

# Commonwealth of Massachusetts



## Annual Progress and Services Report (APSR)

Federal FY2019

June 30, 2018



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## **INTRODUCTION**

The Massachusetts Department of Children and Families (DCF) is pleased to submit our FY2019 Annual Progress and Services Report (APSR). This document provides DCF's responses to the Program Instruction ACYF-CB-PI-18-01 (PI). DCF has maintained the outline included in the PI and hence the document begins with our response to Section C. Below is a brief overview of DCF, its mission, and an executive summary of our ongoing reform efforts.

### **Overview**

DCF is the state agency mandated to receive and respond to child abuse and neglect reports, as well as provide an array of services to children and families across the Commonwealth. DCF is charged with protecting children from abuse and neglect and strengthening families. There are currently more than 11,000 children in foster care across Massachusetts (including 9,714 <18 years of age Consumer Children and 1,560 18-23 Young Adults) and more than 50,000 children in total served by the Department (including Consumer Children 48,045 <18 years of age and 2,126 Young Adults 18-23). With the understanding that every child is entitled to a home that is free from abuse and neglect, DCF's vision is to ensure the safety of children in a manner that holds the best hope of nurturing a sustained, resilient network of relationships to support the child's growth and development into adulthood.

DCF was created by the Massachusetts Legislature in 1978 and began serving children and families in July 1980. To effectively fulfill its mission on a local, community-based level, DCF is organized into five regional offices: Central, Western, Northern, Southern, and Boston, which oversee the day-to-day operations of 29 area offices throughout the state. Leadership and administrative duties for DCF are guided by its Central Office in Boston.

DCF has an operating budget of approximately \$976.9 million and a staff of more than 4,000. Nearly 2,800 of the staff are direct service personnel including social workers, adoption workers, family resource workers and foster care reviewers. DCF provides services to over 25,000 families each day. Families come to DCF in one of four ways. First and most often, is through the filing of a 51A, which is an allegation that a child has been abused or neglected, or is at risk of abuse or neglect. Additionally, families can come to DCF as a result of their child being truant from school or running away, families may request voluntary services, or DCF may provide services to families after a court orders a child into DCF custody.

### **Mission**

DCF strives to protect children from abuse and neglect and, in partnership with families and communities, ensure that children are able to grow and thrive in a safe and nurturing environment. DCF believes all children have the right to grow up in a home, free from abuse and neglect, with access to food, shelter, clothing, healthcare, and education. As an organization, DCF works toward establishing the safety, permanency, and well-being of the Commonwealth's children by:

- providing supports and services to stabilize and preserve families when it is safe to do so;
- providing quality temporary alternative care when necessary to keep children safe from harm;
- working to safely reunify families, when appropriate; and
- when necessary, creating new families through kinship, guardianship, or adoption.

## Reform Efforts and Progress to Date

In the fall of 2015, Massachusetts' Governor Baker announced a major reform initiative for DCF. To move forward, DCF needed stability. For years, DCF had operated with outdated policies that historically took years to update, negotiate with the union and implement. There were too few managers to properly oversee the clinical decision-making for a social work workforce already struggling with caseloads that were too high.

With the full support of the social worker's union, DCF embarked on reforms intended to stabilize the organization and improve its ability to keep children safe from harm. DCF immediately began by addressing the need to reduce caseloads and improve oversight of case decisions. At the same time, DCF began work to create a set of consistent policies, rooted in the fundamentals of child protection that emphasized clinical oversight and a team approach to decision making.

Some of the results we have achieved since launching the reform initiative include:

- **Policy.** Since February 2016, DCF has developed and implemented six new policies: Protective Intake; Supervision; Missing and Absent Children; DA Referral; Case Closing; and Family Assessment and Action Planning (FAAP). In addition, two new policies will be introduced in the coming months covering in-home case practice and social media. DCF considers all of its policies living documents and we are continuously evaluating existing policies.
- **Management Oversight.** The restoration of DCF's Central Region and the subsequent decoupling of all 29 area offices improved management oversight and strengthened our clinical and management capacity.
- **Management Capacity.** DCF has further developed the role of Clinical Manager, dedicating a senior level manager to each office whose principal responsibility is to provide clinical support to staff. The Department's total managerial capacity has grown by 110 managers, a 57% increase from September 2015, and these additional staff provides critical oversight and leadership.
- **Social Work Staff.** Since our reform efforts began, DCF has achieved a net gain of 343 additional front-line social workers, a 15% increase, for a total of 2,608 social workers. In addition, DCF has hired 91 social worker technicians to assist with transportation, supervise parent/child visits and other tasks so that social workers have more time to focus on casework. We anticipate hiring another 17 social worker technicians by the end of the state fiscal year.
- **Medical Team.** DCF is required to ensure every child who comes into care receives basic medical screenings within seven days and comprehensive medical visits within 30 days. Compliance with these medical visit requirements following a child's entry into foster care improved 248% between May 2016 and December 2017. DCF hired our first ever full-time medical director in January 2016. For the first time in the Department's history, all 29 area offices have medical social workers. Five regional nurses, a Central Office nurse, a child psychiatry consultant, and a medical data analyst round out the medical team.
- **Staff Licensure.** In October 2015, only 54% of DCF's social worker staff was licensed. Now, more than 99% of the staff is now licensed.
- **Caseload Management Support.** Our caseload management initiative launched in April 2016 to appropriately manage caseload is still going strong. Each regional director leads a team of field staff

that is using data to address workforce capacity, develop caseload stabilization strategies and provide tangible supports.

- **Weighted Caseloads.** In November 2016, the weighted average caseload for staff was 19.50. As of April 2018, it has dropped to 19.03 with an average family count of 15.6 families for ongoing social workers. The goal, as stated in the Child Welfare League of America (CWLA) report of 2014, is to have all social workers with a weighted caseload of 18 cases or less and 15 families or fewer for ongoing social workers. DCF is encouraged that caseloads are under 16 families per ongoing social worker in 20 area offices, compared to seven area offices in November 2015. And, importantly, DCF has sustained these lowered caseload ratios over the past five months.
- **Continuous Quality Improvements (CQI).** As the CWLA report recommended, DCF established a CQI team in January 2016. The Department uses their clinical audits of cases, as well as analysis of data, to assess the efficacy of its reforms. For example, the CQI team examined a cohort of cases to determine whether staff is making better decisions about which cases could be safely closed. This CQI team's quality review found that nearly 100% of case closings were appropriate and the rate of case re-openings decreased by more than 25%. DCF also launched a competitive data fellows program that has trained 80 managers and staff to use data to understand and improve service delivery.
- **Staff Training.** DCF hired a new director of training in May 2016 who is strengthening implementation and adoption of new policy by developing multiple training options: in-person, online/web-based, and through video. Last year, DCF developed and launched new family resource training for managers and mandatory training for social workers moving into the family resource units. An overhaul of our training for new social workers is underway and DCF is reworking training curriculum for all managers, supervisors and investigators.
- **Foster and Adoptive Parent Recruitment.** The best outcome for children is to keep them with their family if it's safe to do so, and if not, find homes where they already live and go to school. Unfortunately, DCF cannot predict what children will come into foster care and what type of placement will be best for them. That's why we need a large community of foster homes to provide choice and find the perfect match. In January 2017, DCF hired 15 regional foster care recruiters, followed by the launch of our first statewide recruitment campaign in years, *Foster Massachusetts*. Since January 2017, DCF added approximately 232 unrestricted foster homes statewide and we've seen a 25% increase in inquiries and 34% increase in applications.
- **Modernizing Foster Care Licensing.** DCF is always looking at ways to streamline and modernize our processes, including a recently launched online application form and redesigning the mass.gov webpage and all of our recruitment materials to be easily accessible and user-friendly.
- **Kinship Care.** Family members often provide children with the most supportive and least traumatic form of substitute care. As part of DCF's reform work, the department designed a pilot program for three area offices that designated a social worker as the point-of-contact for identifying and engaging family members who may be suitable foster parents or lifelong connections. As an example, the Van Wart office in Springfield increased its kinship placements by 50% in the first months of the pilot. Phase two of the pilot is underway and we expanded the effort to all five regions.
- **Foster and Adoptive Parent Support.** Foster parents, in a kinship or unrestricted foster home, are crucial members of the child's support team and it is extremely important that they feel valued, respected and have a strong sense of partnership with DCF. In the fall, each of our five regions hosted foster parent forums. The passion and dedication in those forums were incredible and DCF looks

forward to using the feedback to develop strategies to strengthen communication, enhance foster parent training, and increase supports and resources available to foster parents.

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The FY 2019 APSR will be posted upon approval on the DCF website: [www.mass.gov/dcf](http://www.mass.gov/dcf)

The FY 2018 APSR is posted at: <https://www.mass.gov/lists/dcf-commonly-requested-documents>

## **C. REQUIREMENTS FOR 2019 APSR**

### **C1. GENERAL INFORMATION**

The Department continues to engage in substantial, ongoing, and meaningful collaboration in the implementation of the 2015-2019 CFSP, our CFSR PIP, and our IV-E PIP. The Department has many resources to achieve collaboration. These include the DCF Family Advisory Council, Youth Advisory Council, and the Statewide Advisory Committee. In addition, each DCF area office has an Area Board to provide critical community input in the Department's planning and casework practice. The Department also engages the courts, local schools systems, and other state agencies to address the needs of children and families involved with DCF. Lastly, the Department has engaged in dialogue with the Aquinnah and Mashpee tribes.

Below, we highlight specific examples of how the Department collaborated with these resources in the past year with regard to the implementation of our 2015-2019 CFSP, CFSR PIP, and IV-E PIP. We also highlight planned ongoing collaboration in the new year:

#### *2015-2019 CFSP Collaboration*

DCF continues to convene consumers, youth in care, providers and other community leaders who participate with and advise the DCF Area Offices. Representatives from those local boards also participate in the Statewide Advisory Committee which typically meets three times a year. Among the participants are a variety of agencies and organizations that are engaged with DCF on initiatives designed to protect children and strengthen families:

- The Children's League of Massachusetts
- The Parents Helping Parents
- Massachusetts Law Reform Institute
- Massachusetts Society for the Prevention of Cruelty to Children
- Massachusetts Alliance for Families
- Berkshire Children and Families
- Children's Trust Fund of Massachusetts
- Massachusetts Citizens for Children
- Massachusetts Adoption Resource Exchange
- DCF Family Advisory Committee
- Children and Family Law Project
- Rosie's Place
- Department of Youth Services
- Department of Mental Health
- United Way
- Wayside
- MA Chapter of the American Academy of Pediatrics
- Committee for Public Counsel Services
- New England Child Welfare Commissioners Association
- Massachusetts Network for Foster Alumni
- Parent Professional Advisory League
- Family Nurturing Center
- Massachusetts Association of Private Schools
- Justice Resource Institute



- Jane Doe, Inc.
- More Than Words
- MA Chapter- NASW
- Department of Transitional Assistance
- Department of Public Health
- MA Council of Human Service Providers

#### *CFSR PIP Collaboration*

- MA Court Improvement Program (MA CIP) - Reducing barriers to permanency and stability for children in placement through DCF and contracted providers is a core MA CFSR PIP strategy. Toward this end, DCF Commissioner Spears met with the MA CIP leaders in September 2016. Out of this meeting a MA CFSR PIP Key Activity was developed: Collaborate with MA Court Improvement Program (CIP) to increase stability and permanency for Massachusetts children. MA CFSR PIP work will focus on using data and metrics to better understand and address the permanency needs of children. This will include understanding the characteristics of children across permanency goals including adoption, guardianship, and reunification. This data will also inform the department about which Area Offices and local courts may need additional support to improve permanency outcomes. DCF will continue its focus on increasing kinship placements for children who cannot remain safely in their homes, increasing family finding activity for children in care, and cross-training for court personnel and DCF staff in both kinship and family finding issues.
- Massachusetts Alliance for Families (MAFF) - Reducing barriers to permanency and stability for children in placement through DCF and contracted providers is a core MA CFSR PIP strategy. In a collaborative effort with MAFF, the Department identified the MA CFSR Key Activity of increasing training and support for foster and adoptive parents with the goal of reducing the number of disruptions in foster care and adoptive placements.
- National Council on Crime & Delinquency, Children's Research Center's (NCCD/CRC) - Embedding assessment of safety and risk into daily practice is a core MA CFSR PIP strategy. The Department worked with NCCD/CRC to develop a set of MA CFSR PIP Key Activities which are targeted at validating the Department's current risk assessment tool and/or developing and validating a new tool.
- Department of Public Health Bureau of Substance Abuse Services and the Treatment Continuum - Improving services and treatment for children and families affected by substance misuse is a core MA CFSR PIP strategy. A MA CFSR PIP Key Activity is to collaborate with Department of Public Health Bureau of Substance Abuse Services and the Treatment Continuum to improve information sharing between the systems, provide cross-systems training, and address treatment access needs for youth and adults involved in child welfare needing substance abuse treatment services.
- National Resource Center for Diligent Recruitment (NRCDR) - Increasing initiatives for recruitment of foster, adoptive, and kinship caregivers is a core MA CFSR PIP strategy. Utilizing preliminary discussions with NRCDR, several MA CFSR PIP Key Activities have been developed with the overall goal of creating a cohesive and comprehensive approach to recruitment and retention of foster, adoptive, and kinship caregivers.

*IV-E State Plan PIP Collaboration*

- N/A the DCF title IV-E State Plan PIP contained procedural corrections that did not require collaboration with stakeholders external to the Department.

## C2. UPDATE ON ASSESSMENT OF PERFORMANCE

The Department completed its CFSR3 Statewide Assessment and onsite review in September 2015. To address the APSR 2019 requirement, the Department utilized the most up-to-date Children Bureau MA CFSR3 (May 2017) and CFSR2 Data Profiles (05-19-2015) and the 2016 Child Maltreatment Report. As a supplement, where indicated the Department has provided data from its SACWIS. For each CFSR Outcome and Systemic Factor, a brief description of status and any new challenges are provided.

### Assessment of Child and Family Outcomes

#### Safety Outcome 1 (S1): Children Are First and Foremost, Protected From Abuse and Neglect

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with Safety Outcome 1. The outcome was substantially achieved in 43% of the 28 applicable cases reviewed. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- New Challenges: N/A

#### Chart S1. STATE DATA PROFILE CA/N Reports & Children In Placement

	FFY2013^		FFY2014**		FFY2015**		FFY2016**		FFY2017**	
<b>Total CA/N Reports Disposed</b>	<b>37,867</b>		<b>47,591</b>		<b>47,995</b>		<b>48,126</b>		<b>45,086</b>	
<b>Substantiated</b>	14,071	37.2%	22,282	46.8%	23,161	48.3%	22,667	47.1%	17,850	39.6%
<b>Unsubstantiated</b>	8,161	21.6%	13,771	28.9%	14,727	30.7%	17,731	36.8%	18,833	41.8%
<b>Other</b>	15,635	41.3%	11,538	24.2%	10,107	21.1%	7,728	16.1%	8,403	18.6%
<b>*Children Served in Placement</b>	<b>13,609</b>		<b>14,907</b>		<b>15,899</b>		<b>16,801</b>		<b>16,904</b>	
*Children in Placement on the Last Day of the Year + Discharges During the Year.	^Source: ACF Data Profile (May 19, 2015)					**Source: DCF SACWIS (AFCARS & NCANDS)				

Significant year-over-year increases in total CA/N reports disposed between FFY2013 and FFY2016 (27.1% increase) began to reverse in FFY2017 (6.3% decrease between FFY2016 and FFY2017). During the same time period between FFY2013 and FFY2016, a significant increase in substantiation rates was also observed (26.6%). This increase is directly correlated with a corresponding decrease in use of the Department's Initial Assessment differential response track in FFY2014 and FFY2015. With the implementation of a new Protective Intake Policy in March 2016, the Department eliminated differential response. However, along with a Support (i.e., substantiation) decision, a disposition of Substantiated Concern has been added. Substantiated Concern dispositions do not identify a perpetrator nor a victim. As such they are classified within the "Other" category on Chart S1 above. Of note, the number of children served in placement increased 24.2% between FFY2013 and FFY2017.

#### *Safety Outcome 1 – Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment.*

Purpose of Assessment: To determine whether responses to all accepted child maltreatment reports received during the period under review were initiated, and face-to-face contact with the child(ren) made, within the time-frames established by agency policies or state statutes.

- Status: The initiation of timely CPS responses and face-to-face contacts with children involved in screened-in reports of alleged maltreatment is a primary means of ensuring the safety of children. State policy at the time of the 2015 CFSR3 required that reports screened in for Initial Assessment

have an initial contact from the social worker within 2 business days of assignment. For CPS investigations, state policy required that reports assigned for Emergency response were to be initiated within 2 hours from the time the report was received by the Department. Reports assigned for Non-Emergency response were to be initiated within 2 business days from the date the report was received by the Department. The Department's screening activities begin and are considered part of the investigative process.

The Department received an overall rating of Area Needing Improvement for Item 1 on the 2015 CFSR3, because 43% of the 28 applicable cases were rated as a Strength. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.

- Item 1 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 45.5% of 44 applicable cases. This represents a 5.8% improvement over the 2015 CFSR3 results.
- Item 1 Adjusted PIP Goal: 52.3%
- Item 1 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Statewide Safety Data Indicators: Recurrence of Maltreatment & Maltreatment in Foster Care*

The reduction of the recurrence of maltreatment and incidence of maltreatment in foster care are important measures of the Department's success in promoting the safety of children and families. Both were identified as areas needing improvement in the 2015 CFSR3. The Department monitors maltreatment in foster care and recurrence of maltreatment on open and closed cases on a monthly/quarterly/annual basis as a component of its performance management and accountability system.

**Chart S2.**

Statewide Data Indicator	National Performance	Direction of Desired Perf.	Observed Performance	RSP	95% Confidence Interval	Data Period(s) Used for State Performance
Recurrence of maltreatment	9.5%	Lower	20.0%	25.3%	24.8% – 25.9%	FFY14–15
Maltreatment in foster care (victimization per 100,000 days in care)	9.68	Lower	25.45	34.40	32.18 – 36.79	14A–14B, FFY14
	unavailable	Lower	19.67*		unavailable	17A–17B, FFY17*

\*Source: DCF SACWIS

- Status: The Department has historically fallen below the national performance for Maltreatment in Foster Care and Recurrence of Maltreatment. As evidenced in Chart S2 above, children in the care and custody of DCF are experiencing more Maltreatment in Foster Care than the national performance of 9.68 per 100,000 days in care. Further, the Department is evidencing more incidences of Recurrence of Maltreatment than the national performance of 9.5%. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Maltreatment in Foster Care (victimization per 100,000 days in care) has been calculated for FFY17 utilizing the Department's SACWIS. FFY17's (17A–17B) observed performance is 19.67 per 100,000 days in care. This is a significant 22.7% improvement over FFY14 observed performance.
- The Department is developing a reliable strategy for calculating CFSR3 Recurrence of Maltreatment.

*Safety Outcome 2 (S2): Children Are Safely Maintained In Their Own Homes Whenever Possible and Appropriate*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with Safety Outcome 2. The outcome was substantially achieved in 66% of the 65 cases reviewed. The outcome was substantially achieved in 75% of the 40 foster care cases, 52% of the 23 in-home services cases, and 50% of the 2 in-home services alternative/differential response cases. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- New Challenges: N/A

As indicated in Chart S3 below, CPS referrals increased between FFY2011 and FFY2017. This 13.0% rise in referrals tracks with the occurrence of several high profile child fatalities within the time period. CPS referrals are tracked at the state/region/area office level.

**Chart S3.**

	Counts of Referrals Received by DCF						
	FFY2011	FFY2012	FFY2013	FFY2014	FFY2015	FFY2016	FFY2017*
Referrals received by CPS	73,294	75,439	75,560	77,974	80,435	82,851	82,828

\*Source: DCF SACWIS

*Screen-in Rates*

As evidenced in Chart S4 below, screen-in rates per 1,000 in Child Population increased significantly between FFY2011 and FFY2017. This 20.5% rise in screen-in rates per 1,000, which tracks with the occurrence of several high profile child fatalities during the time period, climbed at a significantly greater rate than referral rates. Screen-in rates are tracked at the state/region/area office level and have stabilized between FFY2014 and FFY2017.

**Chart S4.**

	Rate per 1,000 in Child Population per CB Child Maltreatment 2016 Report						
	FFY2011	FFY2012	FFY2013	FFY2014	FFY2015	FFY2016	FFY2017*
Screen-in rate	44.3	44.4	45.0	55.6	54.7	57.4	53.4

\*Source: DCF SACWIS

*Victimization Rates*

As evidenced in Chart S5 below, victimization rates have risen significantly between FFY2011 and FFY2017. This significant 25.7% rise in victimization rates, which tracks with the occurrence of several high profile child fatalities within the time period, climbed at a greater rate than referral rates during this seven-year time span. Victimization rates are tracked at the state/region/area office level and have decreased significantly following the high rates of FFY2014 through FFY2016.

**Chart S5.**

	Rate per 1,000 in Child Population per CB Child Maltreatment 2016 Report						
	FFY2011	FFY2012	FFY2013	FFY2014	FFY2015	FFY2016	FFY2017*
Victimization rate	14.4	13.7	14.5	22.9	22.4	23.3	18.1

\*Source: DCF SACWIS

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

Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after a reunification.

- Status: Assuring the safety of children and mitigating risk to the safety of children is a cornerstone of child welfare practice. The Department received an overall rating of Area Needing Improvement for Item 2 because 62% of the 29 applicable cases were rated as a Strength. Item 2 was rated as a Strength in 71% of the 7 applicable foster care cases, 55% of the 20 applicable in-home services cases, and 100% of the 2 applicable in-home services alternative/differential response cases. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 2 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 77.8% of 27 applicable cases. This represents a significant 25.5% improvement over the 2015 CFSR3 results.
- Item 2 Adjusted PIP Goal: 85.0%
- Item 2 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Safety Outcome 2 – Item 3: Safety Assessment and Management*

Purpose of Assessment: To determine whether, during the period under review, the agency made concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care.

- Status: The Department received an overall rating of Area Needing Improvement for Item 3 because 66% of the 65 applicable cases were rated as a Strength. Item 3 was rated as a Strength in 75% of the 40 applicable foster care cases, 52% of the 23 applicable in-home services cases, and 50% of the 2 applicable in-home services alternative/differential response cases. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 3 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 71.4% of 70 applicable cases. This represents an 8.2% improvement over the 2015 CFSR3 results.
- Item 3 Adjusted PIP Goal: 76.3%
- Item 3 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Permanency Outcome 1: Children Have Permanency and Stability In Their Living Situations*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with Permanency Outcome 1. The outcome was substantially achieved in 35% of the 40 applicable cases reviewed.

- New Challenges: N/A

**Chart P1.**

Statewide Data Indicator	National Performance	Direction of Desired Perf.	RSP	95% Confidence Interval	Data Period(s) Used for State Performance
Perm in 12 months (entries)	42.1%	Higher	44.1%	42.9% – 45.3%	14A – 16B
Perm in 12 months (12-23 mos.)	45.9%	Higher	33.6%	31.9 % – 35.3%	16A – 16B
Perm in 12 months (24 + mos.)	31.8%	Higher	24.3%	23.0% – 25.7%	16A – 16B
Re-entry to foster care in 12 mos.	8.4%	Lower	11.4%	10.3% – 12.6%	14A – 16B

The Department has been striving to increase progress toward permanency. Despite these efforts, DCF has not yet achieved the national performance on each of the permanency composite indicators.

In order to support the strengths of children and families and address the needs that brought them to the attention of the Department, effective service delivery and permanency planning is critical. Effective service delivery and permanency planning ensures that children are returned to their homes as quickly and safely as possible and that caregivers have the capacity to ensure the safety and well-being of their children. As evidenced in Chart P1 above, the Department has been meeting (exceeding by 4.8%) the national performance of moving children to permanency within 12 months of entering care. The Department is challenged to meet the national performance for those children who remain in care longer than 12 months.

Recognizing that performance on Permanency in 12 Months for Children Entering Care has improved, the Department has also been making concerted efforts to improve performance on Re-entry to Foster Care in 12 Months. The Department recognizes that these paired measures are interrelated and that successful reunification necessitates that services be in place to stabilize exits to permanency and mitigate factors leading to reentry. As evidenced in Chart P2 below, Re-entry to Foster Care in 12 Months has improved significantly by 17.4% (i.e., trending downward) in the past six (6) paired AFCARS cohort periods.

**Chart P2.**

	Risk Standardized Performance (RSP) CFSR3 Data Profile – May 2017					
	11B12A	12A12B	12B13A	13A13B	13B14A	14A14B
Re-entry to foster care in 12 mos.	13.8%	13.7%	13.7%	13.2%	11.6%	11.4%

#### *Permanency Outcome 1 – Item 4: Stability of Foster Care Placement*

**Purpose of Assessment:** To determine whether the child in foster care is in a stable placement at the time of the onsite review and that any changes in placement that occurred during the period under review were in the best interests of the child and consistent with achieving the child's permanency goal(s).

- **Status:** The Department received an overall rating of Area Needing Improvement for Item 4 because 80% of the 40 applicable cases were rated as a Strength. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.

- Item 4 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 57.1% of 42 applicable cases. This represents a significant 28.6% decrease in performance relative to the 2015 CFSR3 results. The Department is working to address stability for children in its care.
- Item 4 Adjusted PIP Goal: 64.1%
- Item 4 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

### *Placement Stability*

Stability of children in out-of-home care is an important indicator of the Department's efforts to achieve permanency for children and families. Multiple moves disrupt a child's ability to maintain connections with family and to develop the connections needed for positive emotional and social growth. Furthermore, instability in placement significantly impacts a child's educational achievement. Research has shown that the more frequently a child moves subsequent to a home removal, the longer the time to reunification. As evidenced in Charts P3 and P4 below, Placement Stability is an area in need of improvement.

**Chart P3.**

Statewide Data Indicator	National Performance	Direction of Desired Perf.	RSP	95% Confidence Interval	Data Period(s) Used for State Performance
Placement Stability (moves per 1,000 days in care)	4.44	Lower	8.53	8.35 – 8.71	16A – 16B

Chart P3 above indicates that children in the Departments care experience 92.1% more moves per 1,000 days in care than the national performance. Furthermore as evidenced in Chart P4 below, performance on this indicator has declined by 54.8% in the past six (6) paired AFCARS cohort periods.

**Chart P4.**

	Risk Standardized Performance (RSP) CFSR3 Data Profile – May 2017					
	13B14A	14A14B	14B15A	15A15B	15B16A	16A16B
Placement Stability (moves per 1,000 days in care)	5.51	6.32	6.52	6.90	7.55	8.53

### *Placement with Kin*

The Department has observed increased stability when initial-placement is with kin. The Department has therefore increased efforts to identify kin as a placement alternative when an out of home placement is necessary. These efforts have resulted in significantly increasing the utilization of kinship placement.

	DCF Target	SFY'08	SFY'09	SFY'10	SFY'11	SFY'12	SFY'13	SFY'14	SFY'15	SFY'16	SFY'17
<b>Kinship Care Rate</b> <b>Kinship as a % of all children in out-of-home placement</b>	≥ 28.5%	19.2%	22.6%	22.7%	24.5%	26.0%	26.9%	29.4%	31.5%	32.4%	33.3%

Data Source: MA DSSRP210 – Children in Placement

At the end of SFY2017, 33.3% of all children in out-of-home placement were placed with kin. This represents a steady increase over time, and a significant 73.4% increase over SFY2008. In an effort to



identify disproportionality and address the disparity in outcomes, this indicator is tracked by race/ethnicity.

	DCF Target	SFY'10	SFY'11	SFY'12	SFY'13	SFY'14	SFY'15	SFY'16	SFY'17
<b>Kinship Care as a % of Departmental Foster Care*</b>	≥ 55.0%	46.4%	48.1%	51.4%	52.1%	53.1%	56.3%	56.4%	56.8%

\*Departmental Foster Care = foster family      Data Source: MA DSSRP210 – Children in Placement

At the end of SFY2017, 56.8% of all children in Departmental Foster Care (i.e., foster family home) were placed with kin. This represents a significant 22.4% increase over SFY2010. In an effort to identify disproportionality and address the disparity in outcomes, this indicator is tracked by race/ethnicity.

#### *Permanency Outcome 1 – Item 5: Permanency Goal for Child*

Purpose of Assessment: To determine whether appropriate permanency goals were established for the child in a timely manner.

- Status: The Department received an overall rating of Area Needing Improvement for Item 5 because 55% of the 40 applicable cases were rated as a Strength. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 5 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 59.5% of 42 applicable cases. This represents an 8.2% improvement over the 2015 CFSR3 results.
- Item 5 Adjusted PIP Goal: 66.4%
- Item 5 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

#### *Permanency Outcome 1 – Item 6: Achieving Reunification, Guardianship, Adoption, or Other Planned Permanent Living Arrangement*

Purpose of Assessment: To determine whether concerted efforts were made, or are being made, during the period under review to achieve reunification, guardianship, adoption, or other planned permanent living arrangement.

- Status: The Department received an overall rating of Area Needing Improvement for Item 6 because 50% of the 40 applicable cases were rated as a Strength. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 6 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 45.2% of 42 applicable cases. This represents a 9.6% decrease in performance relative to the 2015 CFSR3 results. The Department is working to address permanency for children in its care.
- Item 6 Adjusted PIP Goal: 52.2%
- Item 6 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Permanency Outcome 2: The Continuity of Family Relationships and Connections Is Preserved for Children*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with Permanency Outcome 2. The outcome was substantially achieved in 65% of the 40 applicable cases reviewed.
- New Challenges: N/A

*Permanency Outcome 2 – Item 7: Placement With Siblings*

Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings.

- Status: The Department received an overall rating of Area Needing Improvement for Item 7 because 64% of the 40 applicable cases were rated as a Strength. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 7 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 56.7% of 30 applicable cases. This represents a significant 11.4% decrease in performance relative to the 2015 CFSR3 results. The Department is working to address placement with siblings for children in its care.
- Item 7 Adjusted PIP Goal: NOT APPLICABLE
- Item 7 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Permanency Outcome 2 – Item 8: Visiting With Parents and Siblings in Foster Care*

Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members.

- Status: The Department received an overall rating of Area Needing Improvement for Item 8 because 59% of the 29 applicable cases were rated as a Strength. In 62% of the 13 applicable cases, the agency made concerted efforts to ensure that both the frequency and quality of visitation with a sibling(s) in foster care who is/was in a different placement setting was sufficient to maintain and promote the continuity of the relationship. In 73% of the 26 applicable cases, the agency made concerted efforts to ensure that both the frequency and quality of visitation between the child in foster care and his or her mother was sufficient to maintain and promote the continuity of the relationship. In 44% of the 9 applicable cases, the agency made concerted efforts to ensure that both the frequency and quality of visitation between the child in foster care and his or her father was sufficient to maintain and promote the continuity of the relationship. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 8 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 77.5% of 40 applicable cases. This represents a significant 31.4% improvement over 2015 CFSR3 results.

