being added to the scope of services in the agency's contract with Center for the Support of Families (CSF) to assist DFCS in building capacity of county supervisors to manage the work, lead change efforts in their counties, and help their staff to perform consistently high quality work with children and families.

While all supervisors will receive basic coaching in practice model implementation through the coaching activities, there is a need to provide more intense support to supervisors in order to reach the goals of the Settlement Agreement. Newer supervisors will have benefit of the revised pre-service training that MDHS is now offering through a contract with the University of Mississippi, and that those newer supervisors also have opportunities for mentoring through the training program. However, veteran supervisors have not had the same opportunities and there is a need to build capacity among both newer and veteran supervisors since the Practice Model involves practicing differently than many staff may be accustomed to, and the Settlement Agreement provides specific goals and outcomes that must be achieved regionally and statewide each year.

As CSF has worked with county supervisors, they believe that more than one strategy is needed to provide the intensive supervisory support needed. For example, there may be some areas that need to be addressed across the supervisory pool through the development and provision of additional coaching labs that will include all supervisors; some veteran supervisors may need more one-on-one mentoring to adapt to the Practice Model requirements which would go beyond basic coaching; and other supervisors may require extended and more focused coaching in order to build their capacity. Therefore, activities in this category of technical assistance will include a combination of individual mentoring for identified supervisors, aggregate coaching labs for supervisors on topics directly related to meeting the requirements of the Settlement Agreement, and expanded and targeted coaching for individual supervisors identified in collaboration with DFCS and CSF.

## **VII. ADOPTION INCENTIVE PAYMENTS**

The Adoption Incentive Payments Program allows DFCS to enhance the state's adoption program in a number of ways. These funds have already been used for the following:

- Provide Structured Analysis Family Evaluation (SAFE) Home Study training, materials, and support for all Adoption staff within DFCS and private child placing agencies in Mississippi;
- Provide Life Book kits in each DFCS county office for use with all children entering foster care;
- Fund recruitment activities and adoption matching events across the state;
- Purchase Resource Parent Pre-Service Curriculum to enhance the training being provided to Foster and Adoptive parents across the state of Mississippi.

Over the next five years the agency plans to use these funds in the following ways:

- Continue all of the above as needed;
- Train select DFCS staff from across the state and in state office in the 3-5-7 Model of Preparation and Assessment of the readiness of foster youth for adoption, and the Family Finding Model;
- Convene an annual adoption conference to cross train adoption and independent living staff with a focus on transitioning teens from foster care with strong permanent connection;
- Enhance the state's post-adoption services by identifying and developing foster and adoptive parents as leaders to build stronger support groups linked by a statewide association in conjunction with identifying and developing leadership for a state foster care alumni association;
- Develop a foster and adoptive parent mentoring program where newly licensed foster and adoptive parents are connected to more experienced parents;
- Provide more training opportunities and easier access to training for both resource parents and DFCS staff through online training programs such as [fosterparents.com](http://fosterparents.com) and [fosterparentcollege.com](http://fosterparentcollege.com);
- Provide DFCS staff and resource parents from across the state with opportunities to attend adoption-related, permanency focused training both in-state and out-of-state;
- Expand child-specific recruitment activities such as printing and distributing materials, hosting Heart Gallery-like events, and working with private adoption agencies to recruit adoptive families for children lingering in foster care.

Expand pre-service certification process to include Partnering for Safety and Permanence-Model Approach to Partnerships in Parenting (PS-MAPP) curriculum.

## VIII. INTER-COUNTRY ADOPTIONS

On November 4, 2014, the Deputy Administrator of Family and Children's Services and the Director of Family and Children's Services met with Bureau Directors and/or staff from Policy, Permanency Planning and Placement-Adoption, MACWIS, Professional Development, Administration Units and the CFSP coordinator to discuss tracking international adoptions pursuant to 422(b)(12).

Currently, DFCS does not track international adoptions. The DFCS ICPC Unit ceased processing international adoptions on December 31, 2012. DFCS is in the process of developing a new SACWIS System that will be capable of tracking the information required.