- Item 8 Adjusted PIP Goal: NOT APPLICABLE
- Item 8 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Permanency Outcome 2 – Item 9: Preserving Connections*

Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to maintain the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school, and friends.

- Status: The Department received an overall rating of Area Needing Improvement for Item 9 because 74% of the 38 applicable cases were rated as a Strength. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 9 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 90.2% of 41 applicable cases. This represents a significant 21.9% improvement over 2015 CFSR3 results.
- Item 9 Adjusted PIP Goal: NOT APPLICABLE
- Item 9 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Permanency Outcome 2 – Item 10: Relative Placement*

Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to place the child with relatives when appropriate.

- Status: The Department received an overall rating of Area Needing Improvement for Item 10 because 71% of the 38 applicable cases were rated as a Strength. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 10 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 85.4% of 41 applicable cases. This represents a significant 20.3% improvement over 2015 CFSR3 results.
- Item 10 Adjusted PIP Goal: NOT APPLICABLE
- Item 10 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Permanency Outcome 2 – Item 11: Relationship of Child With Parents*

Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.

- Status: The Department received an overall rating of Area Needing Improvement for Item 11 because 64% of the 28 applicable cases were rated as a Strength. In 68% of the 28 applicable cases, the agency made concerted efforts to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her mother. In 60% of the 10 applicable cases, the agency made concerted efforts to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her father. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 11 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 63.2% of 38 applicable cases. This represents a 1.3% decrease in performance relative to 2015 CFSR3 results. The Department is working to promote, support, and/or maintain positive relationships between children in foster care and their parents/primary caregivers.
- Item 11 Adjusted PIP Goal: NOT APPLICABLE
- Item 11 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Well-being Outcome 1: Families Have Enhanced Capacity to Provide for Their Children's Needs*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with Well-Being Outcome 1. The outcome was substantially achieved in 33% of the 40 foster care cases, 39% of the 23 in-home services cases, and 0% of the 2 in-home services alternative/differential response cases. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- New Challenges: N/A

*Well-Being Outcome 1 – Item 12: Needs and Services of Child, Parents, and Foster Parents*

Purpose of Assessment: To determine whether, during the period under review, the agency (1) made concerted efforts to assess the needs of children, parents and foster parents (both initially, if the child entered foster care or the case was opened during the period under review, and on an ongoing basis) to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family, and (2) provided the appropriate services.

- Status: The Department received an overall rating of Area Needing Improvement for Item 12 because 38% of the 65 cases were rated as a Strength. Item 12 was rated as Strength in 35% of the 40 foster care cases, 43% of the 23 in-home services cases, and 50% of the 2 in-home services alternative/differential response cases. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 12 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 38.6% of 70 applicable cases. This represents a 1.6% improvement over the 2015 CFSR3 results.
- Item 12 Adjusted PIP Goal: 43.8%
- Item 12 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY

- New Challenges: N/A

*Well-Being Outcome 1 – Item 13: Child and Family Involvement in Case Planning*

Purpose of Assessment: To determine whether, during the period under review, concerted efforts were made (or are being made) to involve parents and children (if developmentally appropriate) in the case planning process on an ongoing basis.

- Status: The Department received an overall rating of Area Needing Improvement for Item 13 because 58% of the 62 applicable cases were rated as a Strength. Item 13 was rated as Strength in 68% of the 37 foster care cases, 48% of the 23 in-home services cases, and 0% of the 2 in-home services alternative/differential response cases. In 73% of the 41 applicable cases, the agency made concerted efforts to involve child(ren) in case planning. In 72% of the 54 applicable cases, the agency made concerted efforts to involve mothers in case planning. In 58% of the 33 applicable cases, the agency made concerted efforts to involve fathers in case planning. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 13 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 61.4% of 70 applicable cases. This represents a 5.9% improvement over the 2015 CFSR3 results.
- Item 13 Adjusted PIP Goal: 66.7%
- Item 13 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

*Well-Being Outcome 1 – Item 14: Caseworker Visits With Child*

Purpose of Assessment: To determine whether the frequency and quality of visits between caseworkers and the child(ren) in the case are sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals.

- Status: The Department received an overall rating of Area Needing Improvement for Item 14 because 74% of the 65 applicable cases were rated as a Strength. Item 14 was rated as Strength in 83% of the 40 foster care cases, 61% of the 23 in-home services cases, and 50% of the 2 in-home services alternative/differential response cases. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 14 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 81.4% of 70 applicable cases. This represents a significant 10.0% improvement over the 2015 CFSR3 results.
- Item 14 Adjusted PIP Goal: 85.6%
- Item 14 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

### *Well-Being Outcome 1 – Item 15: Caseworker Visits With Parents*

Purpose of Assessment: To determine whether, during the period under review, the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren) are sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals.

- Status: The Department received an overall rating of Area Needing Improvement for Item 15 because 44% of the 54 applicable cases were rated as a Strength. Item 15 was rated as Strength in 45% of the 29 foster care cases, 48% of the 23 in-home services cases, and 0% of the 2 in-home services alternative/differential response cases. In 59% of the 54 applicable cases, the agency made concerted efforts to ensure that both the frequency and quality of caseworker visitation with mothers were sufficient. In 47% of the 32 applicable cases, the agency made concerted efforts to ensure that both the frequency and quality of caseworker visitation with fathers were sufficient. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 15 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 55.2% of 67 applicable cases. This represents a significant 25.5% improvement over the 2015 CFSR3 results.
- Item 15 Adjusted PIP Goal: 60.7%
- Item 15 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

### *Well-being Outcome 2: Children Receive Appropriate Services to Meet Their Educational Needs*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with Well-Being Outcome 2. The outcome was substantially achieved in 90% of the 42 applicable cases reviewed.
- New Challenges: N/A

### *Well-Being Outcome 2 – Item 16: Educational Needs of the Child*

Purpose of Assessment: To assess whether, during the period under review, the agency made concerted efforts to assess children's educational needs at the initial contact with the child (if the case was opened during the period under review) or on an ongoing basis (if the case was opened before the period under review), and whether identified needs were appropriately addressed in case planning and case management activities.

- Status: The Department received an overall rating of Area Needing Improvement for Item 16 because 90% of the 42 applicable cases were rated as a Strength. Item 16 was rated as Strength in 92% of the 36 applicable foster care cases, 80% of the 5 applicable in-home services cases, and 100% of the 1 applicable in-home services alternative/differential response case. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 16 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 94.1% of 51 applicable cases. This represents a 4.6% improvement over 2015 CFSR3 results.
- Item 16 Adjusted PIP Goal: NOT APPLICABLE

- Item 16 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

Education is critical to a child's healthy growth and development and sense of well-being. The Department's efforts to ensure that children are receiving appropriate education services were identified as an area of strength in the 2015 CFSR3 Report. An ongoing focus in this area continues to support children's academic achievement. Recognizing that educational achievement is impacted by CPS involvement, the Department proactively works with teachers and school departments to ensure that children in its care or custody receive appropriate educational services and are making progress toward achievement of educational or vocational goals.

The Department tracks a number of education-related indicators:

- High School Four-Year & Five-Year Cohort Graduation Rates
- Massachusetts Comprehensive Assessment System (MCAS) Passage Rates
- Attendance Rates
- High School Equivalency Testing Program (HSE) Rates (formerly GRE)

#### *High School Four-Year & Five-Year Cohort Graduation Rates*

Massachusetts Department of Elementary & Secondary Education (ESE) calculates and reports on graduation rates as part of overall efforts to improve educational outcomes for students in the Commonwealth. The Department tracks these graduation rates for children in its custody utilizing the same methodology utilized by ESE.

Adopting ESE's methodology to calculate the four-year graduation rate, the Department tracks a cohort of students in custody from 9th grade through high school and then divides the number of students who graduate within four (4) years by the total number in the cohort. This rate provides the percentage of the cohort that graduates in four (4) years or less.

Recognizing that many students need longer than four (4) years to graduate from high school, and that it is important to recognize the accomplishment regardless of the time it takes, the Department (and ESE) calculates a five-year graduation rate.

	DCF Target	2011	2012	2013	2014	2015	2016
<b>Four-Year Graduation Rate</b>	≥ 67.0%	52.0%	50.3%	54.5%	54.0%	51.4%	57.3%
<b>Five-Year Graduation Rate</b>		62.8%	53.0%	62.4%	59.1%	54.4%	58.2%

While the Four-Year Graduation Rates between academic years 2011 and 2016 are below the established target, extending the timeframe to graduation by one (1) year results in an additional 5% of cohort students receiving acknowledgment for graduating in 2014, 3% in 2015, and 0.9% in 2016. Of note, the Four-Year Graduation Rate increased by 10.2% between 2011 and 2016.

## Massachusetts Comprehensive Assessment System (MCAS) Passage Rates

MCAS is designed to meet the requirements of the Education Reform Act of 1993. This law specifies that the testing program must:

- Test all public school students in Massachusetts, including students with disabilities and English Language Learner students;
- Measure performance based on the Massachusetts Curriculum Framework learning standards; and
- Report on the performance of individual students, schools, and districts.

As required by state law, students must pass the grade 10 tests in English Language Arts (ELA), Mathematics, and one of the four high school Science and Technology Engineering tests as one condition of eligibility for a high school diploma (in addition to fulfilling local requirements). Recognizing the importance of this metric, the Department tracks MCAS Passage Rates for students in its custody utilizing an automated data exchange with ESE.

MCAS tests three broad subject areas:

- English Language Arts (ELA)
- Mathematics
- Science and Technology/Engineering

	DCF Target	2011	2012	2013	2014	2015	2016	2017
<b>^MCAS OVERALL DCF PASSAGE RATE</b>	≥ 40.0%	26.9%	26.7%	25.9%	23.4%	23.3%	21.8%	28.6%
<b>ELA Passage Rate</b>		47.3%	63.7%	68.2%	58.7%	67.2%	66.8%	68.1%
<b>Mathematics Passage Rate</b>		32.9%	42.5%	43.0%	33.1%	40.3%	35.0%	42.7%
<b>*Science/Tech./Eng. Passage Rate</b>		-	76.6%	78.9%	67.4%	74.7%	76.2%	81.5%

*^MCAS Overall DCF Passage Rate: Denominator includes any child who has taken one or more of the three MCAS subtests.*

*\*Science and Technology/Engineering subject area was adopted in academic year 2012.*

*Data Source: MA data exchange between DCF and ESE*

MCAS overall passage rates for children in the custody of DCF between academic years 2011 and 2017 are below the established target. While the 2017 MCAS overall passage rate is 71.5% of the established target, performance on each of the MCAS subject areas exceeded the overall target of 40.0%. While children in DCF custody demonstrate relative strength in specific subject areas, positive performance in one subject area does not necessarily correspond to positive performance across other subject areas.

### Well-Being Outcome 3: Children Receive Adequate Services to Meet Their Physical and Mental Health Needs

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with Well-Being Outcome 3. The outcome was substantially achieved in 67% of the 55 applicable cases reviewed. The outcome was substantially achieved in 68% of the 40 applicable foster care cases, 64% of the applicable 14 in-home services cases, and 100% of the applicable 1 in-home services alternative/differential response case.
- New Challenges: N/A



### *Well-Being Outcome 3 – Item 17: Physical Health of the Child*

Purpose of Assessment: To determine whether, during the period under review, the agency addressed the physical health needs of the children, including dental health needs.

- Status: The Department received an overall rating of Area Needing Improvement for Item 17 because 85% of the 47 applicable cases were rated as a Strength. Item 17 was rated as Strength in 85% of the 40 foster care cases, 83% of the 6 applicable in-home services cases, and 100% of the 1 in-home services alternative/differential response case. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 17 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 84.9% of 53 applicable cases. This represents a 0.1% decrease in performance relative to 2015 CFSR3 results. The Department is working to address the physical health (including dental) needs of the children in its care.
- Item 17 Adjusted PIP Goal: NOT APPLICABLE
- Item 17 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

### *Well-Being Outcome 3 – Item 18: Mental/Behavioral Health of the Child*

Purpose of Assessment: To determine whether, during the period under review, the agency addressed the mental/behavioral health needs of the children.

- Status: The Department received an overall rating of Area Needing Improvement for Item 18 because 62% of the 37 applicable cases were rated as a Strength. Item 18 was rated as a Strength in 62% of the 26 applicable foster care cases, 60% of the 10 applicable in-home services cases, and 100% of the 1 applicable in-home services alternative/differential response case. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- Item 18 PIP Baseline Performance (Jul-Dec 2017): A Strength rating was evidenced for 69.0% of 42 applicable cases. This represents a significant 11.3% improvement over 2015 CFSR3 results.
- Item 18 Adjusted PIP Goal: NOT APPLICABLE
- Item 18 PIP Review Quarters 1&2 Performance (Jan-Jun 2018): CURRENTLY UNDERWAY
- New Challenges: N/A

### **Assessment of Systemic Factors**

#### *Systemic Factor Item 19: Statewide Information System*

Description of Systemic Factor Item: The statewide information system is 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.

- Status: As evidenced in the 2015 CFSR3, the Department is in substantial conformity with the systemic factor of Statewide Information System. The one item in this systemic factor was rated as a Strength.
- New Challenges: N/A

*Systemic Factor: Case Review System*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with the systemic factor of Case Review System. One of the 5 items in this systemic factor was rated as a Strength.
- New Challenges: N/A

*Systemic Factor: Case Review System – Item 20: Written Case Plan*

Description of Systemic Factor Item: The case review system is 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.

- Status: The Department received an overall rating of Area Needing Improvement for Item 20 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, Massachusetts described the state's policies for case plan development and provided data on service plan completion. In interviews, stakeholders reported that joint development of the case plan with parents is inconsistent, and that plans are often developed without input from the parents and presented to them.

The Department has implemented a new Family Assessment and Action Planning policy which promotes/supports the development of a written case plan that is developed jointly with the child's parent(s) and includes the required provisions. Fidelity metrics have been developed to assess performance.

- New Challenges: N/A

*Systemic Factor: Case Review System – Item 21: Periodic Reviews*

Description of Systemic Factor Item: The case review system is functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review.

- Status: The Department received an overall rating of Strength for Item 21 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and confirmed during stakeholder interviews indicated that periodic reviews occur largely on time and as required. Delays may occur on occasion to accommodate parents or, in a limited number of geographic areas, as a result of significant increases in the foster care population. While recognized as a strength, the Department is working on SACWIS improvements which will support periodic review for each child in care.
- New Challenges: N/A

Systemic Factor: Case Review System – Item 22: Permanency Hearings

Description of Systemic Factor Item: The case review system is functioning statewide to ensure that each child has a permanency hearing in a qualified court or administrative body that occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

- Status: The Department received an overall rating of Area Needing Improvement for Item 22 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, the Department provided information on the requirements for permanency hearings and the process for monitoring timeliness. Data from the statewide assessment and confirmed during stakeholder interviews indicated that permanency hearings were not held timely in many cases.
- New Challenges: N/A

Systemic Factor: Case Review System – Item 23: Termination of Parental Rights

Description of Systemic Factor Item: The case review system is functioning statewide to ensure that the filing of termination of parental rights proceedings occurs in accordance with required provisions.

- Status: The Department received an overall rating of Area Needing Improvement for Item 23 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, the Department provided data focused on the scheduling of termination of parental rights hearings and resolving issues related to scheduling of these hearings. During the onsite review, results indicated that for one-third of the children who had been in care for 15 of the most recent 22 months, the required provisions for filing of termination of parental rights or documentation of a compelling reason had not occurred. Although stakeholders largely believed that filing was occurring timely, case review information collected during the CFSR review did not support this. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- New Challenges: N/A

Systemic Factor: Case Review System – Item 24: Notice of Hearings and Reviews to Caregivers

Description of Systemic Factor Item: The case review system is functioning 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.

- Status: The Department received an overall rating of Area Needing Improvement for Item 24 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, the Department described challenges in ensuring that caregivers of children in foster care are notified of and have a right to be heard in any review or hearing. Stakeholders reported that caregivers are typically notified of and invited to attend reviews and hearings by caseworkers or by written notice. Under Massachusetts law, caregivers are not considered a party to the case and as a result, each court treats caregivers differently, varying in involvement with some caregivers sworn in to provide testimony; other times caregivers are not considered for input.
- New Challenges: N/A

### Systemic Factor Item 25: Quality Assurance System

Description of Systemic Factor Item: The quality assurance system is functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the Child and Family Services Plan (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.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 25 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, Massachusetts described several components of the state's continuous quality improvement (CQI) system but was unable to demonstrate the integration of these components. The state's past qualitative reviews were ad hoc in nature and did not provide the state with information about the quality of its services and the strengths and needs of its service delivery system. Stakeholders confirmed that a functioning and integrated quality assurance system that uses data and information to inform practice changes or monitor performance is not yet in place.

The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance. Toward this end, the Department has established a formal quality assurance system which is functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the Child and Family Services Plan (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.

- New Challenges: N/A

### *Systemic Factor: Staff and Provider Training*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with the systemic factor of Staff and Provider Training. None of the items in this systemic factor was rated as a Strength.
- New Challenges: N/A

### Systemic Factor: Staff and Provider Training – Item 26: Initial Staff Training

Description of Systemic Factor Item: The staff and provider training system is 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.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 26 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, the Department provided information on initial staff training for new workers including classroom-based, on-the-job, and in-service trainings, and the state's Web-based learning management system. During interviews, stakeholders were concerned that the training did not prepare staff to perform their job functions and that the state lacked methods to evaluate the effectiveness of this training. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.

- New Challenges: N/A

*Systemic Factor: Staff and Provider Training – Item 27: Ongoing Staff Training*

Description of Systemic Factor Item: The staff and provider training system is functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 27 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and confirmed during interviews with stakeholders indicated that the state requires 30 hours of ongoing training annually; however, the state does not have training requirements for supervisors. The state offers professional development to supervisors, and in-house and topically based training to all workers. Stakeholders reported concerns with tracking staff participation in and completion of ongoing training as well as with the evaluation of ongoing training.
- New Challenges: N/A

*Systemic Factor: Staff and Provider Training – Item 28: Foster and Adoptive Parent Training*

Description of Systemic Factor Item: The staff and provider training system is functioning statewide 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 or 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.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 28 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and confirmed during interviews with stakeholders indicated that foster and adoptive parents complete initial and ongoing training and that training is effective in providing them with the skills and knowledge base needed to carry out their duties with regard to foster and adopted children. However, the state did not provide information to demonstrate whether staff of child care institutions receive training that effectively prepares them to carry out their duties.
- New Challenges: N/A

*Systemic Factor: Service Array and Resource Development*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with the systemic factor of Service Array and Resource Development. None of the items in this systemic factor was rated as a Strength.
- New Challenges: N/A

*Systemic Factor: Service Array and Resource Development – Item 29: Array of Services*

Description of Systemic Factor Item: The service array and resource development system is functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the CFSP: (1) services that assess the strengths and needs of children and families and determine other service needs, (2) services that address the needs of families in addition to individual children in order to create a safe home environment, (3) services that enable children to remain safely with their parents when reasonable, and (4) services that help children in foster and adoptive placements achieve permanency.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 29 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and obtained through interviews with stakeholders indicated that there are significant waiting lists for many services, and some services are unavailable in the more rural areas of the state or in the suburbs. In particular, stakeholders identified significant gaps for children and families, which include access to transportation services, independent living housing for older youth, and services for cognitively impaired parents. Stakeholders also identified long wait lists for intensive foster care homes, child psychological evaluation and treatment, substance abuse treatment services, and trauma-informed services. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.
- New Challenges: N/A

*Systemic Factor: Service Array and Resource Development – Item 30: Individualizing Services*

Description of Systemic Factor Item: The service array and resource development system is functioning statewide to ensure that the services in Item 29 can be individualized to meet the unique needs of children and families served by the agency.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 30 based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, the Department described the agency's ability to purchase services that could be individualized for the child and family. During interviews, stakeholders clarified that practice is inconsistent and depends on the caseworker's level of involvement in crafting such services. Stakeholders also asserted that individualization is difficult for persons who are non-English speaking or those with cognitive disabilities.
- New Challenges: N/A

*Systemic Factor: Agency Responsiveness to the Community*

- Status: As evidenced in the 2015 CFSR3, the Department is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. One item in this systemic factor was rated as a Strength.
- New Challenges: N/A

*Systemic Factor: Agency Responsiveness to the Community – Item 31: State Engagement and Consultation With Stakeholders Pursuant to CFSP and APSR*

Description of Systemic Factor Item: The agency responsiveness to the community system is 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- and family- serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 31 based on information from the statewide assessment and stakeholder interviews. Information in the statewide assessment and confirmed during interviews with some stakeholders described the ongoing engagement and consultation with a wide variety of internal and external stakeholders and Tribes. However, the state did not demonstrate how information was considered in developing the CFSP, and other stakeholders described challenges in ongoing and routine engagement of attorneys for parents, Tribes, and law enforcement.
- New Challenges: N/A

*Systemic Factor: Agency Responsiveness to the Community – Item 32: Coordination of CFSP Services With Other Federal Programs*

Description of Systemic Factor Item: The agency responsiveness to the community system is 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- and family- serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Strength for Item 32 based on information from the statewide assessment. In the statewide assessment, the Department described how the state coordinated federally funded services and collaborated with other agencies receiving federal funds/grants. The state presented examples of how these collaborations were supporting children and families.
- New Challenges: N/A

*Systemic Factor: Foster and Adoptive Parent Licensing, Recruitment, and Retention*

- Status: As evidenced in the 2015 CFSR3, the Department is not in substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention. None of the four items in this systemic factor was rated as a Strength.
- New Challenges: N/A

*Systemic Factor: Foster and Adoptive Parent Licensing, Recruitment, and Retention – Item 33: Standards Applied Equally*

Description of Systemic Factor Item: The foster and adoptive parent licensing, recruitment, and retention system is 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.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 33 based on information from the statewide assessment. In the statewide assessment, the Department described the state policies and processes for applying licensing standards at initial licensing and at reevaluation. Stakeholders reported that there were inconsistencies in how the standards are applied, particularly in the use of waivers for unrestricted family homes.
- New Challenges: N/A

*Systemic Factor: Foster and Adoptive Parent Licensing, Recruitment, and Retention – Item 34: Requirements for Criminal Background Checks*

Description of Systemic Factor Item: The foster and adoptive parent licensing, recruitment, and retention system is 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.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 34 based on information from the statewide assessment. Information in the statewide assessment and collected during interviews with stakeholders provided information on the state's policy requiring foster and adoptive parents to complete criminal background checks prior to licensing. However, no data or information in the statewide assessment or obtained from stakeholders during interviews demonstrated that the policy was being implemented consistently statewide. The state was unable to provide data or information concerning provisions for addressing the safety of foster care and adoptive placements for children.
- New Challenges: N/A

*Systemic Factor: Foster and Adoptive Parent Licensing, Recruitment, and Retention – Item 35: Diligent Recruitment of Foster and Adoptive Homes*

Description of Systemic Factor Item: The foster and adoptive parent licensing, recruitment, and retention system is 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.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 35 based on information from the statewide assessment. In the statewide assessment, Massachusetts described general recruitment efforts including the quarterly comparison of the race and ethnicity of resource caregivers with the population of children in need of care. The state did not provide data or information in the statewide assessment to demonstrate that the state's approach to diligent recruitment was adjusted based on data or that there was a functioning statewide



recruitment plan. Stakeholders were also unable to provide this data or information. The MA CFSR3 PIP includes targeted strategies and activities which are anticipated to improve performance.

- New Challenges: N/A

*Systemic Factor: Foster and Adoptive Parent Licensing, Recruitment, and Retention – Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements*

Description of Systemic Factor Item: The foster and adoptive parent licensing, recruitment, and retention system is 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.

- Status: As evidenced in the 2015 CFSR3, the Department received an overall rating of Area Needing Improvement for Item 36 based on information from the statewide assessment. In the statewide assessment, Massachusetts described its partnership with the Massachusetts Adoption Resource Exchange and its ability to access nationwide pre-adoptive resources through AdoptUSKids. Data in the statewide assessment documented that although timeliness has improved, a sizeable number of home studies requested by other states in order to place a child in a Massachusetts home are delayed beyond 60 days. Stakeholder interviews confirmed this information and reported that little information is available on the effectiveness of the state's use of cross-jurisdictional placements.
- New Challenges: N/A

### **C3. UPDATE TO THE PLAN FOR IMPROVEMENT AND PROGRESS MADE TO IMPROVE OUTCOMES**

In September 2015, based on the recommendations outlined in the 2014 CWLA Quality Improvement Review, the Department of Children and Families, with the support of Governor Baker and the Executive Office of Health and Human Services, embarked on extensive initiative to improve child safety and strengthen the capacity of the agency. The report's recommendations provided a blueprint for the Department to follow on its path to reform and laid out initiatives for the Department to put into action in the years ahead. Ever since, the Department has been focused on implementing the report's recommendations. In essence, the report became the foundation of the Department's Strategic Plan for the near future.

The CWLA report focused its recommendations on:

- increasing social worker staff to reduce caseloads and achieve the caseload standards of 15 families per worker;
- updating Department policies such as case transfers, children missing from care, and background record checks, among others, and ensuring staff are appropriately trained on the policies;
- reviewing, strengthening and then re-launching the Department's case practice model;
- ensuring social worker staff are adequately trained and licensed;
- decoupling the area office "pairings", the management structure which has one area director managing two area offices;
- expanding Department's system of regional offices from the current four;
- adding specialty staff to area offices with expertise on the issues of substance abuse, domestic violence, and mental health; and
- increasing medical staff supports to area offices by adding pediatric nurse practitioners and hiring a full-time Medical Director.

On the following pages, we provide the full list of recommendations and the current status/timeline of each of the original CWLA recommendations, identified by the tag" (CWLA)." In addition, we provide status updates on the Department's progress toward other initiatives undertaken more recently.

## COMMUNICATION AND COMMUNITY ENGAGEMENT

Recommendations	Status/ Timeline	Comments
Revise policies, practice guidelines, website, and written materials to consistently communicate agency's primary responsibility to protect children. (CWLA)	FY15 Complete	New mission and vision statement created and posted. All policy revisions reiterate primary focus on safety first (Case Transfer, Background Record Check, Protective Intake, Supervision, Family Assessment and Action Planning)
Revamp and reorganize DCF website to provide current and comprehensive information to external stakeholder.	FY16-17 Complete	The Department revised its website to include user-friendly, stakeholder information about: the Department's services, locations, regulations, and policies; filing reports of abuse or neglect; requesting records; contacting the Office of the Ombudsman; seeking employment with the Department; and, becoming a foster or adoptive parent. Prospective foster parents and adopters may submit applications online or by mail. <a href="https://www.mass.gov/orgs/massachusetts-department-of-children-families">https://www.mass.gov/orgs/massachusetts-department-of-children-families</a> <a href="https://www.mass.gov/how-to/apply-to-become-a-dcf-foster-parent">https://www.mass.gov/how-to/apply-to-become-a-dcf-foster-parent</a>
Revamp and reorganize DCF intranet to provide current and comprehensive information to DCF staff on current events, policies and procedures and promote internal communication.	FY16 Complete	New DCF Social Intranet launched statewide. Allows for greater communication across the organization. One particular feature of new intranet is that it allows staff for the first time to access DCF policies via their iPads.
Reinstate DCF Newsletter to provide current and up-to-date information on progress on Department reforms and current initiatives.	FY16-18 Ongoing	The Department sends periodic newsletters to all staff to provide progress updates. The Commissioner and Leadership Team post important information on the Department's Intranet, to which all staff have access.
Initiate Foster Care Campaign to increase the availability and retention of foster families.	FY16-18 Complete	The Department developed a revised business process for recruitment and hired 15 foster care recruitment staff. A contracted vendor assisted with branding and a media campaign that resulted in production of recruitment videos, posters, and public displays. A Department Facebook page is host to recruitment event notices and posts of interest to current and prospective foster/adoptive families.
MA media outlets undertake public education campaign to raise awareness of each individual's responsibility to protect children from abuse and neglect and to uphold the rights of children. (CWLA)	FY 16 - 19	Strengthening DCF's approach to working with the media began with implementation of new policies. This included press conferences and availabilities for the Governor, Secretary of the Executive Office of Health and Human Services and the Commissioner to brief the press and public on the agency's renewed focus on child safety and permanence, and on activities to strengthen agency capacity.
Increase community engagement in educating the public on unsafe sleep for infants. (CWLA)	FY15 & Ongoing	The Department's Medical Director continues to work with the Department of Public Health to design and launch a new <i>Safe Sleep</i> campaign. The interagency group is working to develop and produce updated brochures and other printed materials, as well as public service announcements to promote safe sleep practices and reduce child fatalities from unsafe sleep. The Department includes safe sleep training in its curricula for training foster parent and kinship parents. Safe sleep awareness and practices are

		being integrated into the Department's revised training for new Social Workers.
Increase active engagement of children, youth, families, leadership, and workforce in determining and responding to needs within communities. (CWLA)	FY15 & Ongoing	The Department has active Family, Youth, and Provider advisory groups as well as local Area Boards. The Department continues to work with each of these Boards and groups to respond to community needs and strengthen working relationships

## LEADERSHIP AND ORGANIZATIONAL CULTURE

Recommendations	Status/ Timeline	Comments
Maximize Staff and Work Place Safety	FY16-17 & Ongoing	The Department holds bi-annual safety conferences. The Department has created safe workplace sign and placed them in all area offices. The Department also invested in an emergency alert system that contacts staff via text, telephone, and/or e-mail to alert of an emergency. In addition, the Massachusetts State Police have been conducting "lock-down" trainings and drills with DCF area offices to educate staff on proper procedure to maintain safety in the event of an attack on an office.
Strengthen clarity of Practice Model, address related dissent among managers and staff, and reduce inconsistencies in implementation. (CWLA)	FY16-19	The Department is developing new Principles of Practice to guide all future policy and practice development. This was included as a strategy in the most recent CFSR PIP. Policy Unit staff have begun drafting an outline of the new Principles of Practice.
Establish consistent expectations and protocols for management and clinical case reviews including when they are initiated, who attends, how they are conducted, and how information is synthesized, documented and shared to inform case direction/decision-making and system improvement.	FY16-18	Included in Protective Intake and Supervision and Family Assessment and Action Planning (FAAP) policies (implemented); Included in In-home Casework Policy to be implemented in FY'18.
Develop a plan to ensure that staff at each level of leadership has the necessary competencies. (CWLA)	FY17 - 19	<p>The Department's Child Welfare Institute (CWI) is partnering with the Capacity Building Center for States (The Center) to co-create an Intensive Project to develop and pilot a leadership framework for DCF's leaders. The Department began working with the Capacity Building Center for States (CBCS) in FY'18. To date, The Center has completed an assessment of the Department's capacity</p> <p>Together, the CWI and The Center will develop and pilot competencies for leadership professional development, integrate policy into training, ensure critical thinking skills and coaching principles are embedded in the current training provided to newly hired leaders.</p> <p>DCF's Agency Improvement Leadership Team process continues to model leadership competencies for Central Office, Regional, and Area Office leaders.</p>

<p>Cultivate a positive culture and climate in which accountability, communication, responsiveness, and commitment to improvement are valued and rewarded. (CWLA)</p>	<p>FY16-18 Ongoing</p>	<p>DCF's CQI unit has been staffed and CQI plan implemented. At weekly AILT meetings, the Assistant Commissioner of Continuous Quality Improvement presents weekly metrics. During FY 18, a first cohort of more than 80 Department staff participated in the inaugural Data Fellows program, during which they completed nine data-driven projects responsive to specific needs of Area and Regional Offices. The weekly metrics presentations and the Data Fellows program have contributed significantly to creating a positive climate, valuing accountability, and rewarding CQI activity.</p>
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## POLICY AND PRACTICE

Recommendations	Status/ Timeline	Comments
<b>Visits and Contacts with Children and Families</b>		
Develop visit protocols to assist SWs with quality contacts and engagement in home visits. (CWLA)	FY15 Complete	Developed and issued to all staff: <i>A Field Guide for Social Workers: Quality Visits and Contacts with Families.</i>
Implement statewide mandatory mechanism for real-time data entry for visits to children, families, and foster/adoptive/kinship homes; Enforce expectation on documentation of visits/contacts within 30 days after contact. (CWLA)	FY15-19	iPads now issued as standard equipment to all field staff to enable real-time data entry and a dashboard is available to staff on status of visits/children needing to be seen. Revisions to <i>In-Home Casework Policy</i> are in process.
<b>Transfer of Cases</b>		
Revise Case Transfer Policy to require face-to-face meetings among staff for case transfers. (CWLA)	FY15 Complete	New Policy in effect as of March 2015.
<b>Background Checks</b>		
Develop, revise and promulgate regulations to ensure foster/adoptive parent applicants and kinship resources are appropriately assessed. (CWLA)	FY15 Complete	Implemented through revised policy and procedures.
Revise regulations to create approval processes, rather than waiver or variance, for kinship and foster/adoptive caregivers (CWLA)	FY15 Complete	Implemented through revised policy and procedures.
Review all child placements in homes approved through background check waiver, to identify those for heightened case monitoring, home visitation, supervision, or case oversight. (CWLA)	FY15 Complete	Intense one time review of all waivers conducted in FY2015.
Revise regulations & standards to require results of background check with conviction of certain felonies to exclude eligibility as a foster/adoptive parent, or kinship provider; Require outside screening for certain offenses. (CWLA)	FY15 Complete	Implemented through revised policy and procedures.
Ensure compliance with current policy relative to retaining all records of any criminal background checks for applicants for foster care, adoption, or kinship care. (CWLA)	FY15 Complete	Adherence to policy affirmed.
Executive branch and legislature consider ramifications of changes to background checks on foster and kinship resources. (CWLA)	FY15 Complete	Discussed as part of implementation of policy and procedural changes.
Regulations and standards updated to identify qualities and characteristics needed and the minimum requirements that must be evident in the home—align with standards developed by ABA, NARA, GU and Annie E. Casey Foundation; limit waivers to non-safety standard. (CWLA)	FY17 Complete	New approval process completed incorporating recommended standards. IT system updates to support new process implemented in September 2016.

<b>Missing Children and Runaways</b>		
Require digital photo of each child who enters the care and custody of the Department; updated every 6 months. (CWLA)	FY15 & Ongoing	Required for children at case transfer and for all children placed in a contracted placement; planned requirement for all children in DCF care or custody.
Revise runaway and missing child procedures to include age appropriate variables, procedures for search, procedures for notification of law enforcement, and for initiating Amber Alert protocols. Develop assessment on vulnerabilities that place a child at heightened risk for running away. (CWLA)	FY16-17 Complete	<b><i>Policy on Responding to Children Missing from DCF Care and Custody</i></b> was finalized and negotiated and implemented in September 2016. The Department has revised the Policy for Children who are Missing or Absent in response to feedback after the first year of implementation. The revised policy includes procedures for prevention, includes all children involved with the Department (not limited to those in care or custody), and transitions from assessing risk level to assessing immediate danger when a child is missing or absent.
Initiate Business Process Redesign to merge “siloe” programs and resources dedicated to preventing, locating and returning runaway and children missing from DCF Care and Custody.	FY16-17 & On-going	Runaway Assistance Program from EOHHS has been merged with DCF resources and programs.
<b>Case Practice Model/Principles of Practice</b>		
Practice Model refined to clearly reflect rights of children and priority on child safety; Define the practice model by clarifying the desired elements: Practice Principles and skills and competencies that reflect the agency’s mission/vision, and alignment with DCF policy requirements. (CWLA)  <b>MA CFSR PIP Goal 1: MA DCF will develop and implement Principles of Practice that will guide child welfare practice, increase family engagement and the involvement of communities, providers, and other agencies, with the intended outcome that children of the Commonwealth will be safer, will experience improvements in permanency, and that their wellbeing will be improved.</b> MA DCF will use the strategies outlined within Goal 1 to increase family engagement and the involvement of communities, providers, and other agencies with the intended outcome that children of the Commonwealth will be safer and that their well-being and permanency will be improved.	FY15-19	The Department is building new Principles of Practice to guide all future policy and practice development. This was included as a strategy in the recently submitted CFSR PIP.  <b>MA CFSR PIP Goal 1 – Strategy 1: Complete Principles of Practice Document for MA DCF, using the Core Principles of the CWLA National Blueprint for Excellence in Child Welfare (CWLA Press, April, 2013) as the essential elements.</b> The MA DCF Principles of Practice will reflect the agency’s mission/vision, and will provide the foundation for consistent practice within the Department and in its contracted programs. DCF will use the eight Core Principles of the CWLA National Blueprint as the framework for development of the MA DCF Principles of Practice. They address: Rights of Children; Shared Responsibility and Leadership; Engagement/ Participation; Supports and Services; Quality Improvement; Workforce; Race, Ethnicity, and Culture; and, Funding and Resources.
Involve DCF staff from every level of the organization, including representatives from SEIU Local 509 and parents, in redefining and rebuilding the case practice model. (FY15)	FY15 Complete	SEIU and parent representatives on Steering Committee.
Consolidate and clarify multiple/conflicting directives and guidance documents related to provide clear direction and expectation for screening and responding to reports of abuse and neglect (e.g., Protective Intake policy). (New)	FY16 Complete	Addressed in new Protective Intake Policy implemented in February 2016
Ensure practice model guides and supports all child protective and preventive work in by all parties: DCF, lead agencies, and community-based providers; Revise training modules for the ICPM. (CWLA)	FY16-19	Principles of Practice will be developed in FY’19. New practice principles will be incorporated into all internal training, shared with stakeholders and incorporated into contracting for services.

Revise DCF Policies to align with Practice Model values, principles and skills (e.g., Family Assessment and Action Planning, Case Closing, etc.).	FY16-19	All newly revised policies will align with Principles of Practice.
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**MA CFSR PIP Goal 2: Increase permanency and stability of child placements through strengthening family resource programs and services.** DCF intends to adopt an integrated recruitment and support system, which connects its approach to recruitment, response, training, development, and support of foster, adoptive, and kinship families. This integrated approach will be based on shared data to inform the planning and implementation of each part of the process and will have well-established feedback loops so that each of the activities – recruitment, preparation and training, licensing, and support – is shaped by lessons learned from all parts of the work. This effort will occur in concert with DCF’s development of its CQI model and program, and will integrate both currently available data and data eventually available as the CQI program expands and grows.

<b>In-Home Safety</b>		
Develop protocols for evaluating risks to children living at home, including risks from household members who are not the child’s parents. SDM tool to be used consistently. (CWLA)	FY16 – 19	The Department’s vendor has completed a validation study of the Department’s Risk Assessment tool. The tool has been revised based on the validation study findings. The revised tool will be used in all cases going forward.
<b>Child Care/Early Education</b>		
With EEC, revise standard on discontinuing child care due to excessive absences. (CWLA)	FY15 Complete	Implemented through procedural change to ensure continuity of care.

## QUALITY IMPROVEMENT

Recommendations	Status/ Timeline	Comments
<p>Develop a plan for establishing a robust quality improvement system using Council on Accreditation’s (COA) public agency standards for Performance and Quality Improvement (PQI). (CWLA)</p> <p><b>MA CFSR PIP Goal 3: Develop a robust CQI Program.</b> The ACYF-CB-IM-12-07 information memorandum on Establishing and Maintaining Continuous Quality Improvement (CQI) Systems in State Child Welfare Agencies will inform the development of DCF’s CQI system. The Department’s CQI approach will better equip DCF to measure the quality of services provided in Massachusetts by determining the impact those services have on child and family level outcomes and functioning, and the effectiveness of processes and systems in operation statewide. A robust CQI program will function statewide to ensure that it is (1) operating in the jurisdictions where the services included in the Child and Family Services Plan (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.</p>	FY16-19	The Department has established a fully-staffed quality improvement program that is has primary responsibility for monitoring performance on outcome measures, using metrics to evaluate performance and fidelity to Department policies and practices, and conducting case record reviews.
Initiate discussions with MA institution(s) of higher learning to partner with them to evaluate the Practice Model. (CWLA)	FY18	The development of Practice Principles has replaced DCF’s plans for revision of a practice model. Institutions of higher learning are among the stakeholders involved in development of the Principles of Practice.



Explore data management and display tools to make management data visible, transparent and easy to use by DCF managers and other stakeholders.	FY16-17 Complete	New management data reports have been created and implemented focusing on specific metrics relevant to area office managers. Reports are designed with easy-to-understand charts and graphs to facilitate review and understanding by managers.
Implement mechanisms for soliciting and considering feedback from children, youth, families, partners, collaborators, etc. on a regular basis. (CWLA)	FY15-19	Parent/Guardian Satisfaction survey completed twice. CQI team is exploring modification and simplification of parent/guardian survey process. Surveys are distributed annually to Youth in transition (aging out).
Establish outcome measures that are clearly articulated, measurable and regularly published. (CWLA)	FY16-18 Complete	Dashboard of key measures for internal publication implemented in January 2016; Program Improvement Plan (PIP) completed and submitted in Fall of 2016 as result of CFSR review in fall of 2015.
Make QI process transparent to youth, families, providers and the public. (CWLA)	FY16-17 Complete	Dashboard of key measures for internal publication implemented as of January 2016.

## HEALTH AND MEDICAL SERVICES

Recommendations	Status/ Timeline	Comments
Hire Pediatric Nurse Practitioner (PNP) in each Area Office and a Medical Director. Area Office PNP responsible for reviewing, within 24-hours, significant medical information for the child. PNPs should rotate responsibility for coverage on weekends and holidays. (CWLA)	FY16-17 Complete	Medical Director (MD) hired as of 1.1.2016. Consulting Psychiatrist and 1 RN per region also hired. Hiring 1 Medical Social Worker per Area Office (29 out of 29 completed).
Establish protocols for Social Workers and other DCF staff on when/how to seek medical consultations on DCF cases.	FY16 Complete	Included in Supervision Policy.
Conduct statewide training for DCF staff (social workers and supervisors) on Healthy Child Development and signs of medical neglect.	FY16-18 Complete	Plan to include in next round of clinical training in Fall 2018
Establish an “expert panel” to provide support and consultation to DCF staff and medical personnel in difficult cases. (CWLA)	FY16-17 Complete	Priority task for Medical Director, who currently facilitates access to specialty consultation on medical complex cases.
SW of record at the time the child enters the care of DCF should have direct contact with the PNP to report what is known about the child’s current status. (CWLA)	FY16-17 Complete	Medical Social Workers and DCF nurse work with social workers to ensure that necessary assessments are conducted.
Establish a triage protocol for determining the urgency of screening and comprehensive exams/well-child visits and ensuring visits. (CWLA)	FY16-17 Complete	Priority Task for Medical Director; recommendations developed by working group.
Undertake statewide effort to educate staff and doctors at hospitals, medical offices, and community health centers to assure that requested information is made available quickly and efficiently. (CWLA)	FY16-18 Complete	Priority Task for Medical Director, who has begun outreach to hospitals and facilities that treatment and assess children involved with DCF.

## WORKFORCE AND PROFESSIONAL DEVELOPMENT

Recommendations	Status/ Timeline	Comments
<b>Licensure and Training</b>		
Legislature amend M.G.L. c. 112, § 131 and 134 to eliminate DCF staff's exemption from social work licensing requirements. All clinical staff licensed in social work or in a related field. (CWLA)	FY15 & Ongoing	Chapter 165 of Acts of 2014 required all DCF social workers to be licensed within 9 months of hire; As of June 2018 (latest available data) more than 99% of staff are licensed; support for license preparation is available for new and current social workers; new social workers are encouraged to apply for licensure during their orientation with the Department.
MA legislature amend M.G.L. c. 112, § 131 and 134 to eliminate DCF staff's exemption from continuing education and professional licensing requirements. All clinical staff required to meet continuing education standards. (CWLA)	FY15 & Ongoing	Chapter 165 of Acts of 2014 required all DCF social workers to attend 30 hours of training/year; Child Welfare Institute increased availability of in-service trainings to support attainment of new training requirements; tracking of training hours set up through PACE.
Establish standards for training and continuing education for all staff that are consistent with social work licensing requirements. (CWLA)	FY15 Complete	New requirements exceed this standard.
Increase opportunities for staff to participate in cross-training with sister agencies, community providers, and collaborative organizations. (CWLA)	FY15 & Ongoing	Mental health and substance use cross-training initiated with Department of Public Health in FY17. Additional cross agency training available through the Department of Youth Services, and the Commission for the Deaf and Hard of Hearing.
Professional development plans for each DCF employee as part of an annual performance evaluation. (CWLA)	FY15 & Ongoing	Existing annual performance evaluation processes include professional development goals.
<b>Trauma-informed Approaches &amp; Secondary Trauma</b>		
All staff to have competency-based training in trauma-informed approaches. (CWLA)	FY15-17 Complete	In 2016, DCF received 1-year extension to 5-year federal grant (Massachusetts Child Trauma Project) – training provider agencies, DCF staff and foster parents on trauma-informed care for DCF involved children and families. During the five years of MCTP, the child welfare system achieved a greater awareness about the impact of trauma, not only in relation to child trauma, but also trauma experienced by parents and staff. DCF incorporated information about trauma in numerous policy and practice guides and has also been paying increased attention to the well-being of staff. The DCF Protective Intake Policy was implemented in February 2016, and DCF launch its new Family Assessment and Action Planning policy in February 2017. Both of these policies require that workers assess parental capacities utilizing the Protective Factors Framework and respond to specific questions under each of the Protective Factors that assess areas potentially impacted by trauma.

		<p>The Child Welfare Institute is offering DCF staff competency-based trauma informed approaches through in-service courses:</p> <ul style="list-style-type: none"> <li>• <b>Understanding Children Who Have Experienced Trauma</b> – This practical workshop examines trauma and helps look “under the iceberg” to see what is fueling children’s behavior. The National Child Traumatic Stress Network (NCTSN) curriculum will be presented to provide skills necessary to respond appropriately to behavioral and emotional challenges of traumatized children.</li> <li>• <b>Childhood Trauma – Integrating Critical Thinking Skills</b> – An overview of the 12 core concepts of traumatic stress will be explored and applied to case examples through the use of critical thinking lens. A case conceptualization framework will be reviewed to increase participant’s capacity to present cases.</li> </ul>
Each Area Office to establish a secondary trauma support team. (CWLA)	FY15-17 & Ongoing	<p>Area Offices have established Trauma Informed Leadership Teams (TILT), Wellness Committees and/or Staff Safety Committees. Trauma Informed Leadership Teams (TILTs) that successfully launched in Area Offices maintained the focus on enhancing trauma informed practices and are poised to continue beyond the grant period. DCF managers and supervisors have taken on leadership of TILTs as a part of their ongoing work responsibilities. They are very aware of the benefits of a trauma informed approach and remain passionate and dedicated to integrating this approach throughout their office. There have been very strong partnerships that have developed among DCF and community partners on TILTs and participants have expressed commitment to continuing their collaboration.</p> <p>In addition to the TILT teams, Area Offices have developed an incident de-brief process for staff. These de-briefs are not just fatality or critical-incident related, but also includes difficult removals and worker safety situations. These efforts are but one of many tools that serve to enhance our worker retention efforts.</p> <p>Every month the RCD join the CIRC group in reviewing office fatalities. Through that process issues of secondary stress and trauma-focused work are often discussed. In difficult cases, we are sometimes informed as to the area office efforts to de-brief/support social workers involved, including making sure they get connected to the Massachusetts Employee Assistance Program (EAP).</p>
DCF staff, placement resources, judges, court personnel, and CASA to receive training in trauma-informed services. (CWLA)	FY15-18	<p>(See Trauma Grant above); Will require work with others to reach external parties.</p> <p>The Child Welfare Institute is offering DCF staff competency-based trauma informed approaches through in-service courses.</p>

		<p>Spring, 2014, MA Child Trauma Project, offered a 12-hour training program to resource families across the commonwealth.</p> <p>MSPCC/KidsNet, through a contract w/DCF, provides supportive services to resource families. Included in this contract is a training component. Current schedule September, 2017-January, 2018 trainings are offered throughout the commonwealth. Included are trainings specific to trauma. Each calendar of training includes a session on trauma training. August, 2016, work began to update the MAPP curriculum utilized to train our foster/pre-adoptive applicants, the updates included trauma training.</p> <p>Department leadership attended a workshop by Harvard Center for Development of the Child staff in May, 2018 including recent research on the effects of trauma on child/brain development and implications for child welfare policy and practice.</p>
Develop protocol for all contracted providers for trauma-informed engagement. (CWLA)	FY15 & Ongoing	With DMH implemented contract standards on trauma-informed care and in 8th year of initiative on reducing use of coercive behavior management techniques.

<b>Supervision</b>		
Each DCF employee has regularly scheduled supervision -- establish and enforce baseline expectations for the provision of scheduled, dedicated time for supervision for each individual. (CWLA)	FY15-16 Complete	New Supervision Policy finalized as of 11.17.2015 and implemented in Spring 2016.
Ensure Supervisors and Managers have supervisory training, current performance evaluation, and demonstrate the competencies required for their respective positions. (CWLA)	FY16-18 & Ongoing	Provided as part of training curriculum on Supervision Policy implementation. (See page 3 section on Leadership – CWI's work with The Center.

## STAFFING, CASELOADS AND OTHER RESOURCES NEEDED

Recommendations	Status/ Timeline	Comments
<p><b>Area Office Staffing</b></p> <ul style="list-style-type: none"> <li>Area Director and ACM for each Area Office (CWLA)</li> <li>APMs to support a ratio of 1:4 (CWLA)</li> <li>Sufficient social worker and supervisory personnel to comply CWLA Caseload recommendations (CWLA)</li> <li>Medical Social Worker in each Area Office (CWLA)</li> <li>Administrative support for Area Offices</li> </ul>	FY16-19	<p>Area Office Staffing updates:</p> <ul style="list-style-type: none"> <li>As of June 2017, all area offices have a dedicated Area Director and Area Clinical Manager.</li> <li>The Department is in the process of hiring Area Program Managers to support a ratio of 1:4.</li> <li>Since September 2015, the Department has hired more than 825 [exactly 829 as of May 12th] new employees to address the critical infrastructure needed to run the agency (a 24% increase since Sept. 2015), including: <ul style="list-style-type: none"> <li>343 front line social workers (a 15% increase, for a total of 2608 front line social workers)</li> <li>86 supervisors (a 19% increase, for a total of 535)</li> <li>110 managers (a 57% increase, for a total of 302)</li> <li>90 social worker technicians (% increase is n/a as there were 0 FTEs in Sept. 2015)</li> </ul> </li> <li>29 of 29 Medical Social Workers have been hired</li> <li>Staff have been hired to restore appropriate administrative staffing ratios for area offices</li> </ul>
<p><b>Regional Office Staffing</b></p> <ul style="list-style-type: none"> <li>5.0 FTEs for CQI (CWLA)</li> <li>Restoration of 6 regions and 6 regional offices (CWLA)</li> <li>Backfill Boston RN, additional RN for each Region (CWLA)</li> <li>Additional Clinical specialist in DV, SA and MH for each Region (CWLA)</li> </ul>	FY16-18	<p>Regional Office Staffing updates:</p> <ul style="list-style-type: none"> <li>CQI hires complete.</li> <li>DCF has restored 5 regions.</li> <li>An RN for each region has been hired.</li> <li>2 additional Substance Abuse Specialists were hired during FY18. Domestic Violence, Mental Health, and Substance Abuse Specialists now exceed CWLA recommendation.</li> </ul>
<p><b>Central Office Staffing</b></p> <ul style="list-style-type: none"> <li>2.0 FTE Policy Staff</li> <li>2.0 FTE for MCWI</li> <li>Backfill key CO leadership positions in Foster Care, Programs and Planning, Hotline, Family and Community Engagement (Family Resource Centers) and Field Support.</li> <li>Additional ERIP Backfills in key positions: Finance, Training, Family Resource Centers, Education, Foster Care Review, Ombudsman's Office, Hotline</li> <li>Director of Continuous Quality Improvement</li> </ul>	FY15-17 Complete	Key Central Office positions have been hired.

<b>Fair Hearings</b> <ul style="list-style-type: none"> <li>• 2.0 FTE Fair Hearing Officers</li> <li>• 1.0 FTE Fair Hearing Supervisor</li> <li>• 9.0 Paralegals (including 5 dedicated to reducing Fair Hearing Backlog)</li> </ul>	FY16-17 Complete	Fair Hearings staff have been hired
Assess fiscal and staffing needs within the MA Child Welfare Institute to support full implementation of/compliance with new laws on social worker licensing and ongoing training (30 hours/year).	FY16-17 Complete	MCWI staff hired to oversee and track Social Work licensure and training requirements.
DCF, DPH, lawmakers, substance abuse programs, and others to work together to increase funding for substance abuse programs, especially for parents and expectant parents. (CWLA)	FY16-18	Training and outreach efforts underway in alignment with recommendations of Governor's Opioid Working Group
Enhance foster care recruitment and support safety for DCF involved children living at home by increasing funding for Supportive Child Care Program.	FY16-17	<p>The Department developed a revised business process for recruitment and hired 15 foster care recruitment staff. A contracted vendor assisted with branding and a media campaign that resulted in production of recruitment videos, posters, and public displays. A Department Facebook page is host to recruitment event notices and posts of interest to current and prospective foster/adoptive families.</p> <p>As of the end of May 2018, there are 6,944 children in DCF's contracted child care slots. EEC just sent me the updated number for vouchers. As of the week ending June 9<sup>th</sup>, 2018, we have 1814 active child care vouchers</p>

#### Update on Progress Made to Improve Outcomes

The CFSR PIP baseline for safety, permanency, and well-being measures was set in January 2018, based on cases reviewed in 2017, using the Department's established CQI case practice review system. APSR updates represent these measures, baselines, and subsequent case review results.

#### C4. UPDATE ON SERVICE DESCRIPTION

Below DCF provides an update on the services provided through the programs/services areas identified in the program instruction. For each program, there is a description of the services to be provided in FY2019 relative to the key outcomes for the grants along with program-specific information as required by the program instruction. Data related to the number of individuals served, population served, and geographic areas where the services are available is provided both here and in the CFS-101, Part II.

##### **Stephanie Tubbs Jones Child Welfare Program (Title IV-B, subpart 1)**

The Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B, subpart 1) provides critical funding for a variety of child welfare services. During FY2019, the Department will continue to use grant funding to achieve the following key outcomes. This funding allocation is consistent with FY2018:

- *Protecting and promoting the welfare of children/preventing the abuse, neglect, or exploitation of children*– The Department uses IV-B subpart 1 funds to support social worker travel in the performance of their duties serving children and families.
- *Supporting at-risk families* – The Department uses IV-B subpart 1 funds to fund two programs that provide services that allow children to remain with their families or return to their families in a timely manner. The first is Family Support Services, which provides needed flexible supports to intact families with the focus on keeping children safely in their homes. The second is the operation of Family Resource Centers throughout the Commonwealth. The Family Resource Centers provide resource and referral services to families in need prior to their involvement with the Department.

##### Data Related to Number of Individuals Served, Population Served, and Geographic Areas

The data below is related to number of individuals served, population served, and geographic areas where the services are available. This data is also reported in the CFS-101, Part II.

<b>IV-B, subpart 1 Program</b>	<b>Individuals Served</b>	<b>Population Served</b>	<b>Geographic Areas Services are Available</b>
Protecting and Promoting the Welfare of Children; and Preventing the Abuse, Neglect, or Exploitation of Children	Approximately 48,000 Children/25,000 Families (entire caseload)	All children and families involved with the Department	Statewide

Below, we also provide data specific to federal spending from the grant that is not included in the CFS-101, Part II:

<b>IV-B, subpart 1 Program</b>	<b>Individuals Served</b>	<b>Population Served</b>	<b>Geographic Areas Services are Available</b>
Supporting At-Risk Families – FRCs	10,729 Families	Families in the Commonwealth in need of services	Statewide (there is an FRC in every county of the Commonwealth)
Supporting At-Risk Families – FSS	478 Families	Intact Families in need of supports	Statewide



### Budget

In the chart below, we present the FY18 and FY19 planned budget for the grant. We provide two views: expenditures grouped by category and expenditures grouped by the grant objectives. Expenditures reported reflect spending incurred/projected during the respective state fiscal years and do not necessarily correspond with the federal fiscal year spending reported in the CFS-101.

CHILD WELFARE SOCIAL SERVICES PROGRAM - IV-B, SUBPART 1		
Expenditure Category	FY18	FY19
Salary	\$ 47,000	\$ 60,000
Fringe Benefits	\$ 13,000	\$ 13,500
Travel	\$ 2,600,000	\$ 2,600,000
Equipment	\$ 135,000	\$ 120,000
Supplies	\$ 500	\$ 500
Contract Services:		
<i>Legal Services</i>	\$ 6,000	\$ 6,000
<i>Family Resource Centers</i>	\$ 555,400	\$ 555,400
<i>Family Support Services</i>	\$ 325,000	\$ 325,000
<i>Other</i>	\$ 41,000	\$ 31,000
<b>Subtotal Direct Cost</b>	\$ 3,722,900	\$ 3,711,400
<b>Indirect Cost</b>	\$ 8,000	\$ 10,000
<b>GRAND TOTAL</b>	\$ 3,730,900	\$ 3,721,400

Grant Objectives	FY18	FY19
Protecting and Promoting the Welfare of Children; and Preventing the Abuse, Neglect, or Exploitation of Children	\$ 2,600,000	\$ 2,600,000
Supporting At Risk Families at Home or with Reunification	\$ 880,400	\$ 880,400
Administration:		
<i>Personnel and Overhead</i>	\$ 68,000	\$ 83,500
<i>Supplies and Administrative Costs</i>	\$ 135,500	\$ 120,500
<i>Administrative Activities</i>	\$ 6,000	\$ 6,000
<i>Other</i>	\$ 41,000	\$ 31,000
<b>Administrative %</b>	6.71%	6.48%
<b>GRAND TOTAL</b>	\$ 3,730,900	\$ 3,721,400

### **Promoting Safe and Stable Families Program (Title IV-B, subpart 2)**

The Community Connections Initiative originated in 1994 when the Department of Social Services (DSS), now known the Department of Children and Families (DCF), received Promoting Safe and Stable Families (PSSF) planning funds. DSS conducted a statewide listening and learning tour with multiple agencies, organizations and community residents. From this one-year process, Community Connections originated - based on the shared premise that it would take an integrated community response to truly impact how often poverty, isolation, traumatic circumstances, homelessness and hopelessness bring families into the child welfare system. The original Five Year Plan submitted in 1994 provided a strategic vision of systems change that was shaped by a multilevel organizing strategy to work across government

departments as well as local organizations and agencies. Ten Community Connections Coalitions were piloted in 1995 in order to build and enhance relationships between families and sources of support at a community level in some of the most significantly challenged communities in the Commonwealth. DCF has subsequently used PSSF funds to expand the Community Connections Initiative based upon a yearly assessment of lessons learned. By 2000, eleven more coalitions were funded. Concurrent with the identification and development of preventive best practices, Patch, Family Advocates, the Family Nurturing Center, the DCF Family Representative/ Family Advisory Committee, the DCF Fatherhood Representative/ Fatherhood Initiative, and Family Resource Centers (FRCs) were subsequently established from 2006-2013.

Community Connections has provided significant leadership in developing an integrated community response system in Massachusetts, promoting the idea that responsibility for the well-being of children and families must rest not simply on state government but be shared with cities, towns, local agencies and organizations and, perhaps most importantly, with families, friends and neighbors. A crucial component of the initiative's impact has been and continues to be, the ability to build trust with neighborhood residents. Additionally, coalitions have served as the vehicle to nurture parent leadership skills and to mentor parents to participate in forums where policies and practice decisions are made that affect their families. Many other institutions, agencies and organizations look to the Community Connections Initiative for leadership in this area. Strategies that were embedded in the Community Connections logic model are now institutionalized into DCF policies and practice and include parent involvement in planning, service delivery and evaluation; wider use of peers, groups, and informal support; and the employment of demographic data to inform and focus efforts and direct resources geographically. Family involvement and partnership are now widely seen as the cornerstone of good child welfare practice in Massachusetts.

During FY2018, the Department continued to use the grant funding to engage in substantial, ongoing and meaningful integration of community child-welfare practice and to promote prevention work across the Commonwealth. As evidenced in the submitted 2015-2019 Child and Family Services Plan (CFSP) and subsequent Annual Progress and Services Review (APSR) submissions, the agency continues to advance and implement the goals outlined in its Five Year Plan. In FY18, the Department of Children and Families saw increases in the need for formal and informal resources as the country, including Massachusetts, dealt with the ongoing opioid crisis. The integration of the Community Connections Initiative framework into DCF practice and policies continues to advance the ability of DCF to meet the goals of the Promoting Safe and Stable Families (PSSF) program including: Family Preservation, Community-Based Family Support, Family Reunification Services, and adoption Promotion. DCF has further demonstrated its commitment to the PSSF through its continued integration of best practice curriculum adopting the Five Protective Factors (Parental Resiliency, Social Connections, Knowledge of Parenting and Childhood Development, Concrete Support in Time of Need, and Social, Emotional Competence of Children). These same principles are incorporated in the new Family Assessment Action Plan (FAAP) by DCF, aligning child welfare family-centered practice with preventive work. DCF additionally collaborates with other entities such as juvenile justice agencies, the Massachusetts Children's Trust (CT), Department of Mental Health (DMH) and Department of Public Health (DPH) and the Department of Youth Services (DYS) which strengthens family-centered practice across intergovernmental and nonprofit family serving agencies. Below we highlight specific examples how practices are embedded in all facets of the work of Coalitions and DCF.