DFCS proposes the following plan to track the required information for international adoptions until the new SACWIS system is developed.

The Adoption Unit Director and Adoption Manager will develop a form the field staff will use to report the information to the Adoption Unit. This form will be available to staff on the DFCS

Connection Website. A designated email address was created specifically for receiving this information, and Adoption Unit staff will be responsible for checking the email.

The Adoption Unit Director and Adoption Manager will develop an Excel Spreadsheet that will, at a minimum, track the following:

- Children who were adopted from other countries and who entered into state custody;
- The country from which the children are adopted;
- The agent or agencies that handled the adoption;
- The plans for each child; and
- The reasons for the disruption or dissolution of the adoptions.

For FY 2013, FY 2014 and FY 2015 through January 31, 2015, Mississippi will ask Regional Director's to compile the above required information for the spreadsheet, and submit to State Office for review. DFCS will submit this information to the Children's Bureau on the next APSR.

Regional Directors were asked to report on any disrupted adoptions that occurred between October 1, 2012-January 31, 2015. The deadline to report this information is February 16, 2015.

All regions were asked to report this information, and there were no reported disrupted or dissolved international adoptions that resulted in a child coming into state custody during the above time frame.

The Deputy Administrator will send an email to all DFCS staff informing them of the requirements to document these changes. Regional Directors will be trained on the changes in December 2014 at the Senior Management Meeting, and they will have through January 31, 2015 to address these requirements with their ASWSs and staff. Regional Directors will maintain sign-in sheets and agendas of staff meetings as evidence of completing this training, and will forward copies of both to state office.

A Memorandum was drafted detailing the new requirements, and the memo has been posted on the DFCS Connection Website under "Memos and Messages." The Memo was also distributed to all staff via email.

Regional Directors were asked at Senior Management to address the changes at their staff meetings before January 31, 2015, and submit agendas and sign-in sheets to State Office.

Pre-Service Training and Clinical Supervisory Training will be revised to incorporate a segment addressing "Disruptions and Dissolutions of Adoptions." This will be delivered to all new front-line staff and supervisors. Revisions to the curricula will be made during the first quarter of 2015, and will be implemented with the following training class.

The memorandum that was distributed to all staff via email on January 30, 2015 has been incorporated into Pre-Service Training for all new staff and Clinical Supervisory Training for all new supervisors effective February 1, 2015.

Beginning no later than February 1, 2015, all ASWS's must answer in narrative form the following questions before approving an investigation or opening a case recommending that children come into state custody.

- Was this child adopted prior to entering custody?
- If so, was this child adopted from another country?

The ASWS will confirm with the Investigating Worker that these questions were asked as part of the investigation. The ASWS will write a short statement that the worker asked if the children were ever adopted, and if yes, was the child adopted from another country. The ASWS will document the answer in MACWIS, on the "Supervisor Approval of Findings" tab of Investigation in the Supervisor's Comments section. If the case is a Voluntary Placement, CHINS or Refugee case, the ASWS will document that both questions were asked in the Supervisor's Explanation for Decision box of the "Screening" screen before approving the case to be opened.

If the answer is "Yes," that the child was adopted prior to entering custody, the ASWS will complete the attached form as thoroughly as possible and submit to the Adoption Unit at State Office. The Adoption Unit will input the collected information into a spreadsheet for tracking.

Revisions to DFCS Policy will be made with an estimated completion date of September 30, 2015 for Final Action on Rules to be approved by the Mississippi Secretary of State's Office.

The Policy Sub team briefly addressed this issue on December 17, 2014. On April 8, 2015, the sub team agreed to revise DFCS Policy, Section B. Intake and Assessment, to include the language below from the memorandum that went to all staff. The Policy Director will determine where this language should be included in Section B.

There will also be a revision to DFCS Policy, Section G. Adoption.

DFCS has identified 20 disrupted adoptions between October 1, 2012-January 31, 2015. None were international adoptions.

October 1, 2012 – September 30, 2013	3
October 1, 2013 – September 30, 2014	16
October 1, 2014 – September 30, 2015	1 (as of April 30, 2015)

## **IX. CHILD WELFARE DEMONSTRATION ACTIVITIES**

(Not applicable in Mississippi)

## **X. TARGET PLANS WITHIN THE CFSP**

**A. FOSTER AND ADOPTIVE PARENT DILIGENT RECRUITMENT PLAN**

(See Appendix E: Foster and Adoptive Parent Diligent Recruitment Plan)

**B. HEALTHCARE OVERSIGHT AND COORDINATION PLAN**

(See Appendix D: Healthcare Oversight and Coordination Plan)

**C. DFCS DISASTER PREPAREDNESS PLAN**

(See Appendix G: DFCS Disaster Preparedness Plan)

The Plans Bureau of the Mississippi Emergency Management Agency is responsible for providing emergency planning assistance to state agencies and local governments including the Mississippi Band of Choctaw Indians, as well as regional and national emergency planning initiatives. Additionally, the bureau manages all program requirements for the Hazardous Materials Program, Local Emergency Planning Committees, Waste Isolation Pilot Program, Radiological Emergency Preparedness Program, Earthquake Program, Hurricane Program and Continuity of Operations and Continuity of Government planning assistance for state agencies. All of these efforts are directed at preparing local communities with effective planning tools utilizing an all hazards approach.

Disasters can affect the way our agency operates and the services we provide for children and their families. The Disaster Plan, while specific to Mississippi, may be expanded and impacted by State and Federal mandates during disasters that have wide reaching implications which may be beyond our standard scope of operations. The purpose for this plan is to establish certain operational procedures and guidelines which will facilitate the execution of the DFCS staff's essential mission functions during various emergency situations such as natural disasters, accidents, technological emergencies and military or terrorist related incidents. The plan was put in place so that workers in affected areas can have a primary contact to obtain information on foster children and parents. All DFCS staff are on call during a disaster to provide any assistance to social workers or foster parents who may call to get information. Implementing the plan has alleviated stress for many in trying to locate children and parents in the event of another natural disaster.

The most common natural disasters that afflict our state include: Hurricanes, Tropical Storms, Severe Electrical Storms, Tornadoes, High Winds, Flash Flooding, and Winter Storms. Other disasters are manmade, such as: Hazardous Material incidents (chemical, biological, radiological), Technological (electrical power blackouts, computer system and network disruptions, electronic equipment breakdown) and Terrorist Attacks. In the event of a disaster, the Division Director is in charge of the execution of the Disaster Plan. Alternates include, Deputy Director, Director of Field Operations, and Unit Directors as designated by the Division Director.

**D. DFCS TRAINING PLAN**

(See Appendix C: DFCS Training Plan)

**XI. FINANCIAL INFORMATION**

## **A. PAYMENT LIMITATIONS TITLE IV-B SUBPART 1**

The Mississippi Department of Human Services, Division of Family and Children's Services utilized FY2005 Child Welfare Services (CWS) funds to assist the State in providing the following:

- a. Adoption Assistance Payments: \$ 1,589,638 (FFP)/ \$529,879 (State Match)
- b. Foster Care Maintenance Payments: \$2,179,983 (FFP)/ \$726,661(State Match)

## **B. PAYMENT LIMITATIONS TITLE IV-B SUBPART 2**

The FY1992 base year amount for Title IV-B, Subpart 2, Promoting Safe and Stable Families grant required to meet the non-supplantation requirements in Section 432(a)(7)(A) of the act for the State of Mississippi was \$900,347.

## **XII. CAPTA STATE GRANT**

### **Child Maltreatment Deaths**

There were 22 child fatalities as a result of substantiated maltreatment of abuse and/or neglect in FFY 2014 (October 1, 2013 - September 30, 2014), as officially validated for NCANDS. There were 11 child fatalities in FFY 2013, seven child fatalities in FFY 2012, 13 child fatalities in FFY 2011, and 17 child fatalities in FFY 2010.