### *Family Preservation*

Throughout the year, DCF continued to focus on programs designed to improve parenting skills, reinforce parent confidence in areas such as child development, and decrease the risk for abuse and neglect. In February 2018, DCF conducted a qualitative review, which included case reviews and a focus group to

identify root causes that hindered effective father engagement and generated strategies to sustain father engagement. As a result, efforts to strengthen collaboration between community programs and DCF led to increases in Nurturing Fatherhood programs and DCF-led Fatherhood Engagement Leadership Teams (FELT's). Working with statewide Nurturing Programs we have increased the capacity and opportunities for families to participate in programs that increase their knowledge of parenting and child development while strengthening their ability to nurture positive attachments.

DCF staff, together with other state agencies involved with the Interagency Fatherhood Working Group (IFWG), attended the Nineteenth Annual New England Fathering Conference. The three-day conference brought together nationally known experts, dads, and state and federal representatives to share and learn current best practices in fatherhood work. Although a number of the practices discussed during the convention were already being implemented in Massachusetts, some new ideas served as a spark to revitalize the Father Ambassador program, which allows fathers to share their stories with social workers and other staff within DCF offices.

A pilot of a "30-60-90" day follow-up with fathers to evaluate the effectiveness of nurturing programs was also initiated:

- Opportunities for fathers to build leadership capacity were established/continued at several Community Connections coalitions. These groups were often co-facilitated by DCF staff or, in some cases, by fathers who had completed the program. DCF staff who works with one coalition acted as advocates and mentors for the fathers. Programs have also partnered and co-facilitated with staff from the Family Nurturing Center, Department of Housing and Community Development, local family shelters and Patch. Fatherhood Nurturing Support Groups have addressed such issues as effective communication skills, ways to discipline and cope with the stress of raising a child, building self-esteem in the parents and children, co-parenting and owning the role parents have played in any dysfunction of their lives. They also helped fathers deal with the issue of paying child support. This has been especially critical when fathers are underemployed or become unemployed and fall behind in their payments, lose their drivers' license or sometimes become incarcerated. This spiral negatively influences their criminal record and their subsequent ability to become re-employed.

### Community Based Family Support

Community Connections Coalitions were originally (and continue to be) funded by PSSF to connect families to community based resources and support. They engage, mobilize and listen to families while making sure they have a voice in decisions that affect their families and identify challenges, coordinate responses, and engage the community in a collaborative change process. Coalitions create awareness around the needs of families and emerging issues, especially those that threaten their well-being such as child abuse, domestic violence, and community violence. They engage community stakeholders, build partnerships and find resources to address emerging issues build community assets and bring about systems change.

Community Connections Coalitions significantly rely on the participation of parents, residents, community partners and local stakeholders. Building and maintaining trust with families is the cornerstone of their mission. On-going leadership development and advocacy training and mentoring opportunities are essential components in preparing parents to participate as advocates for themselves and their families. Community events, forums, events, activities and celebrations are important components of keeping families informed about the issues that impact them, be connected with each other and become and stay involved in their community. In partnership with local residents, agencies and organizations, Coalitions address such issues as basic needs, homelessness and youth assistance, immigration, education, health and violence.

Community Connections Coalitions have played a significant role in assisting the DCF Family Engagement Initiative by recruiting and mentoring community representatives, including former DCF-involved parents, to represent their communities by participating in decision-making bodies at every level of the Department. At the local level, coalitions have increasingly engaged with DCF Area Offices in order to bring a better understanding of the community to DCF staff and to provide information about local resources. They also partner with DCF to bring to the community a better understanding of the state agency mandated to protect children and preserve families and the complex responsibilities, policies and practices inherent in that mandate. Cross-referral procedures are well established between all coalitions and DCF Area Offices. Most coalitions collaborate with DCF in conducting issue-specific training and/or workshops, and in organizing community activities. Coalition representatives sit on DCF Area Boards and/or work teams; assist Area Offices in recruiting foster parents and/or partner to provide basic needs items such as school supplies and clothing for foster children. One coalition enhanced their traditional role as a channel for local families to have an ongoing dialogue and open communication with staff from the DCF Area Office by utilizing parent feedback forms and providing this summarized information about community concerns to DCF. This feedback also informed the development of workshops and information sessions for parents. Another coalition built upon its long-term relationship with the DCF Area Office and now provides a vital service by hosting supervised visitation meetings where families with DCF involvement and their workers can meet in a welcoming and comfortable, secure and safe environment. They have received great feedback about the space and program and the number of supervised visits has increased dramatically.

An example of cross-system work in addressing unmet an emerging issue occurred when a Coalition, after determining that 33% of the suicides in a county since January 2017 involved residents in its catchment area, made suicide prevention a focus of their efforts. The coalition sent community representatives to suicide prevention training, provided prevention materials that were sent to parents by both the high school and vocational school about how to discuss suicide with your teen. Both the vocational school and the high school also administered the Signs of Suicide Inventory to their 9<sup>th</sup> graders at the beginning of the school year and then again in the spring. The coalition arranged for training to take place at the School-Community Partnership, the Family Service Association and Child and Family Services. Further prevention activities included a Grief Group meeting for suicide loss survivors and suicide attempt survivors, as well as a workshop on men and depression. In collaboration with local partners, they designed and conducted a World Café about the issue that was attended by 78 people.

To increase parents' confidence and competence in their parenting abilities, several Coalitions are using the Parenting Journey model. The curriculum is delivered in a 12-week program that brings parents and caregivers together in a small group that meets 2 hours per week. The program is experiential – emphasizing learning by doing. Participants, through a combination of hands-on activities and reflection on their own childhood, develop the knowledge and skills to support an effective parent role and the kind of parent they want to be, based on their personal vision and values.

An example by which coalitions promote safe, stable and supportive family environments was when a local police chief, who was a Coalition Advisory Board member, raised concerns about several specific streets where he saw an increase of criminal activity. He also noted an increase in absentee property owners within the PATCH catchment area. The PATCH supervisor did a survey of PATCH cases and found that 60% of the PATCH families lived on those particular streets. The Advisory Board worked with the Police Department to identify strategies to best engage these families, conducted focused recruitment for the neighborhood fathers to attend a Nurturing Fathers Program, as well as to inform families about the supports and activities of the Family Resource & Development Center in the coming year.

### Adoption Promotion and Support Services

- The Department of Children and Families continues to collaborate with Community Coalitions, the Grandparents Raising Grandchildren Commission and the Family Resource Centers across the five regions. Community partners host parent cafés that brings foster parents, pre-adoptive families and social workers in a partnership that has facilitated the recruitment of potential adoptive families. Massachusetts has seen an increase in the number of grandparents adopting or taking guardianship of their grandchildren as a result of the state's opioid crisis. The Grandparents Raising Grandchildren Commission provides information, resources and support to grandparents and relative caregivers on issues of permanency for the children in their care by offering workshops, referrals, and consultation. Many grandparents contact the Commission for consultation on the legal process, to learn more about the differences between Juvenile Court and Probate and Family Court, and to learn about legal resources in their community and throughout the state in order for the family to make the best decision.
- The Commission hosts community workshops throughout the Commonwealth meets with support group facilitators and offers training to providers on topics and issues important to relative caregivers such as financial resources and mental health services. Additionally, coalitions hold Grandparent Support Groups for those who have the care, or have gained custody, of their grandchildren to discuss their experiences, network with other grandparents, and receive information on available resources to help alleviate isolation. Parent Cafés address issues such as legal rights, addiction, repeated rehabilitations DCF custody, kinship foster care/guardianship and the challenges the grandchildren will face.

### Family Reunification Services

As DCF works to recruit and retain foster families so that every child needing placement has the best possible match, it is also important to ensure that foster families have the resources to meet each child's unique needs. Coalitions assist DCF in foster care recruitment in both formal and informal ways. While some efforts are as simple as disseminating recruitment information, some coalitions lead significant programs that include increasing community awareness, conducting bi-lingual foster care information and recruitment sessions, organizing fundraisers and hosting foster family appreciation events. Community Connections are often a source for providing or referring parents to available basic needs such as food, clothing and/or school supplies. One coalition task force implemented a survey in English and Spanish that was sent out to 158 foster parents of which forty-seven responses were summarized regarding the types of services that they felt would be most beneficial to them and to the foster children in their care. They responded to their primary concerns by developing new partnerships which resulted in each family being given a Chamber of Commerce discount key tag to area businesses and free family passes for the local zoo. The local newspaper committed to doing a series of articles to raise awareness around the needs of foster children and the need for more foster homes and has committed to writing several more articles about the needs of children in care.

PATCH has been a shared practice between DCF and Community Connections Coalitions that also involves other state agencies, schools and community organizations in moving toward multi-level systems change in how they collaborate with, and for the benefit of, families. These partnerships have formed a shared ownership of safety, permanency as well a shift in roles and responsibilities for the well-being of families throughout communities. PATCH was initially developed to address cases of neglect or less serious abuse cases. Over time DCF found that Patch principles and practices are appropriate not only for neglect, and less complicated abuse cases but that they also align with the DCF policy and practice of working with cases involving serious safety concerns with complex situations and needs. Although the initial goal for Patch was to gradually replicate the program in other Area Offices, over time as DCF built

a comprehensive approach to Family and Community Engagement, the PATCH approach has been incorporated all into case practice as a way to maintain sustainable engagement across the state. The four initial PATCH partnerships continue to be a proving ground for innovative practices.

The purpose of the Family Advisory Committee (FAC) is to bring together a diverse group of community representatives whose various experiences with DCF provides a unique perspective from which to advise the Commissioner and help inform agency decisions. The composition of the FAC are family members with lived experience with the Department, had open protective cases with DCF, people who were involved with DCF as a youth, and community members invested in the safety and well-being of children across the Commonwealth.

The Department strives to keep its decision-making processes transparent by engaging community members in the review of new, or modified, agency initiatives. The FAC provides the opportunity for parents and other community members to have input into the development of practice, policies, and programs that affect families. The FAC builds mutual accountability between the Department and the families it serves by creating opportunities for dialogue and learning from both perspectives.

The FAC meets at least four times per year and is staffed by the DCF Director of Community and Family Engagement. Together, they develop a yearly Action Plan to guide the work of the FAC. FAC members receive stipends for their time and expertise. Some members choose to volunteer or are able to get release time from their employers.

### **Recruitment and Retention**

In FY2017, the Family Advisory Committee (FAC) Leadership Team developed a Recruitment and Retention Plan to diversify the cohort of Family Representatives. The plan is designed to identify parents with lived experience as consumers of service with DCF. The group is comprised of Birth Parents, Foster Parents, Adoptive Parents, Kinship Caregivers, Alumni of Foster Care, Community Advocates, and a Youth Representatives.

In FY 2018, we have increased representation of parents on the FAC from 15 to 24 members. The current composition of the FAC is rich with experience and talent. The 12 women and 12 men who comprise the core of Family Representatives are a culturally diverse group of 8 African American, 14 Caucasian, and 2 Latino parents from each of the five Regions of the Commonwealth.

The group possesses a diverse expertise in various disciplines including legal services, the courts, veteran services, administration, nursing, human services, juvenile justice, mental health, marketing, public relations, non-profit management, clergy, social work, and domestic violence.

### **Family Advisory Action Plan**

The FAC continues to consistently review and contribute to the Family Advisory Committee Action Plan. The primary goal of the Action Plan is to assist DCF by giving it a roadmap for the inclusion of community and parent participation that ensures that family voice is integrated into program planning, policy development and delivery and monitoring of Department's services.

To accomplish this, the FAC participates in various forums and operational meetings. The 12 member Leadership Team of the FAC participates in the monthly Statewide Managers meeting. This meeting includes DCF's Area, Regional, Legal and Central Office Leadership. Additionally, the FAC Leadership Team facilitates and maintains FAC sub-committees and workgroups to coordinate the Action Plan activities with DCF staff.

The Family Advisory Committee members also serve on the DCF Area Boards as Family and Community Representatives. Currently, 15 members participate on DCF Area Boards.

The FAC members are involved in work groups that have made comprehensive changes to the way the agency's intake and service plans assist social workers to better engage families for better outcomes. For example, one of the major accomplishments in 2016 for the FAC and DCF was connected to the new Family Assessment and Action Plan and the development of a Signature Page to the document (formerly Service Plan) which acknowledges an agreement between the family and their social workers.

DCF is working with the FAC to improve the consistent use of the Assessment tools and is working with IT to increase field use of the Assessment on social worker I-Pads. This is an ongoing conversation to ensure that parents review the Family Assessment before signing their Action Plan. In the FAC meetings with the Commissioner and her staff, the group is working to follow-up with the agency and moves the issue toward integration in the Continuous Quality Improvement (CQI) process.

### **Inter-Agency Work**

In past surveys with parents, the FAC identified a need for greater consistency in practice and communication between agencies for families who have children that are dually involved with our sister agencies, particularly the Department of Mental Health (DMH) and the Department of Youth Services (DYS). It is a goal of the FAC to assist in improving these connections and lend support to parents.

Caring Together -- Strengthening Children and Families through Community Connected Residential Treatment is a collaborative program of DMH and the DCF. The partnership was formed for the purposes of improving communication and promoting understanding of the functions of the DCF and DMH consolidated management activities carried out by the Caring Together Clinical Support (CTCS) teams. The CTCS team is intended to eliminate duplication of effort between the two agencies and to standardize the processes for service access, ongoing service utilization, and performance management.

Two members of the FAC have actively served on DMH's Caring Together Family Advisory Council. Both parents have lived experience with both agencies. The Family Advisory Council lends family voice and has been integral in the role of permanency in DCF, and have also been involved in other Caring Together discussions about families and permanency practice. FAC representatives participate in an 80 member learning group on Permanency Practice Dialogue.

Family engagement -- a mutual and respectful partnership between families and service providers to ensure a child's health and safety and the well-being of the family - is one of the foundational principles of Caring Together. The benefits of family engagement are well documented. Youth in residential care have the best long-term outcomes when families are consistently engaged in their treatment. Peer support for parents and other caregivers of children in child welfare and child behavioral health residential services strengthens a family's engagement in the child's services.

The Family Advisory Committee has collaborated with the Caring Together Family Advisory Council and the DMH Parent Partners. The two groups have done some cross training to help parents bring family voice to the initiative:

- In 2017, the co-chairs of the FAC facilitated Strategic Sharing Training with 22 DMH-involved parents. Strategic Sharing: How to Make Smart Choices when Sharing Your Story is a one-day participatory workshop.
- DMH Parent Partners provide training for the FAC on the Caring Together Family Partner Pilot Core Competencies.

The Juvenile Detention Alternative Initiative (JDAI) is an initiative of DYS with the support of the Annie E. Casey Foundation and Massachusetts juvenile justice leaders. Two FAC representatives participate in the Suffolk County and Hampden County Collaboratives. JDAI's strategic planning is designed to:

- Reduce detention rates of low-risk youth
- Identify opportunities to reduce lengths of stay in detention through case processing reforms
- Reduce racial and ethnic disparities
- Replicate JDAI with fidelity at a local level

JDAI Massachusetts produced Seeing RED as a tool for the network of committed child welfare and juvenile justice stakeholders. This film lays out the problem of disproportional representation of children of color in the juvenile justice system and the national and local best practices to address disproportionality and disparate outcomes for youth.

During the FAC Annual Retreat in September of 2017, one of the FAC members of the Suffolk County JDAI co-facilitated a viewing of Seeing RED. Members of the FAC and DCF staff watched the film, which was screened in a group setting. It was followed by a robust discussion of what we can do to help all our children and increase equity in our system.

In 2017, five members of the FAC became See RED Facilitators to encourage dialogue about race, equity, and inclusion in the Massachusetts youth-serving systems. The facilitators provide training, support, and a peer network of individuals to share experiences and reflections. So far the team has conducted screening and discussions in two communities.

Additionally, the DYS Metro Region Family Advisory Council (FAC), in partnership with Northeastern University's Institute on Race and Justice, invited the FAC to its First Annual Family Advisory Symposium. The symposium is an all-day community workshop to understand the impact of violence and trauma in communities and to discuss strategies to strengthen families, ourselves and our communities.

## **Permanency**

The FAC continues its work to support families and bring family voice to DCF on permanency through father engagement, and kinship/grandparent support:

Fatherhood Engagement -- As part of the recruitment and retention efforts, the FAC has reached out to recruit Dads and men who have lived experience to add to the diversity of the group. The new members enhanced the group's capacity to provide some direct and comprehensive father engagement work this year:

- Four of the FAC members co-facilitate Nurturing Father programs and Fathers' Support Groups at DCF offices, local Head Start programs, and Family Resource Centers;
- One of the FAC Leadership Team members co-facilitates a module of orientation for new DCF Social Worker staff;
- Three fathers from the FAC participate in the Fatherhood Ambassadors Program, an in-service presentation to DCF Area Office staff;
- FAC members actively participate on DCF Area Office Fatherhood Engagement Leadership Teams (FELTs) and the Inter-Agency Fatherhood Work Group; and
- Several Members of the Family Advisory Committee participated in this year's Massachusetts Fatherhood Summit and the New England Fathering Conference.



Grandparents Raising Grandchildren and Kinship Care -- Opioid use in the Commonwealth has had a significant impact on the lives of grandparents and other relatives raising related children. In the coming year the FAC will participate in facilitating focus groups and surveys to identify:

- individuals in the Commonwealth raising related children of relatives;
- individuals in the Commonwealth raising grandchildren because one or both of the parents are addicted to an opioid drug;
- resources available to provide services to both the grandparent or other relative caregivers as well as the children; and
- whether such services are coordinated in a manner that is useful to grandparents and other kin.

In 2019, the FAC will launch an effort to support some of the parents that receive limited support from DCF and the Courts i.e., Grandparents and Kinship Caregivers. The FAC has proposed a Family Representative Program pilot at a few DCF Area Offices. Family Representatives will work with the DCF staff to support and provide guidance for kinship families.

### **Parent Survey**

In past years, the FAC has conducted a telephone survey to get input and assessment of family experience with services received from DCF. By interviewing intact families and birth parents whose children are in the foster care system, the information helped to frame the agency's intel from parents.

One challenge to conducting the surveys is identifying and engaging families after case closing. In the past, each of the Family Representatives conducted one-on-one surveys with families over the phone making the process of conducting the survey very time consuming. Thus, the need for additional support for conducting the survey is a priority for 2019.

We are also looking at more effective ways of delivering the surveys. This has proved to be very challenging. To improve responses, we are looking at the following options:

- Getting better contact information. The majority of families have cell phones and not landlines. We will make an effort to get accurate information and to provide the Family Representatives with better tools including personalizing outreach and opportunity;
- Utilizing web-based data collection resources to reach families;
- Refining the data collection methodology to capture more accurate responses;
- Partnering with local Family Resource Centers to do key informant interviews; and
- Using focus groups to administer surveys

### **Area Board Support**

Many DCF offices, following the 2008 agency reform legislation and its mandate that specified Area Boards, reactivated or initialized their local DCF Area Boards. Some have had sustained membership and are active in their support of the community, others are in need of additional support to activate, engage and maintain their membership in support of the affiliated office and community that is served by the DCF area office. In 2019, the FAC will form a Board Advisory Group to assist the Department with recruitment, retention, and support of Area Board members.

## **Training and Professional Development**

Being informed is the most significant attribute the parents of the Family Advisory Committee bring to their work. In the past year, FAC Members attended over 130 workshops and in-service trainings, 45 conferences, and hundreds of meetings and forums. Most FAC members receive a stipend for their time. Through these activities, numerous FAC members have become Certified Facilitators, Master Trainers, and TOT Facilitators and several FAC members receive Continuing Education Unit (CEUs) for their participation.

The Pathways for Parents project (Pathways) was developed in 2003 to form and sustain collaborative working relationship between the Federation for Children with Special Needs (“The Federation”) and the Department of Children and Families (DCF). Pathways provide a voice for parents in DCF venues and in multi-agency initiatives involving agencies of the Executive Office of Health and Human Services (EOHHS) and works to build capacity within the Federation to inform staff in their work with parents who also receive services from DCF. The Pathways coordinator also provides trainings and resources for DCF staff in aid of their work with children and families.

### **Planning and Service Coordination**

The Community and Family Engagement Team aims to support the ongoing enhancement of DCF practices and to advance partnership with local communities. The “team” recognizes the need for ongoing programming designed to address a variety of needs that are rooted in family-centered practices.

As a response to multiple hurricanes in the fall of 2017, Massachusetts established an interagency team to support hurricane survivors that traveled to Massachusetts. In a collaborative effort across the state in partnership with Family Resource Centers (FRCs), municipalities, Executive Office Health and Human Services (EOHHS), Massachusetts Emergency Management Agency (MEMA), the Red Cross, Mass 211 and Coalitions partnered to address the unique challenges presented by survivors.

The Coalitions played a critical role in implementing a seamless process that allowed the network to provide community-based resources to the families. The survivors were provided with support to meet basic needs such as food, weather-appropriate clothing, and information about housing. Additionally, the Coalitions assisted in providing information and referral to assist families in finding appropriate medical care, enrolling children in local schools and securing employment.

Although the bulk of the work was done by the Coalition and the multiple community partners, the Community and Family Engagement Team was instrumental in providing technical support in developing the organizational structures in communities that brought families, state and local representatives to the table to form an effective one partnership. As a result of this effort, the Community and Family Engagement Team expanded their role to support other initiatives that link child welfare and community-connected practices.

In an effort to enhance practices, policies, and address identified challenges, related to the ever-changing world of child welfare community-connected practices, DCF will continue to utilize Promoting Safe and Stable Families federal funds to be used as an incubator for innovative programs. We will continue to rely on approaches based on best practices, evidence-based tools such as curricula, and engaging in proven strategies that will yield systems change.

*Data Related to Number of Individuals Served, Population Served, and Geographic Areas*

Below we provide data related to number of individuals served, population served, and geographic areas where the services are available. This data is also reported in the CFS-101, Part II.

<b>IV-B, subpart 2 Program</b>	<b>Families/ Individuals Served</b>	<b>Population Served</b>	<b>Geographic Areas Services are Available</b>
Crisis Intervention (Family Preservation)	5,414 Children	Children not in placement served under the PSSF grant	Statewide
Prevention & Support Services (Family Support)	17,260 Children	Abused and Neglected Children served by the PSSF grant	Statewide
Family Reunification Services	10,176 Children	Children in Placement	Statewide
Adoption Promotion and Support Services	668 Children	Children in placement with goal of adoption who are legally free and matched to a family	Statewide

*Rationale for Funding Below 20%*

The Promoting Safe and Stable Families (PSSF) funds support an array of community initiatives with the objective of strengthening families and reducing child maltreatment. Since 1994, when these funds first became available, the Department of Children and Families has focused its efforts on creating strong community infrastructures that serve as vehicles for innovative responses to emerging community and family needs.

In FFY19, PSSF dollars will be used to support and enhance community-driven practices that increase and promote preventive practices. Through on-going community asset mapping, the Community Connections Coalition approach has provided DCF with the opportunity partner with community stakeholders, families, courts, schools and other sister agencies to engage in community child welfare practice. The lessons learned during program development and implementation has translated into building scalable program models that are evidence-informed.

Originally, these coalitions were envisioned primarily as family support entities in a traditional sense. Over time, they have evolved to also address the needs of families in the community who are involved with the DCF as recipients of services. These include services to families whose children are in foster placement with a goal of returning home, support and enrichment activities for children in foster care, remedial experiences for families where escalating crises pose a significant risk of child placement, and foster and adoptive family recruitment grounded in the community, and initiated by community members themselves.

Several cases illustrate the intertwined and evolutionary nature of this work. One such example is the partnership that has developed between the Community Connections Coalition, DCF Area Office and Letourneau Elementary School in Fall River, MA. The school saw an increase in families who spoke Spanish as their primary language and struggled to find community resources that provided services in these families' native language. The partnership provided an opportunity for teachers to be trained in the Nurturing Father curriculum which gives them the tools to run Nurturing Fathers programs in Spanish. The approach offered a preventive alternative to the more traditional avenue of families having to "fail

up” before child welfare services are provided. Capitalizing on the success of the Nurturing Father program in the Coastal Area Office and the positive relationship that had been developed, the Family Nurturing Center (FNC) established a Family Nurturing Program, which brings birth parents and foster parents in a supportive environment tailored to engage diverse families in activities that better supports family reunification – broadening implementation of a model that had been limited to the Dimock Street Area Office in the Boston Region for nearly a decade.

In other parts of the state, the impact of Community Connections on other PSSF program areas has been similar. The Foster Care Task Force of the Worcester Community Connections Coalition (The Task Force) was formed as a community response to the needs of foster families and young parents in the community by hosting a quarterly community baby shower. Local businesses are encouraged to donate baby items that are distributed to foster and community parents with young children.

The work of the Task Force has firmly taken hold in the neighboring community of Fitchburg to its north, expanded to include Southbridge and began to spread to other areas of the state. Worcester developed a template of recruitment materials that are easily modified to incorporate local information and made it available to the network of Community Connections coalitions, it effectively balances the need for having a statewide recruitment branding identity and information that makes a campaign relevant for local communities - producing a win-win for everyone involved.

In 2017, Executive Office for Health and Human Services (EOHHS), DCF, Coalitions and Family Resource Centers, engaged in a multi-prong approach to responding to the needs of thousands of families who were survivors of overwhelming natural disasters, most notably Hurricane Maria that devastated the Island of Puerto Rico. Many of the families self-evacuated to Massachusetts and settled in city and towns with a large Puerto Rican population. Coalitions became a vital resource for the families by providing concrete services in time of need.

Given the ongoing integration of the work of the Coalitions with that of DCF, the vast majority of the \$3.1 million in PSSF funds provided to the Coalitions is used to fund services and activities that *cross one or more service categories*. However, DCF still relies on PSSF grant funds as support for preventive Family Support programs due to a relatively small pool of state Purchase of Service (POS) dollars dedicated for this purpose. In SFY16, the State had annual expenditures in excess of \$47 million in POS dollars for Family Networks Support and Stabilization Services (FNSS) which is inclusive of Family Preservation and Adoption Support Services, but does not include any direct service personnel costs in these programmatic areas. In addition, for SFY16, the State targeted over \$1.9 million in State funds for time-limited reunification services and over \$16 million of State funds for crisis intervention services. Given the high level of State funds used to support various types of reunification services over the past several years, DCF has found that it is able to meet the demand for time-limited reunification services with the level of Title IV-B funds proposed.

Massachusetts, along with the rest of the country, continues to address the impact of opioids on children and families. It is anticipated that we will continue to see an increase in adoption and reunification activities reflective of this prevailing societal trend. DCF projects spending PSSF dollars in the following way: approximately 33% in Family Support Services, 19% in Family Preservation, 14% in Adoption Promotion, 14% in Time Limited Family Reunification, 9% in Administration, and 10% in Planning/Other Services.

We expect that model programs implemented with these funds will continue to yield tangible results for families as well as serving as learning labs to inform continued program development on a broader scale – all without investments of additional federal dollars. As local partnerships with DCF both deepen and expand, we expect a continuing evolution of these kinds of creative service responses that meet the intent

of the legislation and, more critically, the needs of families in communities across the Commonwealth is expected.

### Budget

In the chart below, we present the FY18 and FY19 planned budget for the grant. We provide two views: expenditures grouped by category and expenditures grouped by the grant objectives. Expenditures reported reflect spending incurred/projected during the respective state fiscal years and do not necessarily correspond with the federal fiscal year spending reported in the CFS-101.

<b>PROMOTING SAFE AND STABLE FAMILIES PROGRAM - IV-B, SUBPART 2</b>		
<b>Expenditure Category</b>	<b>FY18</b>	<b>FY19</b>
Salary	\$ 320,000	\$ 400,000
Fringe Benefits	\$ 116,288	\$ 148,560
Travel	\$ 36,000	\$ 28,000
Equipment	\$ -	\$ 2,000
Conference Incidentals	\$ 27,000	\$ 26,000
Supplies	\$ 2,465	\$ 2,975
Contract Services:		
<i>Consulting Services</i>	\$ 424,800	\$ 409,800
<i>Family Based Advocate Services</i>	\$ -	\$ -
<i>Coalition Supported Services</i>	\$ 2,881,271	\$ 2,884,405
<i>PATCH Program Services</i>	\$ 404,625	\$ 404,625
<i>Family Networks Support &amp; Stabilization Services</i>	\$ 269,826	
<i>Other/Parent Stipends</i>	\$ 61,830	\$ 63,830
Other/Cellphones/VPN	\$ 11,200	\$ 11,200
<b>Subtotal Direct Cost</b>	\$ 4,555,305	\$ 4,381,395
<b>Indirect Cost</b>	\$ 70,000	\$ 70,000
<b>GRAND TOTAL</b>	\$ 4,625,305	\$ 4,451,395

<b>Grant Objectives</b>	<b>FY18</b>	<b>FY19</b>
Family Support	\$ 1,618,857	\$ 1,486,766
Family Preservation	\$ 925,061	\$ 854,668
Adoption Promotion & Support	\$ 740,049	\$ 623,195
Time Limited Reunification	\$ 462,531	\$ 627,647
Other	\$ 416,277	\$ 413,980
Administration:	\$ 462,531	\$ 445,140
<i>Personnel and Overhead</i>		
<i>Supplies and Administrative Costs</i>		
<i>Administrative Activities</i>		
<i>Other</i>		
<b>Administrative %</b>	10.00%	10.00%
<b>GRAND TOTAL</b>	\$ 4,625,305	\$ 4,451,395

## Chafee Foster Care Program for Successful Transition to Adulthood and Education and Training Voucher Program

The Chafee Foster Care Program for Successful Transition to Adulthood supports an array of services to prepare youth and young adults ages 14-21 for successful transitions to adulthood, including developing permanent connections to caring and committed adults. The components of the Chafee-funded services focus on safety and the many facets of well-being. Educational achievement, life skill mastery, and successful community integration with permanent connections to family and/or other caring enduring relationships with adults are the goals for our youth.

The Chafee-funded services below are based on the principles of positive youth development and address each of the purpose areas of the Program. During FY2019, the Department will continue to use grant funding to provide for these services. This funding allocation is consistent with FY2018:

- *Adolescent Outreach Program* – services include intensive, individualized life skill assessment and training to current foster youth and young adults ages 14-21 from across the state to assist them in developing necessary skills and supports to achieve their potential. Per grant guidelines, program services are also available to youth who were guardianshiped or adopted from DCF after age 16 and to former foster youth who discharged from DCF between ages 18-21, and in some instances youth who discharged from agency care at age 17 and request services. Additional services include the Life Skills Support program that funds developmentally appropriate activities and experiences such as senior class expenses, team sports fees, driver education costs. The Discharge Support Program provides funding to foster youth age 18-21 who are transitioning from agency care. These include start-up costs (i.e. first month's rent, security deposit, essential furniture, household items, bedding, etc.).
- *The Education and Training Voucher Program* – provides up to \$5,000 per academic year for post-secondary educational or vocational training programs, including colleges and trade schools and related costs of attendance (tuition, fees, room and board, books, transportation, child care) as defined in the Higher Education Act of 1965. The program serves youth statewide who are eligible based on being:
  - adopted through DCF after attaining age 16;
  - in DCF custody (any type) until age 18, unable to return home and have not yet reached age 23
  - in DCF-sponsored guardianships with kin after attaining age 16.
  - exited foster care in another state and now reside in Massachusetts.

### Data Related to Number of Individuals Served, Population Served, and Geographic Areas

The below chart presents the number of individuals served, population served, and geographic areas where the services are available. This data is also reported in the CFS-101, Part II.

CFCIP and ETV Programs	Individuals Served	Population Served	Geographic Areas Services are Available
Independent Living Services	1,455 adolescents	Young adults age 14 - 21	Statewide
Education and Training Voucher Program	481 adolescents	Youth adopted through DCF after age 16; in DCF custody until age 18; in DCF sponsored guardianship with kin after age 16.	Statewide

### Budget

The charts below present the FY18 and FY19 planned budget for the grants. We provide two views: expenditures grouped by category and expenditures grouped by the grant objectives. Expenditures reported reflect spending incurred/projected during the respective state fiscal years and do not necessarily correspond with the federal fiscal year spending reported in the CFS-101.

<b>JOHN H. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRANSITION TO ADULTHOOD (CHAFEE)</b>		
<b>Expenditure Category</b>	<b>FY18</b>	<b>FY19</b>
Salary	\$ 1,640,000	\$ 1,640,000
Fringe Benefits	\$ 595,976	\$ 609,096
Travel	\$ 80,000	\$ 80,000
Equipment	\$ -	\$ -
Conference Incidentals	\$ 64,500	\$ 48,500
Supplies	\$ 36,500	\$ 19,500
Contract Services:		
<i>Recruitment Campaign</i>		\$ -
<i>Authorized Payments for Independent Living Support Program; Housing Support; Youth Employment and Internship Program</i>	\$ 500,000	\$ 603,000
<i>Other</i>	\$ 71,795	\$ 72,000
Other (Cellphones)	\$ 4,000	\$ 4,000
<b>Subtotal Direct Cost</b>	\$ 2,992,771	\$ 3,076,096
<b>Indirect Cost</b>	\$ 325,000	\$ 350,000
<b>GRAND TOTAL</b>	\$ 3,317,771	\$ 3,426,096

<b>Grant Objectives</b>	<b>FY18</b>	<b>FY19</b>
Transition to Self Sufficiency; Education, Training and Related Services; Prepare for Employment or Postsecondary Training or Education;	\$ 3,277,271	\$ 3,402,596
Personal and Emotional Support to Youth through Mentors and the Promotion of Interactions with Dedicated Adults;		
Financial, Housing, Counseling, Employment, Education, and Other Supports and Services;		
Services for Youth who Have Left Foster Care for Kinship Guardianship or Adoption;		
Ensure Opportunities to Engage in Age or Developmentally appropriate Activities		
Administration:		
<i>Personnel and Overhead</i>	\$ -	\$ -

<i>Supplies and Administrative Costs</i>	\$ 36,500	\$ 19,500
<i>Administrative Activities</i>	\$ 4,000	\$ 4,800
<i>Other</i>	\$ -	\$ -
<i>Administrative %</i>	1.22%	0.71%
<b>GRAND TOTAL</b>	\$ 3,317,771	\$ 3,426,896

<b>EDUCATIONAL AND TRAINING VOUCHERS PROGRAM (ETV)</b>		
<b>Expenditure Category</b>	<b>FY18</b>	<b>FY19</b>
Salary	\$ -	\$ -
Fringe Benefits	\$ -	\$ -
Travel	\$ -	\$ -
Equipment	\$ -	\$ -
Conference Incidentals	\$ -	\$ -
Supplies	\$ -	\$ -
Contract Services: <i>Vouchers - Educational Funding and Support for Foster Youth</i>	\$ 1,253,646	\$ 1,170,617
<b>Subtotal Direct Cost</b>	\$ 1,253,646	\$ 1,170,617
<b>Indirect Cost</b>	\$ -	\$ -
<b>GRAND TOTAL</b>	\$ 1,253,646	\$ 1,170,617

<b>Grant Objectives</b>	<b>FY18</b>	<b>FY19</b>
Vouchers for Post-Secondary Education and Training	\$ 1,253,646	\$ 1,170,617
Administration: <i>Personnel and Overhead</i>	\$ -	\$ -
<i>Supplies and Administrative Costs</i>	\$ -	\$ -
<i>Administrative Activities</i>	\$ -	\$ -
<i>Other</i>	\$ -	\$ -
<i>Administrative %</i>	0.00%	0.00%
<b>GRAND TOTAL</b>	\$ 1,253,646	\$ 1,170,617

\*Please note that more detailed information about programs and services under Chafee / ETV is provided in Section E.



## Populations at Greatest Risk of Maltreatment

DCF has identified the following as Populations at Greatest Risk of Maltreatment

1. Youth Who Are Vulnerable to Human Trafficking
2. Infants and Children of Substance-Involved Parents
3. Children and Youth Exposed to Ongoing Issues of Mental Health, Domestic Violence, and Substance Abuse
4. Family Homelessness
5. Children/Parents with Disabilities
6. Youth Transitioning from Foster Care

### *Youth Who Are Vulnerable to Human Trafficking*

In compliance with the Preventing Sex Trafficking and Strengthening Families Act of 2014 (P.L. 113-183), the Department has implemented a new policy: *Policy Regarding Missing or Absent Children in Department Care or Custody*. This policy provides guidance to social workers, supervisors and managers in identifying youth who may be at increased risk when they run or are absent from their Department approved placement. This includes identifying a youth's prior victimization and future vulnerability to sex or labor trafficking. As a result of the new policy, awareness of human trafficking has increased among DCF staff and in provider agencies.

To advance efforts to address the needs of this population, DCF also serves on the Child Trafficking Work Group of the Governor's Council for Sexual Assault and Domestic Violence.

The final workgroup recommendations from August 2017 include:

- Research study on national best practices for child trafficking response and services.
  - This research will help to inform the work of DCF, specifically related to housing and placement services for youth vulnerable to child trafficking.
- Strategic plan
  - The Commonwealth needs to develop an overarching statewide plan for the development and implementation of best practice guidelines. There is a need to further develop a more comprehensive statewide plan across the various disciplines and sectors that are involved in child trafficking cases from discovery, recovery, placement, treatment and long-term stabilization.
- Multi-Disciplinary Team training
  - There is a need for consistent and systemic training for all Multi-Disciplinary Team partners involved in child trafficking. This includes all EOHHS child-serving agencies, the numerous local, state and federal law enforcement partners, prosecutors, probation, public defenders and the health and social service provider communities.
- Coordinator position
  - Establish a Multi-Disciplinary Team Coordinator position in each county as part of the capacity building for the MA Child Welfare Grant to assist with establishment and implementation of protocols and strategic plans. These positions have recently been funded through a federal Victims of Crime Act (VOCA) Grant.
- Consistent and uniform data collection
  - There are currently three main components of data collection: a) statistical reporting (identification systems) b) case management data and c) intelligence databases (law enforcement/crime data). Each system exists in a silo. There is also underutilized law

- enforcement data collection and reporting capacity, which can be addressed through training and monitoring
- Specialized statewide law enforcement response
- Safety of children
  - Further review the challenges associated with the safe recovery and placement of child victims.
  - Child Requiring Assistance (CRA) statutory reforms have posed challenges to law enforcement seeking to ensure the safety of recovered victims.
  - The current available tools are not seen as adequate for addressing a child trafficking victim's safety.
  - Among those youth at greater risk of maltreatment are youth who are LGBTQ and transgender. Because these youth experience discrimination, isolation and exploitation, their vulnerability is amplified.

The Department continues to partner with My Life My Choice and the Suffolk County Support to End Exploitation Now (SEEN) on a federal five-year grant to address human trafficking in our child welfare system. This grant focuses on the vulnerabilities of the LGBTQ and transgender populations within DCF through training and support to DCF staff, placement providers and the community. Multidisciplinary teams across the state are increasing their understanding of human trafficking and the unique risks that our LGBTQ and transgender youth experience. Additional funding from the state legislature has allowed DCF to offer additional training (SFY 2017) to ensure that staff identify these youth and respond appropriately.

#### *Infants and Children of Substance Involved Parents*

Parental substance use and misuse continue to be a significant risk factor resulting in the maltreatment of children. Nationally and within Massachusetts, the opioid crisis has continued to escalate contributing to growth in parental overdoses, and the birth of substance-exposed newborns/neonatal abstinence syndrome, and abuse and neglect. In 2016, the Massachusetts Legislature created an Interagency Task Force on newborns with neonatal abstinence syndrome and substance-exposed newborns and tasked them with developing a unified statewide plan to collect data, develop outcome goals and ensure quality service is delivered. The task force completed its work in Spring 2017 and issued recommendations for outreach and services to pregnant and post-partum woman who are substance involved as well as training and education for social service and medical providers. The final report can be found: <http://www.mass.gov/eohhs/docs/nas-final-report.pdf>

There continues to be strong collaboration between DCF and the Massachusetts Department of Public Health (DPH) to address the needs of families impacted by the ongoing opioid crisis. This includes partnering on federal grants, improving access to resources and communication between systems, identifying the needs of adolescents with co-occurring issues, and cross-systems training. For example, DCF and DPH received a technical assistance grant from the National Center on Substance Abuse and Child Welfare. DPH and DCF are participating with other states in a Policy Academy to improve outcomes for pregnant and postpartum women with opioid use disorders and their infants and families.

The DCF statewide Substance Abuse Unit has hired additional Regional Substance Abuse Coordinators over the past year with seven Regional Substance Abuse Coordinators currently in place plus a central office coordinator. DCF is currently hiring two additional regional coordinators and a Director of Substance Abuse. The Regional Coordinators provide case consultation to DCF social workers and work with community resources to improve access and communication. There has been an increase in requests for consultation to address the complex clinical needs of families, particularly as it relates to the ongoing

opioid crisis. DCF Child Welfare Institute and the Regional Substance Abuse Coordinators provide a robust training calendar related to drug and alcohol issues.

In all policy development, DCF clinical units (domestic violence, substance abuse, and mental/behavioral health) have been utilized to incorporate clinical thinking and practice guidance related to these vulnerable populations. DCF's Intake Policy and Family Assessment and Action Plan Policy both include guidance related to parental and adolescent substance misuse.

#### *Children and Youth Exposed to Ongoing Issues of Mental Health, Domestic Violence and Substance Abuse*

Domestic violence continues to be a significant risk factor for children and their non-offending parent both within child welfare and in communities. The DCF Statewide Domestic Violence Unit includes a Director, two supervisors and nine Domestic Violence Specialists placed regionally. This team provides consultation on dangerous and/or complicated cases involving domestic violence and trauma to assist staff in identifying risk and safety factors, assessing parental capacities, making recommendations and assisting in developing action plans to increase the safety and well-being of children. They also participate as members of regional clinical teams and provide training in the area offices they cover working directly with the area and regional offices to think strategically about capacity building for staff. These activities inform a statewide perspective for the development of practice enhancements and training needs of DCF social workers in this area. As noted above, in all policy development DCF clinical units have been utilized to incorporate clinical thinking and practice guidance related to these vulnerable populations.

In 2017, the Department of Public Health (DPH) procured new contracts for all domestic violence services in the state. DCF had been a primary partner in the creation of this procurement, and contract award decisions. This procurement led to the state adding additional specialized clinical services for children. It also included as one of its primary principles the expectation that all domestic violence programs advance their expertise in supporting children as primary survivors accompanying their non-offending parents to service. In continuing this partnership, DCF Domestic Violence Unit staff is working with DPH as a primary advisor in developing statewide technical assistance for all domestic violence programs to address the unique needs of children and youth experiencing domestic violence.

#### *Family Homelessness*

DCF continues to expand our portfolio of services offered to families with issues of child maltreatment who are experiencing housing insecurity and/or episodic homelessness. The three primary means of supporting families with housing insecurity are:

- Housing Stabilization Unit case consultation services;
- Strong interagency collaboration with the Department of Housing and Community Development (DHCD);
- Collecting and evaluating housing specific data.

In 2016, the Department increased staffing levels to ensure each DCF region has an assigned Housing Stabilization Unit specialist and expanded the distribution of housing and economic self-sufficiency information through the creation of the Housing Services Unit intranet page. In an effort to increase service delivery to homeless families, the Department enhanced the Family Unification Program with the option for families to access supportive housing services. In Fiscal Year 2017, the Unit completed 1,954 case consultations on DCF involved families struggling with homelessness and housing insecurity. In an effort to raise awareness and increase the staffs' capacity to respond to families struggling with housing-related issues, the Unit collaborated with state partners and the Child Welfare Institute to develop housing

specific curricula for the Department's field staff. These ongoing efforts include training related to economic self-sufficiency, approaches to servicing unaccompanied homeless youth and supporting families placed in state-funded shelter.

Additionally, a Memorandum of Understanding between the Department and DHCD was re-established in January 2015 to support the transition of children from foster care to reunification with parents in the state's shelter system. An expanded data collection effort assessed the number of children reunified through the collaboration DHCD and the success of families housed through the Family Unification Program; this data allows the Department to better assess the services delivery needs of families facing poverty and housing insecurity.

### *Children/Parents with Disabilities*

The Department has continued to strengthen its efforts to serve children and parents with disabilities. A key goal of the Department's Diversity Plan is to increase DCF's capacity to provide culturally competent care and services to the Deaf and Hard of Hearing, persons with limited English proficiency, and persons with disabilities. The Department's Diversity Officer leads the implementation work, with support from many staff members. The strategies to achieve this goal are:

- Implementing the Memorandum of Understanding (MOU) between DCF and the MA Commission for the Deaf and Hard of Hearing (MCDHH) that creates a system for:
  - working collaboratively to serve children, youth, and families involved with both agencies;
  - resolving issues related to reasonable accommodations for families involved with DCF;
  - sharing information needed to implement reasonable accommodations;
  - providing on-going training for DCF and MCDHH staff on each agency's practices and policies and the needs of families served by each agency.
- Developing guidance documents on requesting Americans with Disabilities Act (ADA) accommodations.
- Securing a Language Line service;
- Implementing disability-related training in collaboration with the MA Child Welfare Institute, the training unit for DCF, during new worker and in-service training;
- Partnerships with other agencies including Department of Mental Health, Commission for the Deaf and Hard of Hearing, Commission for the Blind and MA Office on Disability.

### *Youth Transitioning from Foster Care*

DCF understands the challenges and risks facing transition age youth/young adults and has developed an array of services to help prepare them with the skills and supports to successfully manage the struggles of adulthood. Using stakeholders' input, the agency has focused state and federal funded programming on assisting youth and young adults build strong foundations for success to help youth achieve permanency, safety and the many facets of well-being. Key goals for DCF youth include educational achievement and life skill mastery with permanent connections to family and/or other caring enduring relationships. DCF services for youth transitioning from care include foster care, congregate care and aftercare.

The Adolescent Outreach Program's strength-based approach provides intensive, individualized life skill assessment and training to transition age youth/young adults from across the state to assist them in developing necessary skills and supports to achieve their potential. Youth and young adults are encouraged to practice newly acquired skills and use problem-solving techniques within a safety net of adult supervision and support. The effective use of these skills and techniques allows youth to make decisions, achieve goals, and sometimes make mistakes and experience failure. Supporting youth through these good and bad times is the key to building resilience and realizing successful transitions.

Aligned with the Fostering Connections to Success and Achieving Adoptions Act of 2008, DCF's Permanency Planning Policy encourages permanency, sibling connections, and extended voluntary care for transition age youth to support their success. Pre-Service and ongoing training for DCF staff, foster parents and providers re-enforce these principles. Technical assistance is provided to area office staff and providers to strengthen understanding and practice of the policy. DCF continues to serve children through its outreach and aftercare program. DCF is currently conducting a data review project to examine the permanency goals of an identified transition age youth cohort in out of home placement in the fall of 2017. The goal of this review is to assess the impact of services and programming on the well-being and permanency of these youth.

### Services for Children Under the Age of Five

DCF's Permanency Planning Policy (*revised July 2013*) identifies the Department's permanency goals as: Permanency through Stabilizing the Intact Family, Permanency through Reunification, Permanency through Adoption, Permanency through Guardianship, Permanency through Care with Kin, and Permanency through APPLA.

The policy provides guidance in support of each goal, as appropriate, and supports activities and services that reduce the length of time that young children under age five are in foster care without a permanent family, as well as those being served in-home or in a community-based setting.

For families involved with the Department, the initial goal is to stabilize the intact family. This goal is supported by the DCF social worker and services obtained through community resources. Resources include the Department's Family Networks contracts, which provide Support and Stabilization services to the family which are broad and target to needs identified through the Family Assessment, and services obtained through other state agencies (mental health, substance abuse, etc.). For children birth to age five, nearly half return home prior to 6 months in placement.

Table 1: Unique count of children under the age of five by Home Removal Episode (HRE) end reason from April 2017 – March 2018:

Type of Placement	Number of Children (ages 0-5) 2018	Percentage of Children (ages 0-5) 2018
Child Returned Home	<b>435</b>	<b>43.8</b>
Child Adopted	373	37.6
Guardianship	136	13.7
Custody to Other Individual	49	4.9
Grand Total	<b>993</b>	<b>100%</b>

The Department encourages and assists parents to support reunification and reduce the length of time their child in care by utilizing the parents' own strengths and resources as well as community resources, such as:

*Family and Community Resources:*

- Kin (including the non-resident parent, as appropriate), friends, neighbors and others acquainted with the child and/or family
- Childcare
- Substance abuse counseling and treatment resources
- Domestic violence services, including services for victims and offenders
- Mental health services
- Healthcare resources
- Vocational, job training, and employment services
- Financial assistance
- Housing assistance services
- Developmental disability services
- School-based services and early intervention programs
- Camping and other community-based recreational/educational resources
- Support and self-help groups
- Organizations serving ethnic and linguistic minority populations
- Religious organizations
- Civic and other community groups

*Department-Related Services:*

- Information and referral to other state and community agencies
- Case management
- Domestic violence services
- Support and stabilization services
- Services to support racial, cultural and linguistic minority families
- Placements for children and adolescents
- Services for pregnant and parenting adolescents
- Sexual abuse prevention/treatment services.

Whenever possible and appropriate, the child is placed together with full, half and/or step-siblings already in or also requiring placement. Children are placed as close to home as possible to support frequent visits, maintain the continuity of school and child care, and provide for culturally-appropriate community involvement.

*Child Care Vouchers:*

As of May 2018, approximately 8400 children were receiving subsidized childcare as part of their involvement with DCF. Sixty eight hundred of these children receive their childcare through contracted slot at specific childcare providers; an additional 1600 children receive their care through vouchers which their caregivers can use at any participating childcare provider in the Commonwealth. Access to vouchers for DCF children has allowed more children to be able to be served in areas where there were barriers due to geography and age gaps in programming. DCF is continuing to work with the Massachusetts Department of Early Education and Care to increase access to early education for our children from birth to 5.

### *Placement Process:*

Placement decisions are based on the child's best interests, including those related to safety, well-being, permanence, and continuity of significant relationships, and reflect efforts made to identify the least restrictive setting available to meet the child's individual needs.

### *Six Week Placement Review:*

A Six Week Placement Review occurs when a child enters placement from home or hospital or returns to placement after a significant stay at home for six months or longer. The Area Director/designee identifies a child-specific team, which includes the parents, foster/pre-adoptive parents or other placement provider and social work staff familiar with the child and family. The Team's role is to support the child's placement while addressing her/his needs for safety, well-being and permanency. The Team gathers and reviews information about the child and family from the parents; kin; educational, medical and mental health providers; foster/pre-adoptive parents or other placement providers; and others familiar with the child and family's history, strengths and needs.

The child-specific information gathered during the first six weeks of placement encompasses the child's medical, educational, emotional, psychological and social history and current functioning. This information augments the comprehensive family assessment which is being completed simultaneously or, if completed previously, is being expanded to incorporate the additional information required by the child's placement. The information is used to support appropriate service planning and service provision to the family and the child who is in placement, while at the same time establishing the foundation for achieving permanency for the child.

If placement beyond six weeks is needed and the child's initial placement has not been with kin or someone from among the family's network of significant relationships, or if siblings have not been placed together, efforts are made with the parents during the first six weeks to identify someone known to the child and family with whom an approved placement can be made. Documentation of contacts with kin is required.

The Review Meeting is an opportunity for the parents, family and foster/pre-adoptive parents or other placement providers to participate in open discussion. At this meeting, the family's and the child's strengths and needs, in particular, the child's needs for health, safety, well-being, permanence and continuity of significant relationships, are reviewed. A tentative, reasoned assessment of the probability of the child returning home and the family's capacity to benefit from reunification services is made. The frequency and quality of parent-child contacts and visits during the first six weeks of placement and the parents' participation in services and completion of tasks identified in the Service Plan also are reviewed.

Together, the parents and Department revise the Action Plan as indicated:

1. Designation of Foster Care 6 Week Placement Review Team
2. Team Tasks:
  - Review of Placement Options
  - Contacts and Visitation
  - Legal Notifications
  - Obtaining Needed Resources and Documents and Supporting Placement Provider
3. Schedule 6 Week Placement Review Meeting

### *Permanency Planning Conference (PPC):*

Review of the Permanency goal for children in placement continues through Foster Care Reviews conducted for each six-month cycle during which children remain in care; Permanency Planning Conferences are conducted according to policy:

### *Circumstances Requiring a PPC:*

- As soon as it is determined that the prognosis for reunification is poor;
- Within the first 9 months following the date of placement;
- If the outcome of a 9 month PPC was a decision not to initiate TPR and the child has remained in placement for 15 of the previous 22 months;
- To change a child's permanency plan;
- Within 20 working days after a Foster Care Review determination that includes the recommendation that the child's identified permanency plan needs to be changed; or
- Within 5 working days after a court determines that reasonable efforts to reunify are not required.

### *Improvement:*

Over the past two years, the Department has demonstrated modest improvement in reducing the average amount of days in placement for children under the age of 5 who either returned home or reached permanency of Guardianship (See Table 2). Efforts will continue to improve these numbers in 2019.

Table 2: Average number of days in placement for those children under age 5 exiting by reason:

	Average of Number of Days in Placement 2016	Average of Number of Days in Placement 2017	Average of Number of Days in Placement 2018	Average Decrease in Length of Time since 2016
Child Returned Home	61.0	58.0	55.4	- 5.6 days
Guardianship	615.6	611.3	610.4	- 5.2 days

## **Services for Children Adopted From Other Countries**

### Supports Provided to All Adoptive and Guardianship Families

The Department of Children and Families contracts with Child & Family Services, Inc. to provide post-adoption services through the Adoption Journeys Program open to all families in the Commonwealth, including families of children adopted from other countries. The Adoption Journeys contract has been in place since 1997. The Department believes that having a private agency provide post-adoption services is less threatening to families than requiring them to work directly with the state's child protection agency.

Adoption Journeys provides information and referral services to adoptive families. An "800" number is answered live 24 hours/day, 7 days/week. There is also a component of the contract designed to educate therapists, attorneys, judges, and others who may work with adoptive families. Adoption Journeys has also conducted statewide professional conferences as well as smaller regional trainings.



Other program components include:

- *Regional Response Team:* The response teams are made up of adoption competent staff including a social worker, parent liaison, and team leader. These brief supportive services offer families joint problem solving, coordination of services, and home-based counseling.
- *Parent and Youth Support Groups:* Support groups are led or co-led by adoptive parents, adopted youth, social workers or clinicians. Most meet once a month and some are co-sponsored with other organizations. All support groups are open to new members and additional support and psycho-educational groups are formed as needs are identified.
- *Parent and Young Adult Liaisons:* Individuals and families requesting a liaison are matched as closely as possible according to the needs, interests, and expectations of all involved. Geography, life experiences, diversity, and the family's style of relating are some of the areas considered in making a match. Ongoing support and training are offered to families participating in this program.
- *Adoption Competency Training:* Training opportunities are available for professionals interested in enhancing their work with adopted children and their families.
- *Respite Care:* Respite care is available on a time-limited and planned basis for hourly, daily, or overnight care. These brief supports can help to alleviate stress, strengthen family relationships, or respond to an unanticipated family event. Limited respite services are available to families in or out of their home. These services are matched as closely as possible to the needs and ages of the child(ren), geographic area, family characteristics, and dynamics. Ongoing support is offered to families participating in respite. Group respite activities, as well as family social activities are also available statewide throughout this component.

Any family who resides in Massachusetts that has legalized an adoption or permanent guardianship can access the post-adoption services. Approximately 32% of the families working with Adoption Journeys in 2017 were infant, private, or intercountry adoptions.

#### *Planned Changes to Post-Adoption Services in FY2019*

As is the case in most states, the number of new intercountry adoptions by families in Massachusetts continues to decline. Therefore, there has not been an increased demand for post-adoption support services for new intercountry adoptive families. The primary demand is from families with teenagers who were adopted from other countries anywhere from 1 to 10 or more years ago. MA DCF does not anticipate changing its post-adoption support model, as Adoption Journeys continues to be successful for families in this demographic.

## **C5. PROGRAM SUPPORT**

### **Training**

The Department's staff development and training plan in support of its goals and objectives is outlined in detail in the Child Welfare Institute (CWI) Training Plan (formerly called the Massachusetts Child Welfare Institute) section of the APSR. CWI is the professional development and training division of DCF and its primary goal is to promote effective child welfare practice. CWI activities strive to improve the knowledge and skills of individual social workers, the quality of supervision and the agency environment that promotes creativity and professional growth. The CWI is committed to advancing the strategic goals and objectives of DCF.

Through a focus on the three interdependent responsibilities identified above, the CWI promotes a shared understanding and agreement about the Department's core practice values, commitments and priorities; teaches the knowledge, skills, and tools of facilitative child welfare practice, which makes it possible for social workers to perform their duties and responsibilities effectively. CWI supports the professional continuous learning of social workers, supervisors, and managers as they lead DCF initiatives and practice innovations.

The CWI is focused on providing high quality, evidence-informed, and relevant training programs that are helpful to the approximately 3,500 DCF social workers, supervisors, and managers across the Commonwealth in their efforts to ensure the safety, permanence, and well-being of children and families. The CWI consists of one full-time Director, one Associate Director, four Professional Development Managers, two Program Coordinators, one Fiscal Coordinator, one Administrative Assistant, and one Coordinator of Social Work Fellowship Programs focused on training and professional development programs. The CWI also employs a part-time librarian to manage the DCF child welfare library. Additionally, CWI relies on a cohort of contract trainers and subject matter experts to support DCF training and development goals. CWI training managers oversee the design, development and implementation of agency training programs, coordinate the work of external trainers, conduct classroom training blended with e-learning, and practice support to the field.

With a considered strategy to affect research-based best practices, continuous learning and professional standards for child welfare social workers, supervisors and managers at DCF, the CWI promotes organizational effectiveness by building on our many strengths. For details regarding DCF training in 2018, please refer to the Training Plan section of the APSR.

### **Technical Assistance**

In past years, DCF has taken advantage of substantial technical assistance opportunities provided through the federal resources as well as technical assistance provided by national and local organizations. Most recently, the Department engaged the Children's Bureau Capacity Building Center for States to facilitate the development and implementation of a supervisory and leadership framework that is inclusive of competencies, training, coaching, mentoring, and focus on clinical skills in group facilitation to more fully support the field staff and families in Massachusetts.

The Department has also engaged with Casey Family Programs and the National Council on Crime and Delinquency (NCCD) to advance permanency for children in DCF care. The Department is also working with NCCD to complete a risk validation and recalibration of its Risk Assessment Tool.

Community Connections Coalitions, funded with Promoting Safe and Stable Families funds, continued

to expand the significant base they established at the community level and to act as a bridge between the Department and the community. Coalitions have partnered in the establishment of 22 Family Resource Centers (FRCs) across the Commonwealth. Twelve of these FRCs are full centers, ten are micro centers. Our technical assistance, training and evaluation partnership with the Massachusetts Children's Trust Fund - the state's Community-Based Child Abuse Partnership (CBCAP) grantee - has allowed these FRCs to act as incubators for eventual statewide expansion. Because they are built on existing Community Connection Coalitions, FRCs enhance DCF's partnerships with the community and aim to increase the Department's capacity to provide a flexible mix of family support services at the local level.

This benefits not only the community-connected practice of DCF but also serves as a catalyst for the development of a more broadly defined community-based continuum of care which focuses on the well-being and promotion of a shared responsibility for at-risk children between DCF and the community.

DCF staff has participated in and will continue to attend, technical assistance meetings facilitated by the New England Association of Child Welfare Commissioners and Directors on CQI/IT issues. Given the reliance on CQI for Round 3 of the Child and Family Service Reviews (CFSR), DCF staff has appreciated the opportunity to discuss their state models, strategies for success and challenges with their colleagues from across New England.

As needed, DCF will request federal technical assistance during FFY 2018-19 through the Children's Bureau following the development of its Program Improvement Plan, resulting from the 2015 Child and Family Services Review.

### **Research, Evaluation and Quality Assurance Systems**

DCF has been involved in two discretionary grant programs, each with its own evaluation component. DCF was selected to receive a grant from the Administration for Children and Families, Children's Bureau, to build capacity to provide trauma-informed casework practices and trauma-specific evidence-based treatments (EBT). DCF has partnered with LUK, Inc., Justice Resource Institute Trauma Center, Boston Medical Center's Child Witness to Violence Program and UMass Medical Center to provide basic and advanced training for DCF staff and to provide training to selected mental health providers. The Director of Evaluation for this grant chairs an Evaluation Committee and reports to the grant steering committee. This evaluation committee consists of consumers as well as stakeholders from DCF and provider agencies who assist with the evaluation planning, interpretation of results and recommendations for project improvement. The evaluation design includes a randomized control trial of the Breakthrough Series Model for implementing practice change and a quasi-experimental study of the effectiveness with or without the availability of evidence-based trauma treatments.