### **Family Support Services**

MDHS contracts with various agencies to provide programs focusing on support services to high risk families through respite care and supervised visitation. These providers offer various programs and services to children of single parents including: resource referrals, parent education, one-on-one case management, home based instruction, supervised visitation, teen parent support, support groups, community education, and counseling. The CFSSP program uses a portion of family support services funding for their contract with MCHS

Several of these services are available to families living in Central and East Central Mississippi. Families living in East Central Mississippi receive services through the Starkville School District and those in Central Mississippi receive services through Catholic Charities Inc.

The CBCAP grant funds contracts with Starkville School District and Catholic Charities Inc. Starkville School District provides parenting classes/support groups, home visitation for expectant parents and parents of newborns, case management for providing concrete supports, and temporary respite services. They use the evidenced based curriculums *Active Parenting* and *Nurturing Parenting*. The target population, teen parents or expectant parents, are offered the 3-tier home visitation/respite program utilizing *Prenatal&Birth-5 years Nurturing Parenting*.

Catholic Charities Inc. offers marriage therapy to parents with children less than 18 years of age. They also offer trauma therapy for adult survivors of child sexual, or physical abuse, domestic violence survivors and underserved African American/English as second language or undocumented populations and former unaccompanied refugee minors. It is beneficial to the children to offer services to help maintain the family unit.

### **XIII. STATISTICAL INFORMATION**

#### **A. JUVENILE JUSTICE TRANSFERS**

For FFY 2014, monthly data reports identified 7 children that exited DFCS custody who transferred to another agency.

Of these seven children, three children were transferred to adult correctional facilities; two were transferred to mental institutions; one was transferred back to a tribe; and one was transferred to another states child welfare system.

#### **B. INTER-COUNTRY ADOPTIONS**

During FFY 2014, there were approximately 1,233 ICPC cases handled either for placement of children from other states into Mississippi or placement of Mississippi children in other states with relatives. This number includes closures, approvals, Regulation 7 Priority Placements (expedited referrals that must be completed in 20 workdays), disruptions and residential treatment facility placements. During FFY 2014, 188 ICPC adoption cases were handled. As of January 1, 2013, DFCS no longer process requests for international adoptions. During FFY 2014, ICPC processed a total of approximately 1,421 cases.

#### **C. CHILD WELFARE DEMONSTRATION PROJECTS**

Mississippi does not have a child welfare demonstration project at this time.

#### **D. ADOPTION INCENTIVE PAYMENTS**

In FFY 2013 Mississippi received \$540,000.00 in adoption incentive payments and finalized 346 adoptions in that same period. These funds were or will be used to:

- Provide equipment for the Resource Units. Equipment includes laptop computers, projectors, color printers, portable scanners, banners, and cameras.
- Send resource staff to national conferences and training events, such as National Foster Parent Conference, North America Conference on Adoptable Children Annual Conference, and “Lookin’ to the Future,” an annual conference in Mississippi with a dedicated adoption track.
- Present an annual Permanency Conference in MS that focuses on the importance of every child having a permanent family.
- Purchase updated MS PATH training manuals for each of the 13 regions;
- Maintain a structured home study format, the S.A.F.E. home study, available through the Consortium for Children. Mississippi plans to implement a single, consistent home study

format agency-wide and reach out to private providers to encourage them to use the same.

- Enhance the child-specific adoption recruitment services by adding another recruiter to work with the teens that are free for adoption.
- Bring specific trainings to staff including 3-5-7 Model by Dr. Darla Henry and Family Findings Model with Bob Friend.
- Work toward an Adoptee Search Program by getting all adoption files prepared for scanning.
- Bring Adoption Competency Training for Therapists to Mississippi.
- Assist field staff in recruiting and licensing new resource homes.
- Build a statewide Resource Parent Support Group Association.

#### **E. EDUCATION AND TRAINING VOUCHERS**

MDHS/DFCS Independent Living unit continues to encourage all eligible stakeholders attending college or vocational training schools to enroll in the Education Training Voucher program (ETV) by disseminating brochures to stakeholders outlining the benefits and requirements of the program. 106 (unduplicated) youth were awarded ETV for the year 2014.

### **XIV. CHILD AND FAMILY SERVICES REVIEWS (MAY 2010 AND PERFORMANCE IMPROVEMENT PLAN (APRIL 2011-2013))**

The May 17-21, 2010 Child and Family Services Review (CFSR) was conducted on site in Hinds, Desoto and Lauderdale Counties in Mississippi.

#### **2010 CFSR Outcome Findings**

The 2010 CFSR identified the following areas of high performance with regard to the State's performance in achieving the outcomes assessed during the review:

- Items pertaining to repeat maltreatment and foster care reentry were rated as Strengths for the State.
- The State met the national standards for the data indicators pertaining to (1) absence of maltreatment recurrence, (2) timeliness and permanency of reunification, (3) timeliness of adoptions, and (4) permanency for children in foster care for extended time periods.
- Although the State's performance on Safety Outcome 1 (Children are, first and foremost, protected from abuse and neglect) did not meet the required 95 percent level for substantial conformity, performance on this outcome was fairly high, with the outcome being substantially achieved in 85.7 percent of the cases.
- Although the State's performance on the items pertaining to timeliness of investigations, proximity of placement, placement with siblings, and physical health of the child did not reach the 90 percent level required for an overall rating of Strength, these items were rated as Strengths in over 87 percent of the cases.

The State did not meet the national standards for the data indicators pertaining to (1) absence of maltreatment of children in foster care by foster parents or facility staff and (2) placement stability.

The CFSR evaluated state performance on seven outcome areas and Mississippi did not achieve substantial conformity with any of the seven child welfare outcomes for safety, permanency, and well-being. The CFSR documented several areas of concern, including the following:

Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect was substantially achieved in 85.7 percent of the applicable cases.

Mississippi Department of Human Services (MDHS) was found to be inconsistent in its efforts to address the safety of children who come into contact with the child welfare system. A key finding was that MDHS was not consistent in regard to initiating investigations within the State's time frames.

Safety Outcome 2: Children are safely maintained in their homes whenever possible was achieved in 42.2 percent of the applicable cases reviewed.

This raised concerns that some children are not being sufficiently protected from risk of harm while in their own homes due to the insufficiency or lack of preventative and in-home services. There are concerns that children remain at risk in the home due to services not targeting the key safety concern for the family or no services being provided.

Permanency Outcome 1: Children have permanency and stability in their living situation was substantially achieved in 25 percent of the 40 foster care cases reviewed.

Although Mississippi met the national standard for the data indicators pertaining to timeliness and permanency of reunification, timeliness of adoptions, and permanency for children in foster care for extended time periods, the State did not meet the national standard for the data indicator pertaining to placement stability.

Permanency Outcome 2: The continuity of family relationships and connections is preserved for children, was substantially achieved in 30.8 percent of the 40 foster care cases reviewed.

The CFSR findings indicated that MDHS did not make concerted efforts to ensure that children in foster care are placed, when appropriate, in close proximity to their parents and communities of origin. Also, MDHS was not consistent in its efforts to (1) place siblings together; (2) establish frequent visitation between children in foster care and their parents and siblings; (3) preserve connections for children in foster care with their neighborhood, community, school, friends, extended family or faith; (4) seek maternal and paternal relatives as potential placement resources; and (5) promote or maintain a strong, emotionally-supportive relationship between children in foster care and their parents.

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs, was substantially achieved in only 15.6 percent of the 64 cases reviewed.

CFSR findings for this outcome indicated that MDHS is not consistent in (1) meeting the service needs of children, parents, and foster parents; (2) involving children and parents in the case planning process; and (3) establishing face-to-face contact with children and parents with sufficient frequency to ensure children's safety and well-being.