The Department is also a member of a team that successfully competed for federal funds to support the development of statewide partnerships aimed at alleviating child welfare trafficking. The grant proposed an action research model for evaluating the success of the project. Dr. Amy Farrell, Associate Professor of Criminology and Criminal Justice at Northeastern University, leads the evaluation and works with the grant leadership team and advisory board to assess the success of the proposed program objectives. Dr. Farrell accesses administrative data to quantitatively assess the impact of grant activities. She collects qualitative data through observations and interviews to assess the successes and challenges of the program model. An annual evaluation report will be prepared for the project's advisory board.

DCF is one of 26 agencies nationwide that have received Title IV-E waiver project approval from the Children's Bureau since 2012. Under the waiver, child welfare agencies are allowed to use Title IV-E funds more flexibly than traditionally permitted to offer innovative services to build on family-driven, child and youth-focused care and community involvement. The waiver opens a window of opportunity for comprehensive child welfare finance and program reform based on outcomes of these waiver projects across the nation.

The Commonwealth implemented Caring Together as its five-year waiver demonstration project on January 1, 2014. DCF submits periodic progress reports to ACF throughout the life of the waiver. DMA Health Strategies, an independent evaluator contracted by DCF, is conducting a comprehensive evaluation of the demonstration project. DMA has conducted focus groups and surveys with DCF staff, providers, and families to evaluate the implementation process for Caring Together.

The evaluation aims to assess:

- outcomes achieved in youth and family safety, permanency, and well-being;
- quality of services and satisfaction among youth and families;
- fidelity to Caring Together principles; and
- service utilization and fiscal impact.

In its CQI strategic planning, the Department assessed the benefits of building internal capacity for conducting case reviews in lieu of, or in combination with, contracted case reviewers. Recognizing the significant value of internal capacity, the Department established its first-ever CQI Unit within the agency. The CQI Unit consists of a unit director, and one CQI Specialist (social worker supervisor level position) in each of the five DCF regions. The Department has adopted the Federal CFSR Round 3 Onsite Review Instrument and is using it for the MA CFSR PIP.

## **C6. CONSULTATION AND COORDINATION BETWEEN STATES AND TRIBES**

### **Overview of ICWA for SFY18**

The DCF efforts to educate staff about ICWA through training, its Intranet page and outreach by Regional ICWA Liaisons have significantly improved ICWA compliance. During SFY 2013, ICWA notices for 60 families were sent across the county compared to a recent 12 month period of time (6/1/17-6/1/18) where ICWA notices were sent across the county for 220 families. This is an increase of 266%. DCF received 238 ICWA inquiries between June 1, 2017 and June 1, 2018 and as of June 1, 2018 120 of these inquiries were in process. ICWA inquiries are considered in process when DCF is either working with a family to collect family tree information or waiting for a response from the identified Tribe(s).

DCF continues to work diligently to protect the rights of its indigenous families through its practice and expansion of its ICWA program. DCF requires that the race/ethnicity of all consumers be documented. When custody is awarded to DCF of a child with Native American/Alaska Native (NA/AN) heritage, the social worker is required to notify the ICWA Coordinator. DCF encourages staff to engage families who maintain custody of their children to inquire with identified tribes as to their eligibility for membership and if there are applicable services they could utilize.

DCF staffs across the state receive education about ICWA frequently. Each (email) response to an ICWA inquiry includes educational material that links the reader to information about the Massachusetts Tribes and material that stress the importance of ICWA. Each DCF team that receives this information is urged to share it with their colleagues in order to increase DCF compliance with ICWA. In addition, ongoing statewide trainings continue with DCF Area Offices. Training material is updated to provide the most current information.

DCF demonstrated its commitment to ICWA through its hiring of a full time DCF ICWA Coordinator in January 2018. This increased capacity provides DCF with the ability to address the increased administrative demands and increased number of ICWA inquiries. The ICWA team is also comprised of the ICWA Clinical Consultant and Deputy General Counsel who oversees ICWA. This team combines the clinical and legal expertise that is essential to the effective implementation of the ICWA statute. DCF provides the support of five Regional ICWA Liaisons to assist staff in all aspects of ICWA compliance.

### **Coordination and Collaboration with MA Tribes**

#### *Wampanoag Tribe of Gay Head (Aquinnah) and the Mashpee Wampanoag Tribe*

The Tribal contact for the Wampanoag Tribe of Gay Head (Aquinnah) (WTGH (A)) is Bonnie Chalifoux, Human Services Director, and Catherine Hendricks, the ICWA Director for the Mashpee Wampanoag Tribe (MWT).

The negotiations for the Intergovernmental Agreement (IGA) began in April 2017 between DCF and the MWT. Meetings occurred twice monthly through August 2017. The MWT communicated that its next step was to incorporate the agreed upon changes to the first draft of the IGA prior to contacting DCF for further negotiations. DCF will engage in this next step once contacted. The WTGH(A) terminated the IGA in 2013. Upon inquiry, it has been communicated that an IGA has not yet been prioritized by the Tribe at this time.

An April 2017 meeting occurred with both Tribes in order to learn about a training proposed by a Consultant for the MWT with the Capacity Building Collaborative for Tribes. This training on ICWA law and clinical considerations will be a day long training for Judges, Attorneys other court personnel and

DCF staff. An August 2017 meeting with all parties addressed the efforts of DCF to collaborate with both Tribes and next steps to build upon a partnership. DCF has reiterated its commitment to respond to requests from the Tribes for future meetings. DCF is scheduling a meeting with the Tribes in order to understand changes within Tribes and how ICWA work may be affected. DCF is spear heading work with the Tribes to update an Active Efforts tool that will promote understanding and uniformity in protective social work with Native American/ Alaskan Native families.

The Department and the Tribes understand that when a tribal child is placed in the custody of the Department, the Department meets all the requirements for that child under 42 USC § 622(b)(8), and §§ 675(5) and 675A. The Department and MWT have had preliminary discussions as to who would meet these requirements if a child is placed in the custody of the Tribe, and in particular if the case is transferred to the Tribal Court. If a Tribal child comes to the attention of the Department as a result of abuse or neglect, the Department will continue to provide preplacement preventative services.

Both Wampanoag Tribes have been invited to participate in the Steering Committee and the Advisory Group at the Children's Cove Multi-Disciplinary team to address Human Trafficking. Additionally, both Tribes have been invited to participate in the Leadership Advisory Board of the MA Child Welfare Trafficking Grant, a 5 year Grant awarded in 2014. Both Tribes are invited to any training DCF provides. Specific training on human trafficking was provided to both Tribes.

DCF collaborates with the Tribes to conduct Massachusetts Approach to Partnerships in Parenting (MAPP) trainings. The need for Tribal foster homes has been a focal point for DCF and the Tribes for years.

#### Sharing the APSR with each MA Tribe

The goals discussed in the APSR speak to the common direction of DCF and the Tribes related to strengthening families through community services and informal supports. These goals are addressed at each meeting of the ICWA staff from both Tribes and DCF. Upon finalization of the MA APSR, a copy will be shared with both Tribes by the DCF ICWA Coordinator.

#### Notification of Indian Parents and Tribes

All ICWA notices to family and Tribes include information regarding court proceedings in the case, and their right to intervene in court proceedings, and transfer jurisdiction to a Tribal court.

In order to ensure the most comprehensive family tree information is sent to tribes to determine enrollment, DCF has employed several practices. Social workers are encouraged to meet with families and explore family tree information. When family is unavailable or unable to provide comprehensive family tree information, DCF utilizes an Accurant Search. Accurant is a database that when demographic information is loaded into it, can search public records for information such as names, dates of birth, addresses, and phone numbers.

Notification to parents now includes a letter, with additional resources for information on ICWA to further inform NA/AN families about the rights and protections afforded under the Act. Notification to the Eastern Regional BIA includes a Certificate of Service to meet ICWA compliance.

### Special Placement Preferences

The Mashpee Wampanoag Tribe continues to recruit tribal members to become foster homes specifically to take tribal children. DCF works collaboratively with WTGH (A) and MWT upon placement of children who may be eligible for membership to ensure that ICWA placement preferences are met.

DCF has 5 ICWA Liaisons across the state. Tribes are able to contact any of the Liaisons at any time to address clinical questions, concerns that arise on specific family cases and questions related to special placement preferences.

As soon as a child enters placement, DCF social workers employ a diligent search for relatives to ensure placement preference is followed. Examples of Placement Preferences are included in the ICWA trainings, can be found on the ICWA Intranet page, and are reinforced by the ICWA Coordinator and ICWA Liaisons.

### Active Efforts to prevent breakup of the Indian Family (past, present and future)

DCF has five ICWA Liaisons who have trained staff on Active Efforts. Training includes specific examples of practices that fulfill the Active Efforts mandate. DCF staff receives support throughout the life of their ICWA cases from their ICWA Liaisons who are available for consultation at any time. Examples of Active Efforts can also be accessed via the DCF ICWA Intranet Page, which is available to all DCF staff.

### Use of Tribal Courts in child welfare matters, Tribal rights to intervene in State proceedings, or transfer proceedings to the jurisdiction of the Tribe

Since July 2015, the MWT has the capacity to take on jurisdiction of protective cases. DCF has not received any requests to transfer case jurisdiction to their court during this SFY.

### **Efforts to improve the compliance with ICWA**

DCF hired its first full time ICWA Coordinator in January 2018. DCF recognized the need for this position with the increased receipt of ICWA inquiries. This position ensures the timely submission of ICWA notices, collaboration with tribes across the country, training support across the state and maintenance of the ICWA database. The DCF ICWA Coordinator attended the 2018 NICWA Annual Conference in order to expand upon strategies for improved compliance with ICWA. The ICWA Clinical Consultant provides the Coordinator with supervision, support related to ICWA compliance and strategic planning related to tribal collaboration and the engagement of the ICWA Liaisons. The Deputy General Counsel provides legal supervision and support related to ICWA law and regulation.

DCF encourages staff to “ask the question” about family ancestry throughout the life of the family case since; extended family members may embark on a history of the family tree after the initial question was asked or, the family may feel more comfortable talking about their heritage as their relationship with their social worker deepens. Best practice indicates that if DCF learns of any NA/AN heritage claimed by the family prior to any state custody hearing, DCF would work with the family so that the family could communicate directly with the named tribe in order to ascertain family eligibility for membership. This information would inform the ICWA work if custody of the child/ren were to be awarded to the State.

DCF is diligent about its process to uncover genealogy necessary for an ICWA notice. DCF enlists the assistance of the attorney representing the appropriate parent to impress upon the parent the need to comply with this federal law. DCF also utilizes an Accurant search for missing family tree information.

DCF launched its ICWA intranet page in 2016. This has served as a great reference to staff when submitting ICWA inquiries. It has increased the understanding of ICWA and has provided Supervisors with agenda topics for Unit meetings that result in improved compliance. This page is updated regularly.

DCF ICWA record keeping has expanded to include a section in the electronic record to upload all ICWA notices, certified mailing receipts from ICWA notices, and tribal letters of response. This ensures that records can be maintained in the database and easily accessed by DCF. Once eligibility in a tribe is confirmed, the ICWA Coordinator is reaching out to Area Office teams to obtain tribal enrollment numbers for recordkeeping. Regional ICWA Liaisons are available to assist Area Office teams in enrolling eligible children in their tribes.

DCF is able to monitor and assess its compliance with ICWA through the use of an Excel database maintained by the ICWA Coordinator. The Coordinator tracks all components of an ICWA case from initial inquiry to receipt of responses from tribes. When a child is eligible for enrollment in a federally recognized Tribe, DCF records this in the demographic section of the electronic case record along with the subsequent Tribal ID/Enrollment number.



## **C7. MONTHLY CASEWORKER VISIT FORMULA GRANT**

### **Introduction**

The Massachusetts Department of Children and Families (DCF) continues to use the Caseworker Visit Grant funds to systemically improve and strengthen the quality and frequency of caseworker visits through policy, practice, and improved training curriculum. This approach provides an opportunity for DCF overall assess current practices, revise policies, and implement existing best practices thus improving the quality of visits.

### **Current Strategies to Strengthen Quality and Increase Visits**

In FY2018 DCF continued report on monthly caseworker contact with children in placement. The Department of Children and Families, as part of the quality improvements to date, revised and executed many of policies that were scheduled for implementation in this current year. As a result, DCF is moving toward a fluid process that will better align data and enhance practice outcomes.

### **Supervision Policy**

The Department has been using this approach in developing necessary clinical capacity among Area Directors, Area Program Managers, Supervisors and Social Workers. Routine supervision provides an opportunity for staff to strategize about effective ways to engage in casework that prioritizes child safety through in-person contacts. Per ongoing monitoring of the policy there has not been a need for revision. However the Department will continue to assess to address any potential short falls that may arise. This policy sets expectations for Department Supervisors in:

- Weekly individual supervision
- Group supervision
- Urgent supervision
- Professional development
- Seeking input from Department managers, attorneys and clinical specialists

### **Policy Regarding Missing or Absent Children in Department Care or Custody**

Children and youth who are placed in substitute care are at higher risk for issues such as human trafficking and exploitation. In addition to requiring in person contact and planning for children who are at risk of becoming missing or absent, the Department continues to refine the policy since implemented. The Department looks to incorporate feedback receive from community providers and law enforcement. It is anticipated that in the fall of this year the revised policy will address the concern raised by law enforcement regarding the number of cases generated by current practices.

- Provides role/responsibility clarification for Area Directors, Area Program Managers, Social Workers, placement resources and On-Call Supervisors
- Includes procedures for:
  - A child in DCF care or custody that is identified as missing or absent (notifications, search process, clinical conference, when child makes periodic contact)
  - Locating and returning a child to DCF-approved placement
  - DCF locating a missing or absent child from another state or jurisdiction
- Provides clarification of terms and acronyms (such as Amber Alert, NCMEC, etc.)

- Details the information that should be provided when reporting a missing child to law enforcement and others

### **Family Assessment Action Planning**

The Department continues to assess feedback after implementation in 2017 and will incorporate revision in the next release. In utilizing a strength based approach, the department will incorporate the protective factor approach to promote child–family well-being.

- Prioritizes child safety and centers on engaging family members in an integrated and dynamic process of exploring their unique strengths and needs for two important and related purposes:
  - Determining whether DCF must remain involved with the family to safeguard child safety and well-being
  - For families who must stay involved, jointly developing a plan to support the family in strengthening their capacity to meet the safety, permanency, and well-being needs of each child
- For the young adult who has sustained connection or re-engaged with DCF, focuses on:
  - In 2018 a tip the Department developed a tip sheet for working with Young Adults
  - Identification and relationship development with one or more adults who will maintain a consistent, caring, and permanent relationship with the young adult
  - Assessing preparation for successful adulthood, supporting life skills development, and providing resources to promote adult independence.
- During the 60 working day Family Assessment, requires for the Social Worker:
  - A minimum of 3 face-to-face contacts with family members
  - That the 1<sup>st</sup> face-to-face contact occurs within 5 working days after assignment
  - Two of the 3 face-to-face contacts to take place in the home
  - To visit each open consumer
  - To visit all children in the home at least monthly
  - To visit young adults at least monthly, at least one visit occurring in the young adult's residence
- Requires that within 10 working days after a need for a service is identified, the Social Worker initiates a referral to DCF-funded services or to other agencies
- Requires that the Family Assessment is compiled into the 4 sections as follows:
  - Family Profile and Functioning
  - Assessing Parental Capacities Using Protective Factors
  - Child (or Young Adult) Safety, Permanency, and Well-Being
  - Clinical Formulation and Focus for the Action Plan

### **FY19 Plan**

The accomplishments outlined in last year's plan were fairly consistent with the in an effort to improve visits by caseworkers. The Department intends to spend current case worker allocated funds to implement evidence based curriculum that will advance best practices, incorporates protective factors, guidance on safety risk and permanency. The Department plans to utilize the grant in:

- Update The Field Guide for Social Workers
- Translate the Field Guides in Multiple Languages
- Support the training of new Social Workers and Social Workers Technicians
- Integrated Clinical Practice to improve visits, by incorporating Protective Factors
- Welcome Baby Bags

### Budget

In the chart below, we present the FY18 and FY19 planned budget for the grant. We provide two views: expenditures grouped by category and expenditures grouped by the grant objectives. Expenditures reported reflect spending incurred/projected during the respective state fiscal years and do not necessarily correspond with the federal fiscal year spending reported in the CFS-101.

<b>CASEWORKER VISITS GRANT (UNDER PSSF) - IV-B, SUBPART 2</b>		
<b>Expenditure Category</b>	<b>FY18</b>	<b>FY19</b>
Salary (Caseworker Policy Implementation Coaches)	\$ 147,000	\$ -
Fringe Benefits	\$ 53,420	\$ -
Travel	\$ -	\$ -
Equipment	\$ -	\$ -
Training, Space and Conference Incidentals(CWI)	\$ -	\$ 203,345
Supplies	\$ 7,446	\$ 1,000
Contract Services:		
<i>Caseworker Identification Cards</i>		\$ -
<i>Document Translation Services</i>	\$ 3,500	\$ 4,000
<i>Contracted (Caseworker Policy Implementation Coaches)</i>	\$ 37,505	\$ -
<i>Welcome Baby Bags</i>	\$ 50,000	\$ 50,000
<i>Other (Printing Field Guides for Social Workers)</i>	\$ -	\$ 6,945
<b>Subtotal Direct Cost</b>	\$ 298,870	\$ 265,290
<b>Indirect Cost</b>	\$ -	\$ -
<b>GRAND TOTAL</b>	\$ 298,870	\$ 265,290

<b>Grant Objectives</b>	<b>FY18</b>	<b>FY19</b>
Improve Quality of Monthly Caseworker Visits	\$ 291,994	\$ 48,123
Increase Retention, Recruitment, and Training of Caseworkers	\$ 6,876	\$ 6,877
Administration:		
<i>Personnel and Overhead</i>	\$ -	\$ -
<i>Supplies and Administrative Costs</i>	\$ -	\$ -
<i>Administrative Activities</i>	\$ -	\$ 203,345
<i>Other</i>	\$ -	\$ 6,945
<b>Administrative %</b>	0.00%	0.00%
<b>GRAND TOTAL</b>	\$ 298,870	\$ 265,290

## **C8. ADOPTION AND LEGAL GUARDIANSHIP INCENTIVE PAYMENTS**

The Department received an updated award letter on 6/28/17 for FY16 in the amount of \$211,334 to be expended by 12/31/2019. The unexpended funds carried forward from the previous award for FY16 were \$30,191 (to be expended by 9/30/2019) bringing the total to \$241,525 for FY16. The Department received an award letter dated 9/6/2017 indicating FY17 award of \$12,085 and on 5/24/2018 for an additional \$112, 915 to be expended by 9/30/2020. Total combined awards for FY16 and FY17 are \$366,525.

Program staff met with budget staff to plan for these funds to ensure that they are obligated and expended by the deadline specified in the grant award letter. The Department does not anticipate any barriers to achieving the goal of expending all allotted grant funds.

Projected expenditures for these funds by 6/30/18 total \$59,000 which is unexpended funds from the FY16 award.

During SFY18 funds were utilized in the following manner:

1) The Subsidy Supervisor and one Subsidy administrator attended the AAICAMA annual meeting/conference in Chicago, Illinois in April of 2018. The meeting included sessions which focused on Title XIX for Title IV-E Adoption Assistance, Interstate Medicaid Services for children, Federal Child Welfare Legislation and Public/Private Partnerships. Sessions highlighted some of the challenges faced by our children and families in accessing services when they relocate to another state. The Department has committed to an increased focus on permanency and this meeting provided opportunities to maximize programming to achieve these goals. The conference was attended by representation from twenty-nine states. AAICAMA works with states and the adoption community to promote practices and policies to ensure that children who are eligible for adoption assistance receive uninterrupted supportive services. By gaining an enhanced understanding of federal guidelines and regulations concerning our children, networking, and learning from other states, this learning opportunity answered questions and is assisting us in problem solving our revisions to policy and protocol in this area.

2) Training and other learning opportunities were provided to over 600 DCF and provider agency staff statewide. These activities focused on improving the ability of DCF staff and contracted agencies to increase successful permanency plans through adoption or guardianship and on providing adoption competent support to DCF children and families.

- On 7/17/17, DCF conducted training titled, “Adoption Homestudies 101”. Learning objectives included: Promoting honest and sincere interactions between workers and prospective adoptive parents; identifying, discussing and writing about “red flags”; understanding how comprehensive clinically formulated home studies maximize the potential for permanence and minimize disruption and dissolution; and critical thinking in assessing families and conducting the homestudy.
- On 8/23/17, 9/6/17 and 3/26/18, DCF conducted training titled “Stuff No One Wants to Talk About: Engaging Kids in Difficult Conversations”. Learning objectives included: Understanding of the importance of sharing accurate information in a sensitive and developmentally appropriate manner with youth; Improved skills to foster relationships with youth in care that encourages a comfortable and reliable space for discussing challenging issues; embracing a thoughtful and reflective attitude and manner when engaging youth in difficult discussions about history, birth family, and permanency solutions.

- On 10/4/17, 10/10/17, 10/13/17, 10/25/17 and 11/8/17, a five day series of trainings was held for Family Resource and Adoption staff. Curriculum focused on Critical thinking in permanency planning; Child development and trauma; Understanding state and federal guidelines; Engaging and assessing foster and adoptive families; Engaging and assessing children with an adoption goal; as well as other complex issues.
- On 12/1/17, DCF co-sponsored a symposium with the Massachusetts Adoption Resource Exchange titled “Birth Family Integration in Adoption Best Practice”.
- On 4/2/18 and 5/30/18, DCF conducted a training titled “The Art of Adoption Matching”. Learning objectives included: Understanding of the considerations for youth and family matching; federal and departmental policy regarding finding permanent families for youth in need; Strategies for successful matching opportunities.
- On 4/13/18, thirty-eight DCF staff attended the 2018 Rudd Adoption Research New Worlds of Adoption Conference, “The Future of Adoption: Beyond Safety to Well-Being” which took place on the campus of the University of Massachusetts Amherst.
- On 5/21/18, 6/7/18 and 6/20/18, DCF conducted trainings titled Core Clinical Issues in Adoption and Foster Care”. Learning objectives included: Understanding the evolving aspects of adoption to support informed practice; Appreciation of the complexity of adoption by understanding the universal and unique experiences of the key players and; Skills to engage and support children, youth, and families.
- On 6/6/18, DCF conducted a training titled “Unpacking the No: Exploring Why Youth Don’t Want to Be Adopted”. Learning objectives included: Understanding the most common reasons a youth will resist being adopted; Strategies for engaging youth in a dialogue about considering adoption; Explaining adoption to youth who are resistant to being adopted.

3) All Family Resource, Recruitment, Adoption Development Licensing and Adoption Units received copies of How to Screen Adoptive and Foster Parents: A Workbook for Professionals and Students by James L. Dickerson, Mardi Allen and Daniel Pollack.

4) Books written for children and youth about adoption were purchased and provided to all youth adopted on National Adoption Day.

Current plans for the use of unexpended funds include learning opportunities titled “The Importance of Sibling Connections”, “Using Critical Thinking in Permanency Assessments for Children”, as well as other clinical and critical thinking topics to better service our children and families to promote an increase in timely permanence. In addition, staff will be provided the opportunity to attend national conferences.

The Department acknowledges changes to the adoption and legal guardianship incentive payment program brought about by the enactment of PL113-183. The law extended from 24 months to 36 months the length of time states have to spend incentive payments earned under the program; also the law prevents states from using incentive payments to supplant federal or non-federal funds for services under title IV-B or IV-E. At present, these changes do not impact the Department’s plans for use of the incentive funds.

### Budget

In the chart below, we present the FY18 and FY19 planned budget for the grant. We provide two views: expenditures grouped by category and expenditures grouped by the grant objectives. Expenditures reported reflect spending incurred/projected during the respective state fiscal years and do not necessarily correspond with the federal fiscal year spending reported in the CFS-101.

ADOPTION AND LEGAL GUARDIANSHIP INCENTIVE PAYMENTS		
Expenditure Category	FY18	FY19
Salary	\$ -	\$ -
Fringe Benefits	\$ -	\$ -
Travel	\$ 4,332	\$ 4,332
Equipment	\$ -	\$ -
Conference Incidentals	\$ 15,450	\$ 15,450
Supplies	\$ 1,191	\$ 1,191
Contract Services:		
<i>Subscriptions, Books, Exhibits, Displays</i> <i>(National Adoption Day)</i>	\$ 9,998	\$ 9,998
<i>Media Design &amp; Communication Services</i>	\$ 5,000	\$ 5,000
<i>Translation Services (Post-Adoption Services)</i>	\$ 2,000	\$ 2,000
<i>Training - DCF Adoption/Learning Opportunities</i>	\$ 70,000	\$ 70,000
<i>Other</i>	\$ -	\$ -
<b>Subtotal Direct Cost</b>	\$ 107,971	\$ 107,971
<b>Indirect Cost</b>	\$ -	\$ -
<b>GRAND TOTAL</b>	\$ 107,971	\$ 107,971

Grant Objectives	FY18	FY19
Services Including Post Adoption Services and Activities	\$ 106,780	\$ 106,780
Administration:		
<i>Personnel and Overhead</i>	\$ -	\$ -
<i>Supplies and Administrative Costs</i>	\$ 1,191	\$ 1,191
<i>Administrative Activities</i>	\$ -	\$ -
<i>Other</i>	\$ -	\$ -
<b>Administrative %</b>	1.10%	1.10%
<b>GRAND TOTAL</b>	\$ 107,971	\$ 107,971

## **C9. CHILD WELFARE WAIVER DEMONSTRATION ACTIVITIES**

*If the state has an approved child welfare waiver demonstration project under section 1130 of the Act, it must describe its efforts to coordinate and integrate the activities under the demonstration with the goals and objectives of the 2015-2019 CFSP and subsequent APSRs. As part of the 2019 APSR, describe the state's plans to sustain successful waiver interventions once the waiver authority terminates on September 30, 2019.*

Since the implementation of the Department's waiver demonstration project on January 1, 2014, DCF has been serving children under the Caring Together system. This system offers families a continuity of services and providers whether a child is in a congregate care program or receiving services in their community in order to better support community transitions and strengthen child and caretaker capacity.

The primary goals of the waiver demonstration project align with the goals and objectives of the 2015-2019 CFSP as they center on increasing permanency, improving safety, and increasing well-being and positive outcomes in the community. DCF has been focusing on the successful implementation of the four primary services that are part of the waiver demonstration project: Follow Along, Stepping Out, Continuum, and Family Partner. These services allow congregate care programs and community resources to continue serving youth and family during episodes of out of home treatment and while receiving services in their home and community. DCF is also developing management and outcome reports for these service interventions.

The Department uses Title IV-B monies and flexible Title IV-E funding under the waiver to support the joint management and governance of Caring Together between DCF and DMH, and to cover costs for traditionally unallowable services under 45 CFR 1356.60 (c)(3), such as counseling or other treatment to the child, family, or foster family to remedy home conditions, personal problems or behaviors.

The Department's waiver terminates on December 31, 2018. The Department is currently assessing whether to terminate the waiver before that date and will notify ACF accordingly if a decision is made to move in that direction. Regardless though, the Department will continue providing Caring Together services to all children who require the level of care associated with the services once the waiver funding ceases. Caring Together services were procured irrespective of Massachusetts being approved for a waiver. Hence the continuation and provision of the services is not dependent on waiver authority.

## C10. QUALITY ASSURANCE SYSTEM

The Department implemented the MA CFSR3 PIP in July 2017. One of the Department's PIP goals (Goal 3 of 3) was to develop a robust Continuous Quality Improvement (CQI) program. Toward this end, the Department utilized the ACYF-CB-IM-12-07 information memorandum on Establishing and Maintaining Continuous Quality Improvement (CQI) Systems in State Child Welfare Agencies to inform the development of DCF's CQI system. The Department's CQI approach better equips the agency to measure the quality of services provided in Massachusetts by determining the impact those services have on child and family level outcomes and functioning, and the effectiveness of processes and systems in operation statewide.

By the start of FFY2018, the Department was operating a robust CQI program that was functioning statewide to ensure that it was/is (1) operating in the jurisdictions where the services included in the Child and Family Services Plan (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.

### MA CFSR3 PIP Goal 3: Develop a Robust CQI Program

#### Strategy 1: Build the CQI Model

The Council on Accreditation's public agency standards for Performance and Quality Improvement (PQI) served as a guiding reference. The Department's agency-wide CQI program promotes efficient and effective service delivery and the achievement of strategic and program goals.

*Key Activity 1:* Develop a clearly articulated **mission** for CQI—which defines its purpose within the Department.

*Progress* – DCF's **mission** for its CQI program, is that:

- DCF's Continuous Quality Improvement program is a systemic approach to advancing the agency's mission and achieving its goals through continuous and integrated efforts to improve service delivery and overall agency function.
- DCF's mission: *Strive to protect children from abuse and neglect and, in partnership with families and communities, ensure children are able to grow and thrive in a safe and nurturing environment.*

*Key Activity 2:* Develop a clearly articulated **vision** for CQI—which sets out its direction within the Department.

*Progress* – DCF's **vision** for its CQI program, is that:

- Supports and services are designed and implemented based on evidence and knowledge;
- Practice is aligned with policy;
- Data collection is focused on measuring outcomes and achieving success through safety, permanency, and well-being;
- Continuous quality improvement is emphasized and supported throughout the agency; and
- Innovation is valued and encouraged.

*Key Activity 3:* Develop a clearly articulated set of **values** for CQI—which establishes the parameters for its accomplishments.



*Progress* – Five core **values** (principles) underlie the Department’s CQI system. A good CQI system:

- Provides for continuous learning at all levels of the Department and does not serve as either a compliance tool, or as an individual evaluation or accountability system;
- Addresses the entire child welfare system as a whole, including both the Department’s formal partners, such as its providers and foster parents, and its informal partners in family and community;
- Identifies best or promising practices and promotes them for learning and appropriate spread across the Department;
- Provides early warning of operational problems or challenges in any office or in the larger system of care, promoting a proactive rather than a reactive response system; and
- Serves as the primary means by which the Department identifies needed program development or professional development to ensure the highest quality child welfare across the Commonwealth.