Well-Being Outcome 2: Children receive appropriate services to meet their educational needs, was substantially achieved in 73.8 percent of the applicable cases. The CFSR findings cited that MDHS did not consistently address the educational needs of children in in-home cases where there was clear evidence that the child(ren) in the family had education-related needs. Stakeholders noted that when educational needs were not being met it was due primarily to large caseloads and/or a lack of effective collaboration between MDHS and local school systems.

Well-being Outcome 3: Children receive adequate services to meet their physical and mental health needs was achieved in only 67.2 percent of applicable cases.

A key CFSR finding with regard to this outcome was that MDHS is not consistent in its efforts to meet children's physical or mental health needs. Identified concerns pertained to a lack of dentists who will accept Medicaid.

### **CFSR Systemic Factor Findings**

Mississippi was found to be in substantial conformity with two of the seven systemic factors, which included Agency responsiveness to the Community and Staff and Provider Training. The state did not achieve substantial conformity with five of the systemic factors, including Statewide Information System; Case Review System; Quality Assurance System; Service Array, Foster and Adoptive Parent Licensing, Recruitment, and Retention.

Stakeholders reported that inadequate staff and large caseloads have an adverse effect on achieving several of the systemic factors. Large caseloads and inadequate support staff are prohibiting social workers from entering timely information into the State's statewide information system called the Mississippi Automated Child Welfare Information System (MACWIS). Staff vacancies within MDHS and the Attorney General's office was also identified as a major constraint in the timely filing of Termination of Parental Rights (TPR) petitions and the search for absent parents. These staffing issues also influence the agency's ability to meet the required monthly visits to foster homes. Stakeholders also expressed concern that staffing issues were a barrier to implementing Quality Assurance efforts consistently throughout the State.

The State does not currently have a sufficient array of services in place to address the needs of children and families. Critical gaps in the service array include foster homes (for children of all ages), substance abuse and mental health services for children, youth, and parents. CFSR findings further indicated services are not accessible in all political jurisdictions of the State and that MDHS has limited ability to individualize services for the children and families served by the agency.

### **Mississippi Child and Family Services Review Program Improvement Plan**

Mississippi entered a Program Improvement Plan (PIP) following CFSR in May 2010. The PIP was approved and implemented April 1, 2011 since Mississippi did not achieve two of the National Standards for Safety Outcome 1. The final data for the PIP was submitted March 25, 2014. On June 2, 2014, the Children's Bureau notified the Mississippi Department of Human

Services that it had successfully completed all required PIP action steps and had achieved all of its PIP goals.

## **XV. INFORMATION ON CHILD PROTECTIVE SERVICE WORKFORCE**

The official activities and services provided by DFCS Direct Service Workers – Child Welfare Services – compose DFCS “workload”. Workload is measured by computation of the amount of time required to provide or complete defined service-related activities and service types. Each service-related activity and service is assigned a workload value based on established weights and standards derived from the average amount of time determined to be required to adequately and effectively provide or complete the service-related activity or service type measured on a month-by-month basis.

Workload varies day-to-day, and is measured monthly. By determining the amount of time required each month based on reported workload and dividing the amount of time available by a Direct Service Worker each month to complete the work reported, the number of Direct Service Workers needed is determined. Workload is reported for each Direct Service Worker, each county, each Region, and Statewide, and the number of Direct Service Workers required to complete the work reported at each level – county, region, statewide – is therefore determined each month.

### Caseworkers

The official standard for a full caseload at DFCS is 100 Caseload Units which constitutes 6,960 workload minutes per month. This standard is derived from a determination that Direct Service Workers have 116 hours (6,960 minutes) of time each month to dedicate to official workload activity – that is, to caseload.

### Acknowledgements:

- Total workload minutes in a caseload will vary month to month. The standard is based on monthly averages.
- Direct Service Workers will not be assigned cases or service-related activity which results in a caseload exceeding the standard for a full caseload. Caseloads will on occasion, and at specific points in time, on a Worker-by-Worker basis, fail to reach or may exceed the standard.
- Workloads shall be measured monthly and adjustments made as needed.