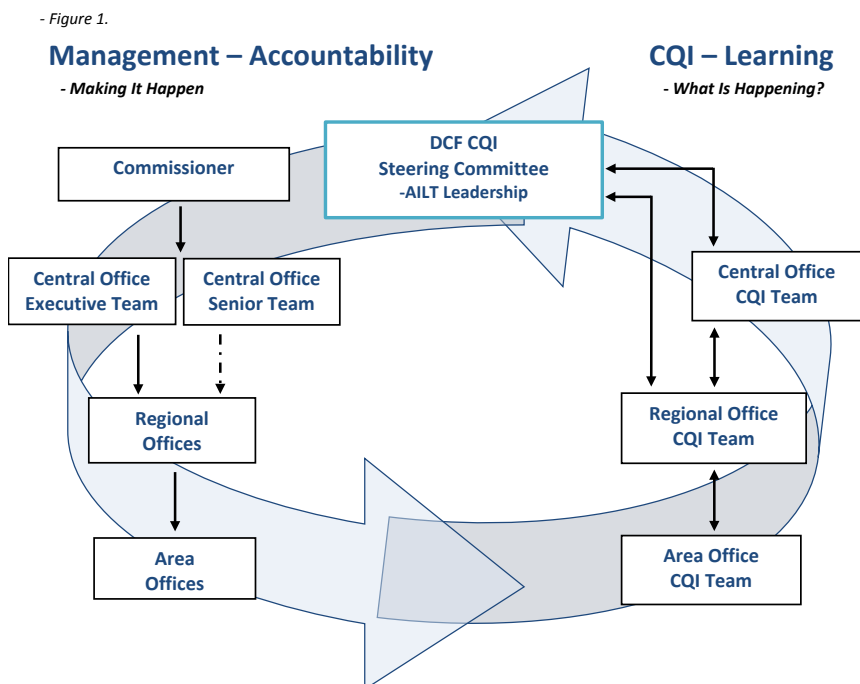
*Key Activity 4:* Establish a foundational administrative structure—to ensure that the CQI system is functioning effectively and consistently, and adhering to the process established by agency leadership. This foundational administrative structure will include the Department’s executive team. The foundational administrative structure will promote a culture that values service quality and ongoing efforts by the full agency, its partners, and contractors to achieve strong performance, program goals, and positive results for service recipients.

*Progress* – The Department has established a foundational administrative structure which recognizes and supports the following cyclical relationship of management and CQI:

- There is an integrated and cyclical nature between Management and CQI. The cyclical nature of this relationship is a critical foundation for positive outcomes; reflecting the substantive communication and information flow that sustains fidelity to the agency’s vision and goals. The Management structures hold the accountability for ensuring that the processes and practices of the agency are efficient, effective and result

in positive outcomes for children and families. The CQI structures hold the responsibility for facilitating access to quantitative and qualitative information about those processes, practices and outcomes, and ensuring that this information is used to enhance practice knowledge and promote learning throughout the agency.

- Figure 1 depicts the ongoing, integrated and cyclical nature of the relationship between DCF Management and CQI.
- There is an ongoing cyclical relationship and communication flow between the accountability of management and the learning promoted by CQI. This integration functions through



**Note:** The arrows on the management side are unidirectional reflecting accountability within the system. The arrows on the CQI side of the cycle are bi-directional to reflect the importance of shared information and learning. The chart reflects the circular and continuous integration of these two critical activities and the foundational commitment to shared accountability and learning at each level of the agency.

the exchange of data and responsive feedback occurring during management oversight, as well as formal and informal learning opportunities. The functional integration of these structures occurs at each level of the agency. The CQI Teams review qualitative and quantitative information on clinical, managerial and systemic practices and related outcomes to gain an understanding of trends, practice challenges and promising practices. The knowledge gained through these efforts is then used by the Management Team as they guide and refine clinical, managerial and systemic practices for which they are accountable.

- CQI teams have been formed to include broad based representation. Membership on the DCF CQI Team is not specifically prescribed, but careful consideration of the team's composition is critical to ensuring a variety of perspectives and areas of expertise that relate to all facets of the Department's practices. The functions of the CQI Teams include a range of activities that focus on a review of practices and outcomes, development of improvement plans, and promoting a continuous learning environment.
- CQI efforts are the most effective when conducted by individuals/stakeholders closest to the locus of practice or process. Therefore, the DCF CQI program benefits from local CQI teams established in each area, region, and Central Office. Local Area Office CQI Teams receive guidance/focus from Regional Office CQI Teams; learning is to flow in both directions. The CQI Steering Committee (i.e., AILT Leadership) guides and focuses the work of the Central Office, Regional and Area Office CQI teams; learning flows in multiple directions.

*Key Activity 5:* Establish a comprehensive CQI plan—functioning agency-wide which:

- Includes standards to evaluate the quality of services—inclusive of safety, permanency, and well-being;
- Identifies strengths and needs of the service delivery system—at all levels;
- Provides relevant reports—driven by comprehensive quality data collection, systematic/representative case record review, analysis of quantitative/qualitative data, and dissemination of findings utilizing multidirectional feedback loops; and
- Evaluates implemented program improvement measures.

*Progress* – As of the start of FFY2018, the Department has firmly established a comprehensive CQI plan which includes each of the elements outlined above.

*Key Activity 5a:* Establish a CQI management structure which will hold the accountability for ensuring that the processes and practices of the agency are efficient, effective and result in positive outcomes for children and families. This structure will include the following:

- Commissioner;
- Central Office Executive and Senior Staff;
- Regional Office leadership; and
- DCF CQI Steering Committee.

*Progress* – As of the start of FFY2018, the Department has firmly established a comprehensive CQI plan which includes each of the elements outlined above.

*Key Activity 5b:* Establish an agency-wide CQI team structure which promotes learning and critical thinking, and embeds a quality improvement perspective/lens for all staff across all levels of the agency.

*Progress* – The following CQI teams have been established.

- Central Office CQI Team(s);
- Regional Office CQI Team(s) – minimally one team per regional office; and

- Area Office CQI Team(s) – minimally one team per area office.

<b>AREA OFFICE CQI TEAM</b>	
<i>Team Composition</i>	<i>Team Functions</i>
<ul style="list-style-type: none"> <li>• Area Office Managers</li> <li>• Lead Agency Representatives</li> <li>• Supervisors and Direct Service Staff – as indicated</li> <li>• Family Member(s)</li> <li>• Youth</li> <li>• Community Representatives</li> <li>• Area Board Member(s) – as indicated</li> </ul>	<ul style="list-style-type: none"> <li>• Review data related to caseload, practice, systems performance, and child/family outcomes on a monthly/quarterly (TBD) basis.</li> <li>• Identify performance challenges and strengths and develop action plans in response to these.</li> <li>• Ensure that the review process is characterized by learning and reflection.</li> <li>• Develop and implement action/improvement plans, evaluate results, and modify plans accordingly in a process of continuous improvement.</li> <li>• Participate in monthly/quarterly (TBD) regional office reviews of performance and action plan status.</li> <li>• Disseminate learnings about successes and challenges.</li> </ul>

<b>REGIONAL OFFICE CQI TEAM</b>	
<i>Team Composition</i>	<i>Team Functions</i>
<ul style="list-style-type: none"> <li>• Regional Office Managers</li> <li>• Regional Counsel(s)</li> <li>• Regional Office Specialists and Support Staff as indicated</li> <li>• CQI Specialist(s)</li> </ul>	<ul style="list-style-type: none"> <li>• Review Area Office data related to caseload, practice, systems performance, and child/family outcomes on a monthly/quarterly (TBD) basis.</li> <li>• Organize and provide staff support for Area Office CQI reviews as indicated.</li> <li>• Conduct monthly/quarterly (TBD) CQI reviews of Regional Office functions and services.</li> <li>• Ensure that the review process is characterized by learning and reflection.</li> <li>• Develop annual action plans addressing cross-area performance challenges.</li> <li>• Participate in quarterly/semi-annual (TBD) Central Office reviews of performance and action plan status.</li> <li>• Disseminate learning about successes and challenges.</li> </ul>

<b>CENTRAL OFFICE CQI STEERING COMMITTEE</b>	
<i>Team Composition</i>	<i>Team Functions</i>
<ul style="list-style-type: none"> <li>• Executive Team</li> <li>• Senior Staff</li> <li>• AILT Leadership</li> <li>• CQI Director</li> </ul>	<ul style="list-style-type: none"> <li>• Conduct monthly/quarterly/semi-annual (TBD) reviews of Regional/Area performance and action plan status.</li> <li>• Determine priorities for Area/Regional CQI Team Review as indicated.</li> <li>• Conduct quarterly (TBD) CQI reviews of Central Office functions and services.</li> <li>• Ensure that the review process is characterized by learning and reflection.</li> <li>• Ensure that training, agency policies, and other resources support identified Area/Regional practice and system changes.</li> <li>• Identify exemplary practice and system improvements, and disseminate across Areas and Regions, and internal/external stakeholders as indicated.</li> </ul>

*Key Activity 5c:* Train CQI teams on the agency CQI model/process/content and use of data.

*Progress* – Central/Regional/Area Office leadership teams have been trained on the agency CQI model, process and content, as well as the tools/methods of CQI. Furthermore, as of February 2018, more than 80 data fellows have graduated from an intensive 6-month DCF Data Fellows Institute which has provided comprehensive instruction and hands-on experience with CQI and the use, analysis, and display/presentation of data.

*Strategy 2: Develop a case practice review system (structure and mechanisms) to gather qualitative and quantitative information.*

This case practice review system incorporates an ongoing case review component that includes reading case files and evaluating case practice for children served by the Department and interviewing parties involved in the cases.

*Key Activity 1:* Develop and implement a communication strategy for promoting agency-wide understanding regarding the process, purpose, importance, and use of the case practice review system; particularly as it relates to successfully meeting/exceeding the PIP goals.

*Progress* – The DCF CQI Plan (including importance of establishing a comprehensive case practice review system to manage/meet/exceed PIP goals) has been developed, approved, and rolled-out to each region/area office, and fully implemented.

*Key Activity 2:* Establish a CQI Unit within the agency which supports an ongoing case practice review system agency-wide. A fully staffed CQI Unit will consist of a Director and minimally one CQI Specialist in each of the agency's five regional offices.

*Progress* – The Department established its first-ever CQI Unit within the agency. The CQI Unit consists of a unit director, and one (1) CQI Specialist (social worker supervisor level position) per each of the five (5) DCF regions.

*Key Activity 3:* Develop and utilize a quality data collection system framework for gathering both quantitative and qualitative data—utilizing SACWIS data extracts and a DCF case review instrument which includes interviews specific to each case. Found to be a strength and in substantial conformity with the systemic factor of Statewide Information System, the Department’s SACWIS system will serve as the primary source for gathering quantitative data on both process and outcomes, as well as to identify representative cases for case review.

*Progress –* The DCF FamilyNet (MA SACWIS) Database is the primary source for gathering structured quantitative data and for identifying sample cases for systematic case review. The DCF CQI Unit has developed structured Case Review Modules with embedded instructions for systematic quantitative and qualitative review of new agency policy (e.g., Protective Intake, Case Closing, and Family Assessment and Action Planning). Furthermore, the DCF CQI Unit is utilizing the ACF/CB OSRI and OMS for the agency’s CFSR3 PIP case reviews.

*Key Activity 4:* Establish a systematic methodology and instrument (CFSR Onsite Review Instrument (OSRI) plus DCF-specific data elements) for reviewing cases on a representative sampling universe of children who are/were recently in foster care and children who are/were served in their own homes. The case review methodology and instrument will support data collection on the following PIP items—including but not limited to the assessment of training/implementation/case practice:

- *Goal 1, Strategy 2, Key Activity 1:* Adherence/effectiveness of DCF Risk Assessment Tool.
- *Goal 1, Strategy 2, Key Activity 3:* Adherence/effectiveness of the Supervision Policy.
- *Goal 1, Strategy 2, Key Activity 4:* Ability of staff to engage families in examining parental capacity and protective factors.
- *Goal 1, Strategy 2, Key Activity 5:* Adherence/effectiveness of the Family Assessment and Action Planning Policy.
- *Goal 1, Strategy 2, Key Activity 6:* Adherence/effectiveness of the In-Home Case Practice Policy.
- *Goal 2, Strategy 1, Key Activity 5:* Assess impact of increasing identification of kin connections during assessment.

*Progress –* The DCF CQI Unit is utilizing the ACF/CB OSRI and OMS for the agency’s CFSR3 PIP case reviews. The Department’s CFSR3 PIP Baseline was completed through the comprehensive case review of 70 cases from Jul-Dec 2017. Subsequently, 70 CFSR3 PIP have been conducted between Jan-Jun 2018, and an additional 70 cases will be reviewed between Jul-Dec 2018. This review schedule is anticipated to continue throughout 2019 and beyond.

*Key Activity 4a:* Establish (in consultation with the ACF/CB) and implement a case practice review system that will measure safety, permanency, and well-being outcomes in support of the PIP, as well as on an ongoing basis. This system will utilize the CFSR OSRI and Online Monitoring System (OMS) for data collection and reporting.

*Progress –* The DCF CQI Unit is utilizing the ACF/CB OSRI and OMS for the agency’s CFSR3 PIP case reviews.

*Key Activity 4b:* Establish and implement a case practice review system that will assess fidelity to the Department’s new and ongoing policies. Key learnings will be utilized to refine new policy, identify and shape training needs, direct practice improvement efforts, and recognize and spread best practice.

*Progress –* The DCF CQI Unit has developed structured Case Review Modules with embedded instructions for systematic quantitative and qualitative review of new agency policy (e.g., Protective Intake, Case Closing, and Family Assessment and Action Planning). Key learnings are being utilized to

refine new policy, identify and shape training needs, direct practice improvement efforts, and recognize and spread best practice.

*Key Activity 5:* Develop a written user manual and standardized instructions for completing case review instruments and for implementing the case review process.

*Progress* –The DCF CQI Unit has developed structured Case Review Modules with embedded instructions for systematic quantitative and qualitative review of new agency policy. The DCF CQI Unit is utilizing the ACF/CB OSRI and OMS which includes a written user manual and standardized instructions and an implementation plan.

*Key Activity 6:* Establish and implement a uniform and consistent training process for staff case reviewers (i.e., CQI Specialists)—focusing on reducing bias and increasing interrater reliability.

*Progress* – The DCF Case Review Modules contain embedded instructions. Interrater reliability is ensured through anchoring guidance within the instruments, staff meetings, & QA oversight by the CQI Unit Director (with initial review/sign-off by the Assistant Commissioner for CQI). The DCF CQI Unit is utilizing the ACF/CB OSRI & OMS for the agency's CFSR PIP case reviews. CB Regional Office provided training and ongoing support to the CQI Unit Director and CQI Specialists. Primary and Secondary QA oversight has/is being provided to ensure conformity and reliability.

*Key Activity 7:* Develop a process for conducting ad hoc / focused reviews targeting specific domains when analysis and other data warrant such reviews.

*Progress* – The DCF CQI Plan and guidance for conducting ad hoc / focused reviews was developed, approved, rolled-out to each region/area, and implemented. Conducted examples: Protective Intake Policy Implementation, Case Closing - Re-opening, and Fatherhood Engagement studies.

*Key Activity 8:* Develop and implement a consistent mechanism for gathering, organizing, and tracking information from the case review process for information not otherwise captured in the OSRI.

*Progress* – The DCF CQI Unit has developed a MS Excel template for recording Case Review Module findings. While this strategy has proven to be sufficiently reliable, in an effort to gain additional efficiencies, a MS Access Database structure for recording findings with MS Excel exporting options for reporting is being explored.

*Key Activity 9:* Establish and implement process for analyzing data from both quantitative and qualitative data sources.

*Progress* – The MS Excel templates for recording Case Review Module findings are utilized to analyze data (e.g., descriptive statistics, pivot tables, charting, and graphing). The ACF/CB OMS is utilized to extract quantitative and qualitative data.

*Key Activity 10:* Develop mechanism for distributing key findings and information from quantitative and qualitative data sources to:

- Families, children, youth, and young adults receiving services;
- Providers;
- Stakeholders;
- Legislators;
- The Office of the Child Advocate; and
- The General Public

*Progress* – The DCF Commissioner and the Office of Child Advocate (OCA) Director have convened a Data Workgroup to explore and expand DCF's reporting and its mechanisms for distributing key findings and information from quantitative and qualitative data sources. Data Workgroup includes representation from: Executive Office of Health and Human Services (EOHHS), DCF, OCA, MA Legislative staff, child welfare/legal advocates, faculty from higher education.

*Strategy 3: Improve training for DCF staff provided by Massachusetts Child Welfare Institute (CWI).*

*Key Activity 1:* Review and assess current pre-service and on-going training provided by CWI, with the goal of improving skill-building, increasing depth of practice, building fidelity to policies, reinforcing agency emphasis on quality improvement, and promoting DCF as a learning organization. As a result, identify the changes needed in training to increase DCF staff's understanding of the basic skills and knowledge required by their positions. The process will include engaging subject matter experts and obtaining input from field operations (i.e., DCF regional and area offices).

*Progress* – The DCF Child Welfare Institute (CWI) in collaboration with curriculum writing consultants initiated a review and assessment of DCF's current preservice training and materials.

*Key Activity 2:* Review and revise DCF new worker preservice training curriculum.

*Progress* – Review of the Department's pre-service resulted in revisions to the pre-service training curriculum. All revisions and a final draft of the curriculum are anticipated to be completed by September 30, 2018.

*Key Activity 2a:* Implement revised preservice training curriculum and process.

*Progress* – Implementation to follow finalized curriculum.

*Key Activity 2b:* Develop and implement a mechanism for evaluating the effectiveness of initial training—results will be utilized to refine curriculum and training strategies. A formal feedback process will be instituted that will include field operations (i.e., area office supervisors) and the DCF Child Welfare Institute (i.e., DCF training unit). This formal feedback process will measure transfer of learning around key practice elements.

*Progress* – This key activity is being addressed simultaneously (linked) with the development and completion of pre-service curriculum revisions and the implementation of the revised pre-service curriculum.

*Key Activity 3:* Create a cross-functional working group to review existing On-the-Job Training (OJT), determine best practices, and develop a framework for development and implementation agency-wide. The OJT strategy will describe the roles and responsibilities of the MA Child Welfare Institute, the new worker trainees, and the local area offices.

*Progress* – A cross-functional field operations (i.e., workers, supervisors, managers, etc.) workgroup was created. Preliminary OJTs were developed. Transfer of Learning/OJT components are dependent on and components of pre-service curriculum.

*Key Activity 3a:* Implement revised OJT strategy and process.

*Progress* – Implementation to follow finalized OJT strategy and process.

*Key Activity 4:* Develop a staff statewide training system that provides staff with the skills and knowledge needed to carry out their duties.

*Progress* – CWI engaged various levels of line and management staff to create a comprehensive list of skill and knowledge needs. CWI will work with Social Workers, Supervisors, and Managers to prioritize training and coursework based on this list of skill and knowledge needs.

*Key Activity 5:* Develop and implement a mechanism for evaluating the effectiveness of ongoing training. Identify metrics and process for evaluating and improving staff training.

*Progress* – CWI initiated on-line participant evaluations for ongoing training. Working with DCF CQI, CWI will finalize the metrics, and formalize the evaluation and quality improvement process for staff training.

*Key Activity 6:* Develop and implement a mechanism for tracking the 30-hour requirement for ongoing training for social workers.

*Progress* – CWI is working with DCF CQI/OMPA to establish a mechanism for tracking the 30-hour training requirement for SWs.

### **Training and Technical Assistance**

The Department has adopted the Children's Bureau CFSR Onsite Review Instrument (OSRI) and the Online Monitoring System (OMS) for the MA CFSR3 PIP case reviews. Training and technical assistance has been provided by the CB Regional Office. This ensures that the OSRI is being completed according to CB guidelines. Additionally, this process promotes interrater reliability across case reviewers and quality assurance staff. Technical assistance will be sought from the CB Regional Office throughout the PIP period.

### **Data Source and Approach to Measurement**

Massachusetts is reviewing 70 randomly selected cases every 6 month period using the Children's Bureau's CFSR On-Site Review Instrument (OSRI) utilizing the CB's Online Monitoring System (OMS), until the improvement goals are met for each item or until the end of the PIP implementation and non-overlapping period. Cases reviewed between July and December 2017, served as the baseline data.

Forty-two (60%) of the cases will be Out-Of-Home (OOH) cases and 28 (40%) will be In-Home (IH) cases. The cases will be stratified across the five DCF regions, allowing for all eligible cases across the state to have a chance to be randomly selected. Ten (14%) of the 70 cases will be from the Boston Region as this region includes Suffolk County, the largest metropolitan area of the state.

The period under review (PUR) will be at least seven months, beginning with the first day of the sample period and ending the week of the review. Review of individual items will stop when the improvement goal for that item has been reached, or at the end of non-overlapping period following the 2-year PIP implementation period, whichever occurs first.

All cases shall have an initial review by a member of the Continuous Quality Improvement (CQI) Unit. CQI Unit members shall have experience and specialized training in conducting case reviews. A second level review shall also be completed of every case by the Director of the CQI Unit. The CQI Unit is assigned out of the DCF Central Office and is under the senior leadership of the Assistant Commissioner for CQI. In order to eliminate bias, CQI Unit members shall not review cases where they had direct or supervisory involvement. Randomly selected cases with identified conflicts shall be assigned/reassigned to CQI Unit members with no prior history with the case.



The case review will include a review of the FamilyNet/i-FamilyNet record (i.e., SACWIS), review of the paper record as needed, and interviews of case participants as further detailed below.

Case samples will be produced quarterly, on or after the 15th of the month prior to the review quarter, by the MA DCF OMPA Unit. Target children eligible for Out-Of-Home (OOH) review are those children who have been in OOH care for at least 24 hours during the six month sample period. In-Home (IH) cases eligible for review are those cases open and active (open with a Family Assessment and Action Plan or comprehensive assessment/service plan) for at least 45 days during the six month sample period. The first eligible cases, based on the review schedule outlined in the MA CFSR3 PIP Measurement Plan, will be selected from the sample lists. Massachusetts will utilize a spreadsheet to track elimination and eligibility rationales.

The following are valid reasons for case elimination during the sample selection process:

- in-home case open and active for fewer than 45 consecutive days during the PUR,
- in-home case in which any child in the family was in foster care during the PUR,
- out-of-home case in which the target child was in out-of-home care for less than 24 hours during the PUR,
- out-of-home case in which the target child was on a trial home visit (placement at home) during the entire PUR,
- a case in which the target child reached the age of 18 before the PUR,
- a case in which the target child is in the care and responsibility of another state and Massachusetts is providing supervision through an ICPC agreement,
- a case that has already been selected for review and is still open for the same case open episode,
- a case in which the child was placed for the entire PUR in a locked juvenile facility or other placement that does not meet the federal definition of foster care, and
- a case assigned to a DCF Social Worker who already has 3 cases selected for review for baseline measurement (for the baseline cases) or improvement measurement (for the improvement cases).

A case may also be eliminated at any point during the case review if an interview is not able to be conducted with at least one of the following: parent/legal guardian, relative placement during the PUR, or school aged target child. Cases will not be eliminated if one or more of these interviews occur, or if the case circumstances do not allow for any of these interviews. The Department will consult with the Children's Bureau related to any child interviews with school aged children in which the Department believes there is reason to not interview the child, and any case that does not include a parent/guardian. Case elimination decisions related to interview availability will be made on a case by case basis in consultation with the Children's Bureau.

Concerted efforts will be made to interview the following people as part of the case review:

- school-aged target children, if developmentally capable of participating;
- parents/legal guardians who are applicable to at least one item being reviewed;
- all foster parents who cared for the child during the PUR; and
- the DCF Social Worker, or unit Supervisor; if the DCF Social Worker is no longer employed with the agency.

Parents whose rights have been terminated (TPR) may still need to be interviewed. The parent-related questions are NA in cases in which the TPR was before the PUR, therefore no interview of the parent would be required. Interview of a parent whose rights have been terminated would only occur in cases

where the parental rights were terminated during the PUR or the parent remains involved in the child's life. In these cases, the DCF Social Worker will provide input about whether the parent should be interviewed. The decision of whether to interview these parents will be made on a case-by-case basis in consultation with the Children's Bureau.

Concerted efforts to conduct the above interviews include:

- two phone calls at different times of the day and week to all known or possible phone numbers;
- discussion with the assigned DCF Social Worker, unit Supervisor, and/or Area Program Manager (APM) regarding other possible means to make contact with the parent or legal guardian and follow-up on any such information; and
- efforts to encourage the parent/legal guardian to participate in the interview if the parent/legal guardian initially refuses to do so (e.g., elaboration of the purpose and importance of the information to be shared, or offering the use of e-mail to answer the reviewer's questions).

Interviews are conducted in-person whenever possible. If in-person interviews cannot be conducted due to refusal on the part of school aged children/youth, parents/legal guardians, and/or former foster parents; approval for telephonic and/or email communication may be sought from the Children's Bureau. Decisions to permit review of a case without an interview with a child of school-age, the parent/legal guardian, and/or a former foster parent will be made in consultation with the Children's Bureau.

#### **D. CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) STATE PLAN**

To facilitate coordination between the CAPTA State Plan and the title IV-B plan, as required by section 106(b)(2)(A) of CAPTA, as set forth in ACYF-CB-PI-18-01, Massachusetts will submit the 2019 CAPTA Annual Report as a separate document to accompany the 2019 APSR submission.

## **E. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRANSITION TO ADULTHOOD**

DCF administers the Chafee Foster Program for Successful Transitions to Adulthood to support an array of services with the objectives of preparing youth and young adults ages 14-21 for successful transitions to adulthood, including developing permanent connections to caring and committed adults. The components of the Chafee funded services focus on safety and the many facets of well-being. Educational achievement, life skill mastery, and successful community integration with permanent connections to family and/or other caring enduring relationships with adults are the goals for our youth.

The Chafee funded programs are based on the principles of positive youth development and address each of the purpose areas of the Program:

- Help youth transition from dependency to self-sufficiency.
- Help youth receive education, training, and services necessary to obtain employment.
- Help youth prepare for, enter and succeed in post-secondary training and educational institutions.
- Provide personal and emotional support to youth through mentor-type relationships and the promotion of interactions with dedicated adults.
- Provide financial, housing, counseling, employment, education, and other appropriate support services to former foster care youth ages 18-21 to complement their own efforts to achieve self-sufficiency and to ensure that program participants recognize and accept their personal responsibility for preparing for and then making the transition to adulthood.
- Make ETV funds for education and training, including post-secondary education, available to youth who meet eligibility requirements.
- Provide services to youth who, after attaining age 16, have left foster care for kinship guardianship or adoption.
- Ensure that children who are likely to remain in foster care until age 18 have regular, ongoing opportunities to engage in age or developmentally appropriate activities.

The programming has been developed and refined since the submission of the strategic plan with input from a variety of stakeholders including foster youth, former foster youth, DCF staff, provider staff, foster parents, other Massachusetts state agencies, and colleges serving transition age youth and young adults. An enhanced focus on transitional housing supports as well as public and private collaborations, particularly for youth employment, is noted in later sections of the report.

### **Description of Program Design and Delivery**

The Department has designed programming to address the varied service needs of the youth and young adults in the agency's care and/or custody.

#### **Adolescent Outreach Program**

The Adolescent Outreach Program delivers intensive, individualized life skill assessment and training to current foster youth and young adults ages 14-21 from across the state to assist them in developing necessary relationships, skills, and supports to achieve their potential. Per grant guidelines, program services are also available to youth who were guardianed or adopted from DCF after age 16 and to former foster youth who discharged from DCF between ages 18-21.

Outreach services seek to address each of the purpose areas of the Chafee Program: assisting youth with life skill development, access to education, vocational training and other services necessary to obtain employment, support through connections to family, including siblings and lifelong supports.

The services provided are specific to the needs of each individual, including LGBTQ youth and young adults. Staff members participate in training to ensure that our services affirm the cultural, sexual orientation, and gender identities of our youth/young adults. Program staff has provided advocacy on behalf of LGBTQ students, especially with schools and colleges. Dorm room assignments, school or camping trips all require knowledge of the needs of the individual, particularly when the youth/young adult identifies as transgender.

The Outreach staff also assists youth with planning for and succeeding in post-secondary educational settings as well as vocational training programming.

### *Strength-Based Approach*

Outreach Program staff ask the youth what they wish to set as a goal (short and long-term). The strength-based approach and focus on youth engagement with a positive youth development foundation have enabled the staff to successfully engage youth in the service. Feedback from the youth and young adults we serve confirms that our relationship model is a significant factor in the program's success. This same strength-based approach has inspired the Department's internship program as well as the ETV support model. DCF believes that youth and young adults are essential partners in their own goal setting, service planning, and life skill training, a key factor which facilitates their successful transitions into the community. Youth and young adults are encouraged to practice newly acquired skills and utilize problem-solving techniques effectively within a safety net of adult supervision and support. Assisting youth in identifying their educational/vocational goals and developing strategies to realize their potential are critical tasks for program staff.

Youth are also supported in handling mistakes, disappointments, and failures. The ultimate goal is to equip youth to live interdependently within the community, become self-supportive and able to advocate for themselves, and experience adolescent and young adult milestones in a healthy, normative way. Through focused discussions on decision-making/problem-solving, community-based activities and goal-focused skill-building tasks, youth work to develop the skills necessary to cope with the challenges of adulthood and live self-sufficiently in their communities. Adolescent Outreach staff works closely with the DCF primary case managing social workers, foster parents, congregate care providers, community service providers and adults important to the youth to offer opportunities for youth and young adults to learn life skills through practical activities and achievements in their communities – making efforts to normalize their experiences. The Department administers the Chafee-funded Life Skills Support Program which pays for such items as bus passes, laptops, camperships, sport team dues/uniforms, high school senior dues, etc.

The Department's Foster Child Bill of Rights (originally developed in 2009 and updated in 2018), and the Sibling Bill of Rights (2012) support the goals of permanency, positive youth development, and life skills attainment. The Department revised the Permanency Planning Policy in 2013 to align with the Fostering Connections law and encourage permanency, sibling connections, and extended voluntary care for transition age youth to support optimal goal achievement. The staff of the Adolescent Support Services Unit has continued to provide focused training to new staff and technical assistance to staff, providers and foster parents to strengthen understanding and practice of the policy. These opportunities for training and technical assistance will continue. Four new trainings were held in FY18 including Transition Planning; Permanency Strategies for Working with Older Youth.

The PAYA (Preparing Adolescents for Young Adulthood) Life Skills curriculum is now being distributed to providers and foster parents on flash drives to facilitate their life skills preparation work with youth.

### Youth Served

From July 2017 to May 2018, the Outreach staff served 1455 youth and young adults. Of these, 431 youth and young adults received or are presently receiving intensive, weekly individualized life skill assessment to identify their strengths, life skills training to address their needs, as well as assistance for youth in developing and strengthening lifelong connections to caring adults. These services support the youth in mastering the skills they will need to live successfully in the community upon discharge from agency care. The other 1024 youth and young adults received assistance from Outreach staff to assist with job search, education, financial aid/college applications, housing support, MassHealth applications, and referral/resource information. The outcome statistics are derived from the 431 youth/young adults directly served in the program this past year.

The Outreach Program focuses its work with youth/young adults in Departmental foster care, kinship care, those who are receiving Young Adult Support Payments and youth eligible for guardianship/adoption Contracts require that youth/young adults in Comprehensive Foster Care or congregate care are provided similar life skill preparatory services in their placements. To avoid duplication of services, the Outreach workers generally do not work intensively with youth while they are in these placements unless a social worker specifically requests the additional support. Also, per Chafee Program guidelines, youth/young adults who received Outreach services in a previous year may return for intensive or short-term focused services at any time prior to age 21.