Continuous effort must be expended by the Regional Directors (RDs) and Area Social Work Supervisors (ASWSs) to:

- Maintain individual caseloads that are within a reasonable range of the standard (within 15 Caseload Units),
- Assure that no Direct Service Worker remains over the standard for an extended length of time,

- Document justification for a Direct Service Worker being assigned cases which results in an over-full caseload, and
- Demonstrate and document efforts taken to reduce the caseload to the official standard.

### Supervisors

Supervisors shall be directly responsible for no more than five Direct Service Workers. Supervisors shall not be assigned primary responsibility for providing direct casework services for any case except in cases of extenuating circumstances which shall last for no more than four weeks and have been approved in writing by the Office Director of Field Operations after consultation with the supervisor's RD to ensure the continued proper supervision of the impacted Direct Service Workers.

### Regional Directors

RDs shall be responsible for the ongoing validation of cases and validation of workloads. They will ensure that all cases in an open status meet the policy criteria for that case type. They will ensure that valid workloads are distributed as fairly and evenly as possible. This validation will be accomplished through formal case and workload validation plans which will be developed jointly between RDs, ASWSs and state level program staff. These validation plans shall be developed annually and approved by the Office Director of Field Operations.

No supervisor shall be assigned primary responsibility for providing direct casework services for any case, except in cases of extenuating circumstances which shall last no more than four (4) weeks and have been approved in writing by the director of DFCS after consultation with the supervisor's Regional Director to ensure the continued proper supervision of the impacted direct service workers.

## **Service-Related Activities and Case Types**

Service Types – and the assigned standard for each in minutes and Caseload Units are as follows:

<u>Service Type</u>	<u>Minutes</u>	<u>Caseload Units</u>
Adoption COS	300	4.3
ICPC Incoming	106	1.6
ICPC Outgoing	106	1.6
Placement COR	254	3.7
Placement R&S	507	7.3
Placement COS	253	3.6
Prevention COR	138	2.0
Prevention COS	137	2.0
Prevention R&S	275	4.0
Protection Services COR	210	3.0
Protection Services COS	200	2.9
Protection Services R&S	410	5.9
Case Management Intake	59	0.9
Court Ordered Relative		
Application	282	4.1
ICPC Application	282	4.1

Investigation Level 2	484	7.0
Investigation Level 3	484	7.0
General Intake	59	0.9
Resource Inquiry	59	0.9
Adoption Addendum	191	2.8
Foster Home Addendum	191	2.8
Resource Home Study	470	6.8
Resource Home Supervision	140	2.0
Resource Renewal	191	2.8

## **XVI. APPENDICES**

- A. DFCS ORGANIZATIONAL CHART**
- B. QUALITY ASSURANCE SYSTEM**  
(No Updates Included)
- C. DFCS TRAINING PLAN**  
(No Updates Included)
- D. HEALTHCARE OVERSIGHT AND COORDINATION PLAN**
- E. FOSTER AND ADOPTIVE PARENT DILIGENT RECRUITMENT PLAN**  
(No Updates Included)
- F. MISSISSIPPI PSYCHOTROPIC MEDICATION MONITORING PLAN FOR CHILDREN IN FOSTER CARE**
- G. DISASTER PREPAREDNESS PLAN**  
(No Updates Included)
- H. ASSURANCES AND CERTIFICATIONS**
- I. CAPTA UPDATE AND CAPTA FATALITY AND NEAR FATALITY PUBLIC DISCLOSURE**
- J. MISSISSIPPI CHILD AND FAMILY SERVICES REVIEW DATA PROFILE**
- K. MISSISSIPPI AFCARS ASSESSMENT REVIEW IMPROVEMENT PLAN**

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CFSP and APSR Reports can be found at:  
<http://www.mdhs.state.ms.us/family-childrens-services/reports/>