Generally, youth/young adults are referred to the Outreach Program by the primary case managing social worker. Outreach workers also identify prospective clients by reviewing the report of youth in placement. Current programming/staffing focuses primarily on youth/young adults ages 16 and older for two reasons: youth younger than age 16 have in the past not demonstrated sustained engagement for weekly life skills meetings and present staffing levels would not currently support the expansion of services to youth ages 14 and 15. However, the Outreach staffs do serve 15-year-olds when their needs may be met by the program. The PAYA life skills curriculum is available to all youth in DCF placements age 14 and older and is now offered on a flash drive.

As in previous years, the majority of youth served in the program are age 17 to 21. The vast majority of youth, 91% of the youth on the active caseload as of May 2018, were open for case management and placement services with DCF. These young adults include self-referrals and those referred to the program by community service agencies, former foster parents, DCF social workers, etc. 9% of the active outreach cases were closed with DCF, and no longer living in DCF placement.

Eligibility for Chafee-funded services remain the same for youth/young adults whether they are open with DCF for placement, former foster youth who left DCF after attaining age 18 or left DCF placement after age 16 for guardianship or adoption. The referrals to the Outreach Program for the youth in guardianship or adoptions are less frequent.

### Staffing and Service Overview

Overall program management is provided by the Director of Adolescent Support Services. The Outreach workers are assigned to an area office. In some instances of smaller offices, the Outreach worker covers 2 offices. The Outreach supervisors cover an assigned region. In FY18 the program experienced unusual turnover, with the retirement of two staff including the Director and Western Regional Supervisor. Four other staff accepted promotional opportunities within the Commonwealth's workforce. Two of the area offices that had Outreach vacancies, had some of the largest adolescent populations in the Commonwealth, which accounts for the decrease in total youth served. The program is presently staffed by 18 Outreach workers and 5 Supervisors. (There are four vacancies at this time.)

The Outreach staff provides weekly service to the youth and young adults on their Active Caseload and contact with the youth/young adults who have moved from the Active Caseload to Tracking for 6 months – to provide any additional support needed. Outreach workers also provide resource information to youth, staff, providers and foster parents. Often Outreach workers will provide short-term services to youth around education, housing, and life skills or any number of other issues that may arise. Since implementation, the program has categorized this work as contact services and has not included these youth in the active or closed caseload count. However, given the extent of the services provided during these contacts – sometimes as much as weekly meetings that continue for many weeks, we are reporting these numbers to capture the full extent of support provided. This past year staff provided 1024 youth with such support.

#### *Determining Eligibility for Benefits and Services (Section 477 (b) (2) (E) of the Act)*

Massachusetts DCF uses the Chafee Program guidelines and criteria for program participation to determine which youth and young adults are eligible for services. DCF also provides Chafee services for eligible youth/young adults from other states who are temporarily living in Massachusetts or attending college here as well as those who have moved to MA after discharging from another state at or after age 18.

#### **Outcomes**

Permanency and self-sufficiency are the two principal objectives of the Adolescent Outreach Program services that are provided to current and former foster youth. This relational model of programming provides a highly individualized approach and accommodates youth with a variety of clinical issues and cognitive functions. This program strengthens the agency's capacity to better prepare youth, age 14-21, for their transitions to adulthood with stronger permanent adult connections and developed life skills.

Since its implementation, the Adolescent Outreach Program has continued to assist youth to reach their life skill goals. Highlights of the most recent statistical review in May 2018 are presented below. The percentages are based on a total of 163 youth/young adults between ages 16-21 who had received program services via weekly intensive service this year and have been discharged from the program.

The achievements over the last few years have been fairly consistent. The youth/young adults who engage in Outreach services are generally successful in reaching their educational and employment goals as well as attaining permanency connections with family and community. Given these positive outcomes, DCF plans to continue the service and obtain ongoing feedback from the youth/young adults for any recommendations for improvement.

#### **Education**

- 79% attained a high school diploma
- 2% attained a GED/HiSET certificate
- 14% were still enrolled in high school
- 3% were enrolled in a HiSET program
- 1% dropped out of school
- 1% enrolled at Job Corps

Among these 132 youth who completed high school or a GED/HiSET ----

- 29% were accepted to a 2-year college
- 13% were accepted to a 4-year college;

- 5% were enrolled in a post-secondary vocational training program
- 9% have been accepted to a 2-year college to begin in the fall;
- 4% have been accepted to a 4-year college to begin in the fall;
- 1% completed a vocational training program at Job Corps

### **Employment**

- 23% of the youth were employed full-time
- 50% part-time
- 7% were working part-time during the school year and full time in the summer
- 3% were not working due to a documented disability

### **Additional Information**

- 1% were participating in an internship or volunteer position in addition to employment
- 19% were enrolled with a Career Center

### **Other Services**

- 2% were receiving Social Security disability benefits
- 40% were receiving state-funded Young Adult Support payments
- 4% were receiving TANF
- 9% were receiving SNAP benefits
- 36% received ETV payments this year
- 35% used the MA Tuition and Fee Waiver
- 25% received state Foster Child Grant funds for full-time post-secondary education
- 4% had utilized a Family Unification Housing Voucher through the Outreach Program.

### **Placement**

- 33% living in their own apartments with or without roommates
- 15% living in college dorms
- 11% had returned to live with their immediate or extended family
- 12% living in DCF foster homes
- 10% living in a kinship foster home
- 3% living in a contracted foster home placement
- 4% living in an independent living program or group care
- 3% renting a room
- 6% living with friends or kin-not paying rent
- <1% were living with former foster parents
- 2% unknown

### **Other Services**

- 4% were prescribed psychotropic medication
- 3% were receiving services from the MA Rehabilitation Commission
- <1% were on probation through the courts
- <1% were receiving substance abuse services
- 2% of youth were receiving services from the Dept. of Mental Health



## **Additional Outcomes**

- 76% had a connection with their birth mother (10% of birth mothers were deceased)
- 50% had a connection to their birth father (10% of birth fathers were deceased)
- 99% of youth have a community support system
- 93% of youth have an identified lifelong connection
- 93% of the youth who had siblings were connected with them
- 98% of the youth have a connection with to kin;

## **Efforts to Provide Developmentally Appropriate Services/Activities for Foster Youth**

The Department understands the importance of providing services and supports to foster youth that is developmentally appropriate and allows the youth to engage in similar activities as their non-foster care peers. The following services/programs were provided to to address this goal.

### **Life Skill Curriculum**

The Department's own life skill curriculum, Preparing Adolescents for Young Adulthood (PAYA), has been successfully used by the foster parents, congregate care programs and comprehensive contracted foster care agencies for more than 20 years to help ensure continuity in the life skills training for youth in out-of-home placement. The components of the PAY A curriculum include five (5) life skills modules, each of which incorporates a number of related skill areas as described below:

- Module 1: Money, Home and Food Management
- Module 2: Personal Care, Health, Safety and Decision-Making
- Module 3: Education, Job Seeking and Job Maintenance
- Module 4: Housing, Transportation, Community Resources, Laws and Recreation
- Module 5: Young Parents Guide – Sexuality, Reproduction, Decision-Making, Pre-Natal Care, Pregnancy, Child Development, Child Safety, Physical Care, Education and Career Planning and Housing

Revisions and updates to the modules have been completed this year, and the curriculum is now more readily available to foster parents, providers and staff on flash drives. For greater accessibility, the curriculum is available electronically to care providers and social workers.

The Adolescent Services staff provided life skills and youth development training statewide this past year. There were 9 PAYA certification trainings across the state this year and 2 trainings on supporting foster youth in post-secondary education. All DCF staff contracted and state agencies, community partners, and foster parents are invited to attend these trainings which address the use of the curriculum and the implementation of the program services. The training presents strategies for working with adolescents around readiness for community living and teaching the wide range of life skills. The practice of the newly acquired life skills well as the inclusion of activities of normalcy whenever possible are essential components of this work with youth. Transition planning and the after-care needs of youth are also addressed in the training.

The Department's Permanency Planning Policy (effective July 1, 2013) requires all Comprehensive Foster Care (IFC) contracted providers and congregate care providers to complete the Youth Readiness Assessment Tool for the same population of youth and young adults specified above. Foster parents, providers, and staff are encouraged to integrate the information and activities

suggested in the modules into the daily learning opportunities for youth in their care. The PAYA incentive program is also available to these youth.

### **PAYA Incentive Program**

Since the implementation of the PAYA Program, the Department has utilized incentives to reward adolescents for their successful completion of a skill module, encourage their development of self-esteem, and empower them to continue their efforts of enhancing their life skills. The youth also learn to set goals for themselves and work toward their achievement – as well as the tangible reward. In order to qualify for an incentive, a youth must master the skills addressed in the individual life skill module. Youth may request \$50 for a life skill related item or a one-time payment of \$500 toward driver education training. In order to increase access to driver's education programs, the PAYA incentive program increased its drivers Ed incentive award from \$300 to \$500. From June 2017 to May 2018, DCF processed 338 requests on behalf of 290 youth participating in the program. The total amount awarded was \$96,170.

### **PAYA Life Skill Groups**

Adolescent Outreach from the Southern Region ran a life skills group focusing on post-secondary education needs for UMass Dartmouth students who are foster youth. The group ran for 8 weeks.

Adolescent Outreach from the Boston Region conducted a life skills/social skills group that included hiking, college tours, an event to view the solar eclipse, and a tour of Foxboro stadium. Youth connected with other youth from foster care and discussed healthy ways to form and engage in communities that fulfilled their needs and helped them to experience normalcy.

### **Life Skills Support Program**

The Department is committed to facilitating youths' connection to school and community activities and utilizes Chafee Program funds as well as state funds for this purpose. The Chafee program funds are used for a variety of activities such as team athletics/uniforms, senior class expenses, SAT prep courses, high school activity fees, short-term transportation, computers, etc. Chafee eligible foster youth including youth adopted or guardianship with kin after age 16 and those youth who discharged from placement at or after age 18-21 may be awarded funds to support their life skill development and transition needs. Between June 2017 and May 2018, DCF awarded 656 foster youth and young adults a life skills payment for a total of \$454,391.

### **DCF Internship Program**

This year, the Department has continued its development of a partnership with private businesses and community-based organizations to provide internship opportunities for DCF youth. The goal of this program is to assist youth to gain beneficial work experience and exposure to careers. The Outreach staff provides on-going supervision, meet with the youth/young adult weekly, assess the youth's current employment skills, and provide support around job readiness.

DCF youth are paid a stipend by the Department (using Chafee funds) for their participation in this program. The average youth initially works 40 hours with an opportunity for a 40-hour extension. The youth receives an \$8 an hour stipend. Some youth go on to be hired by the employer and/or form lasting mentoring relationships. These internships give youth a chance to explore potential career opportunities and encourage youth to set educational and vocational goals, form natural mentor connections with employers and employees in a career/field they are interested in and gain experience in a professional work setting.

During FY 18, 41 youth were matched with internship placements. Of these, 38 youth have completed their internships and 2 youth have ongoing internships.

Of the 38 completed internships:

7% of youth were hired by the employer following the internship;  
21% of participating youth have reported a continued mentor relationships with their employer; and

The Department's partnership with Cantella, Inc., a Boston financial firm has grown over the past two years. The first Career Night for foster youth was held at Cantella's offices in May 2017.

Professionals from a variety of careers including nursing, finance, education, law enforcement, computer science, human resources and the law presented information about their work and answered questions from the youth. The professionals advised the youth on resume development, interview tips, networking and much more. The feedback from the youth was very positive.

Cantella and DCF are planning a second Career Night for June 2018. A new component for this year is the addition of a professional staffing group available to answer any questions on resume writing, interviewing, etc. Two foster youth alumni will also talk about their experience in transitioning to the workforce. There will also be guest speakers to talk about their work in the healthcare, education, criminal justice, and business fields.

### **Employment Efforts**

- Assisting our youth in developing employment skills - including readiness, search, and maintenance - is one of the fundamental goals of the Outreach Program. As of May 2018, 363 youth or 87% of the 413 youth who are receiving or had received Outreach services during this fiscal year were known to be employed either full-time, part time, or with seasonal hours. An additional 6 youth (1.5%) were participating in an internship or were volunteering. The Outreach staff will continue to assist youth in developing work readiness skills and facilitate access to job placement services in FY 18.
- Adolescent Support Services/Outreach staff continues to develop relationship with the local career centers and Youth Works across the state which benefits the youth we serve through improved access to summer jobs, job training programs and funding for vocational training programs. This access to Workforce Investment Act (WIA) funding of vocational training programs is particularly beneficial to youth who attend a post-secondary school that is not Title IV eligible, and, therefore, not covered by the Federal Education and Training Voucher or the MA State Foster Child Grant Program. As of May 2018, 74 youth or 18% the youth who are presently being served or were served by the Outreach Program in FY 18 were also receiving services from a WIA funded Career Center.

### **CFCIP Services Across the State**

The services funded with the Chafee Foster Care Program for Successful Transitions to Adulthood funds are available to eligible youth and young adults across the state. In the area offices where there is not an Adolescent Outreach worker assigned, the Regional Outreach Program Supervisor will provide the access to Chafee funded services and supports.

The Chafee funded services are the same in each of the 5 regions of the state. The particular focus of the services is based on the individual youth/young adult's needs. Former foster youth ages 18-21 are offered the same Chafee services as those under age 18. Former foster youth who leave DCF care

after attaining age 18 may access Outreach services and other Chafee Program funded services, i.e. internships, discharge support, assistance with educational services.

### **Housing Support, Room and Board Assistance, Homelessness Prevention**

Many of the young adults reaching age 18 in DCF custody/care choose to sign a Voluntary Placement Agreement with the agency to continue in care. The state provides the funding for placements for youth/young adults ages 18 and older – either in foster care, or Comprehensive Foster Care (contracted) or independent living programs. In addition, the DCF utilizes the state-funded Young Adult Support Payments to directly provide room and board funding to young adults who are determined by DCF to be responsible and able to safely manage these funds. As of May 2018, there were 1665 young adults age 18 and older in agency voluntary care.

As the Chafee Program funds cannot be used to support the room and board costs for foster youth in agency custody/care, and DCF provides voluntary care and placement for so many young adults age 18 and older, the Department uses less than 30% of its allotment of the federal Chafee Foster Care Independence Program for room and board payments. However, DCF utilizes Chafee funds for the Discharge Support Program.

The Discharge Support Program, managed by the Adolescent Support Services Unit of DCF, supports start-up costs (i.e. first month's rent, security deposit, essential furniture, household items, bedding, etc.) for young adults who have left agency care and are in need of such support. These are the expenses that DCF considers room and board payments for former foster youth. Transportation expenses are also included in the discharge support category. This past year from June 2017 to May 2018 (to date) – 63 young adults received discharge payments for housing and related expenses totaling \$71,340. Funds may be paid directly to the young adult or to the landlord. If the young adult's behaviors are such that providing money without his/her willingness to work with Outreach staff would likely jeopardize the youth's safety, then the young adult is informed of the program and given contact information so that he/she may call at any time and request assistance.

Given the Department's focus on achieving permanency for our children and youth, many youths are leaving care/custody to return home prior to age 18 –making them ineligible for the Discharge Support funds. Also, in July 2013 the DCF modified its Permanency Planning Policy to broaden the criteria for youth/young adults to remain in voluntary care beyond age 18 – up to age 22, we are seeing more young adults leave care at or after age 21 – making them ineligible for the Chafee Discharge Support funds. An increase in the age for eligibility for Chafee funds would be beneficial to these young adults as they transition into the community.

Below is a summary of the housing supports offered through state and federal housing funds, DCF, as well as donated supports.

- *Voluntary Placement Agreement and Options* - The Department's Permanency Planning Policy mirrors the Fostering Connections guidelines for continuation in voluntary care. DCF encourages youth who attain age 18 in custody or care to request continued care with the Department to pursue their educational and/vocational training and access the services they need to reach their potential as participating citizens. The Voluntary Placement Agreement (VPA) that both the youth and the agency staff must sign has been modified to allow for agreements between the young adult and DCF and to specify the expectations of continued care. This new form also includes reference to the Health Care Proxy and the annual credit reviews.

As of May 2018, there were 1665 young adults age 18 and older in DCF placement settings. In addition to foster care and congregate care placements for youth ages 18 and older, the Department provides Young Adult Support Payments directly to young adults that DCF staffs believe are responsible and able to live in an approved placement (i.e. college dormitory, apartment with or without roommates). Via this provision, young adults receive a stipend to fund their living costs and daily expenses. These youth are most often either attending an educational program or are training for a job/career. DCF social workers provide case management services. The area office Adolescent Outreach Worker may assist with supervision and support. As of May 2018, there were 755 young adults statewide who were receiving Young Adult Support Payments.

The supports available for post-secondary education and vocational training from both the federal government and the state are certainly an incentive for youth to pursue their educational goals. Youth are encouraged to stay in school to achieve their diplomas, GED certificates or to pursue post-secondary education or vocational training. At this same time, the agency has been working to re-connect youth to their families when safe and appropriate to do so and to ensure that youth have identified enduring relationships with caring and responsible adults prior to their discharge. Seventy-five (75) percent of the youth served and discharged from in the Outreach Program this year have connections with their birth mothers and fifty (50) percent have connections with their birth fathers. 98% had a connection with kin. 93% had connections with siblings.

- *Sisters of Charity* - DCF has continued its partnership with the Sisters of Charity for more than 12 years to provide housing for female students age 18 and older who are currently or formerly in the care of DCF and are now pursuing post-secondary studies. The Bachand Residence for Girls is an ideal example of collaboration and the valuable support that caring members of the community can offer to young adults preparing to transition to adulthood. The Sisters are responding to the community need for safe, stable housing for DCF post-secondary students who are attending community college or vocational training programs which do not offer housing accommodations. The Sisters of Charity rent DCF students private rooms in a previously vacant wing of their building. In addition to their own rooms, the young women have a kitchen and dining area, a lounge, computer room, laundry and storage area. The Department provides a monthly stipend to these students to assist with their rent and living expenses. The students are only accepted as referrals from the DCF. An assigned staff person works closely with the residents and the Sisters as the program changes/adapts to fit the needs of these adolescents. This past year, 12 young women have been residents at Bachand Hall.
- *Paige Street Apartments* - The Lowell Area office of DCF has also collaborated with community housing advocates and a developer to create a housing program for young men in the Lowell area, Paige Street Apartments. The program includes 10 one-bedroom apartments. 9 of the apartments are reserved for DCF young adults ages 18 and older in voluntary care and receiving Young Adult Support Payments, and one room is for the Resident Advisor (RA). The apartments are very affordable as the group was able to secure project-based Section 8 vouchers for the units. The young adults pay 30% of their income for rent. They are responsible for their own use of electricity and cable. The building also has a common area in the basement for the residents to gather and a location for the young adults to meet with their social workers. The expectation is that the residents will attend college or a vocational training program. The program has been successful with an ongoing waiting list.
- *Outreach* - Outreach staff members maintain contact with local/regional transitional living programs and shelters, including those funded via the federal Runaway and Homeless Youth grants to identify youth/young adults who may be eligible for our Chafee funded services.

- *Family Unification Program* - Since 2009, DCF and the MA Department of Housing and Community Development have jointly applied to HUD for Family Unification Program (FUP) vouchers— a portion of which has been assigned for "transition age" youth. These vouchers are limited to an 18 month period, unlike the standard FUP vouchers. Since 2009, we have maintained 28 vouchers for the transition age youth. Outreach staff is assigned to work with each recipient to support them with educational pursuits, money management, employment, housing and other needs that may arise. The young adults must be eligible for Chafee funding; however, they do not have to be in the voluntary care of DCF. This is one of the reasons DHCD and DCF developed the program described below.

### **Youth Transitioning to Success Program (YTTSP)**

The Department of Housing and Community Development and DCF partnered to develop the Youth Transitioning to Success Program (YTTSP) following feedback from focus groups of young adults who participated in the Family Unification Program (FUP) for transition age youth as well as input from DCF Outreach staff. This program was implemented in 2011 and designed to assist youth who have been successful with their FUP voucher. Some of the features are subsidized rent; a special needs account for approved emergency expenses as well as an escrow account to assist youth to save for the future. A significant difference from the Family Unification Program is the rental structure. Participants receive rental assistance based on the fair market value of the area where they will be residing. The young adult will be responsible for paying and differential payment in rent, and all utilities. Rent is not dependent upon the participant's income, allowing her/him to save money. The first year 80% of the rent is paid for the young adult; 65% is paid in year two, and 50% is paid in year three.

The participants are required to be enrolled in a post-secondary degree program/vocational training program and to work at least 12 hours weekly. This YTTSP Program also includes assigned Outreach workers to assist the young adults with managing the responsibilities of money management, education, employment and housing.

This year the program served 2 young adults. Both are working and in school. Seven additional youth are pursuing the newly developed YTTSP College Track Program. In this program, young adults who are full-time college students can access YTTSP directly, without having to first enter the FUP-AOP program. Criteria for entry to this program is demonstrated ability and commitment to pursue a full-time course load in college and the need for assistance with housing stability. Similar to FUP and Non-College Track YTTSP, students meet weekly with an Adolescent Outreach Worker and pursue academic, social, employment, and fiscal literacy goals.

### *National Youth in Transition Database (NYTD)*

Massachusetts is scheduled to participate during the third round of NYTD reviews. The state has met the compliance standards since the implementation of the program. The staff who participate with the NYTD effort, the Youth Advisory Boards, agency management team and other stakeholders have been apprised of the review schedule.

- DCF has shared the NYTD data with statewide managers and executive leadership to continue assessment of the implementation of the Permanency Planning Policy and our efforts to support permanency for all foster youth. Discussions continue regarding all the data components including the youth report surveys.
- DCF has shared the NYTD survey outcomes and information with the Massachusetts Alliance for Families (MAFF), the foster/adoptive advocacy association that is dedicated to enhancing the quality of life for foster children and foster families. Discussions continue on strategies to maintain focus and

positive outcomes for permanency, education, employment readiness/work experience and overall well-being for our foster youth.

- NYTD outcome data has been shared with members of the Youth Advisory Boards since the initial data was available. In 2017, particular attention was given to NYTD process and data at the DCF Youth Leadership Academy. Staff continues to ask these youth leaders for their suggestions for strategies for engaging youth/young adults to complete the surveys. They have also helped staff determine which survey questions needed more explanation to avoid misunderstanding and incorrect responses.
- Discussions of the NYTD requirement and agency efforts to collect information on all the services delivered to youth ages 14 and older have been ongoing with staff, managers, providers, foster parents, youth leaders and other stakeholders. Greater emphasis on the data entry of services delivered to youth – documentation in the NYTD Window on the iFamilyNet system is a goal. The current data is not capturing all the support services delivered to the adolescents in the federally designated “served population.” Efforts will continue to increase the entry of all services provided.
- DCF has continued its effort to improve NYTD data collection using a variety of opportunities (provider meetings, staff meetings, staff and provider trainings) to inform and remind staff, foster parents and providers of the importance of assisting the agency in accessing the youth/young adults to administer the surveys. Outcome data has been shared and discussed.

#### Highlights of Survey Responses of 192 Youth Turning Age 19 in FY2016

- 94% of the youth responded that they had at least one adult in their lives (other than their DCF social worker) to whom they could go to for advice and emotional support;
- 65% of the youth reported that they were enrolled in an educational program;
- 31% of the youth reported that they had a part-time job;
- 13% of the youth reported that they had a full-time job.

#### **Collaboration with Youth and Other Programs**

On an ongoing basis, the Department seeks input in planning and refining CFCIP services from the members of the Regional Youth Advisory Boards and the Massachusetts Network of Foster Care Alumni. Members of the Youth Boards and the Alumni Association also participate in CSFR reviews and NYTD efforts. This year, planning meetings and networking events have taken place between the DCF Youth Advisory Board and members of the Massachusetts Network of Foster Care Alumni. The group has formed a Joint Youth Advisory Committee so that professional adults from the Alumni Network and Youth Advisory Board Members who have recently experienced care can support the work of one another and jointly assist DCF to strengthen its programs.

#### Youth Advisory Boards

The Department’s Youth Advisory Board has been active for more than 18 years. Presently, there are 41 members of the Regional Youth Advisory Boards who are committed to promoting change for future foster youth through their voice, advocacy, and action. They provide recommendations to the Department on services, policy and practice. Additionally, they want to ensure that foster youth are known for their strengths, achievements, goals and not labeled negatively.

The Regional Youth Advisory Boards generally meet monthly, providing a medium for youth in out-of-home placement to voice their concerns and offer suggestions to the agency on issues facing youth in care. Delegates from each Regional Board sit on the Central Office Advisory Board; they are statewide representatives for their peers’ interests, concerns, and questions. The agenda topics for each meeting are

jointly developed by the Board members based upon their own ideas/concerns or those of the youth they represent and by DCF administration – often seeking youth input on policy, programming, etc.

The youth leadership achievements this year and future planned activities are described below:

- Board members participate in the area office Youth Panels – meeting with foster youth turning age 18 who are considering signing on with DCF under voluntary care. The Board members discuss the value of continuing in care after age 18, setting goals and working to achieve them. The Panel also meets with youth who have discharged from care and are requesting to return. The Board members function as youth advocates supporting them through the meeting. They assist offices in making decisions, offer recommendations, and inform the youth/young adults of the Chafee services/funding available to them.
- The Youth Advisory Boards are often asked to offer feedback on a number of issues relevant to the Department. This year they were asked to support recruitment and training efforts for adolescent foster parents.
- Board members assisted in the planning and delivery of the 2017 Youth Leadership Academy which took place over three days in July and August 2017.
- YAB members advocated with local cities/towns for summer jobs and internships for foster youth.
- The Central Region Board members assembled 50 care bags for teenagers that come into DCF care. These care bags contained personal hygiene items, comfort items, clothing items, art supplies and books. They continue to identify funders/donations and expect to grow this project during the next year.
- Youth presented at a statewide area leadership meeting on the importance of permanent connections to their well-being and a successful transition from care.
- DCF maintains its participation in the New England Youth Collaborative – a regional youth group dedicated to improving the services/resources and outcomes for foster youth. Each New England state has 2 youth representatives. This year the group has been working on methods for sharing information about normalcy initiatives in child welfare and has developed a toolkit for states.
- DCF Youth Advisory Board members participated in the production of the annual graduation video that was presented at the Jordan's Furniture Youth Achievement Celebration this May 6th, 2018. The video is also used for training new social work staff, foster parents and as a recruitment tool for adoptive and foster parents.
- Members of all the regional Boards continue to participate in MAPP trainings and regional recruitment events, sharing their experiences to help train and recruit Foster and Adoptive families. Board members also participated in the DCF Adoption Option event this past September to assist in recruiting foster/adoptive homes for transition age youth.
- Members assisted with the Education Open Houses at the area offices for younger foster youth interested in post-secondary education.
- Youth continue to participate in trainings, including Pre-Service training for social workers and supervisors to talk about the needs of youth in DCF care/custody.



- Board members have given back to their communities by volunteering at homeless shelters, nursing homes and hosting food drives.
- Board members have been very helpful in assisting DCF with strategies for reaching out to foster youth regarding the NYTD surveys.
- Members have provided feedback to the state Department of Housing and Community Development on the current subsidized and supportive housing programs developed in partnership with DCF. One positive outcome has been the creation of a third housing program for young adults attending college full time – the Youth Transitioning to Success Program – College Track.
- The Department’s teen newsletter, *The Wave*, has continued to provide a voice for youth in care and is an effective means of informing youth of the opportunities/services available to them both in the agency and the community. *The Wave* is available on the DCF Intranet.

**Continuation of all these activities is planned for FY 19**

*The Massachusetts Network of Foster Care Alumni*

The Massachusetts Network of Foster Care Alumni, initiated and funded through DCF, has continued to grow this past year. Its purpose is to illuminate the diverse needs of alumni of foster care in the state by advocating for appropriate services and supports, by promoting a healthy peer community, and by developing opportunities for service and leadership. The Network's Advisory Board has a strong representation of foster care alumni. The bylaws require 51 percent of the Board have experience in foster care. With its 501c3 certification, the Association is better positioned to raise funds and eventually become independent of agency funding. The seventh annual Thanksgiving Dinner for foster youth alumni was held on November 16 this fiscal year - offering alumni the opportunity to network with one another and learn more about the opportunities the Massachusetts NFCA offers. The eighth annual dinner will be held again this year. Each year the membership grows and the activities expand across the state providing foster care alumni many opportunities to connect with one another and benefit from the community of support. This June, the MA NFCA is sponsoring its second annual Walk-A-Thon to expand awareness and raise funds to support additional group activities.

**Collaboration with Other Private and Public Agencies**

- DCF partnered with Bridge Over Troubled Waters this year to support the Homeless Youth Special Populations Grant. Funding was awarded for the housing program to serve former foster youth and/or foster youth exiting DCF care that chose not to continue with DCF placement on a voluntary basis. Outreach staff partnered with Bridge Over Troubled Waters to assist residents to access CFCIP services.
- DCF continues its collaboration with the state Department of Housing and Community Development to manage the Family Unification Program Vouchers (FUP) for housing for transition age youth and the newer program, the Youth Transitioning to Success Program (YTTSP) (Fuller descriptions can be found in the housing section.) To date, we have served or are presently serving 178 young adults with FUP housing vouchers and 62 young adults in the YTTSP.
- The collaboration between the DCF and the MassHealth has supported Massachusetts’ utilization of the federal Chafee Provision allowing states to provide Medicaid coverage for youth who discharge

from placement at or after age 18. This benefit is provided up until their 21<sup>st</sup> birthday without re-application. DCF and MassHealth have been working to facilitate the continuation of Medicaid coverage to eligible young adults so that they do not experience a gap in coverage from “in placement” Mass Health to their adult Medicaid benefit (up to 26). DCF and MassHealth developed an informational flyer this year to share with young adults, DCF staff, foster parents and providers/advocates to assist in streamlining the application process. DCF also provides outreach and education to foster parents, young adults, staff and providers to identify young adults who are eligible for MassHealth, but no longer in agency care. DCF has provided information about the FFC eligibility in its Youth Newsletter, Higher Education Newsletter, and foster parent newsletter. Outreach staffs also share this information with young adults as they administer the NYTD survey. As these individuals are identified, DCF Outreach staff members follow their applications through the approval process. MassHealth has two staff to facilitate processing of these applications and address any problems that arise. DCF now employs medical social workers to assist with care coordination.

- DCF Adolescent Services staff members have continued to work collaboratively with staff at the Department of Higher Education, the state universities, the 2-year public colleges as well as the staff of the campuses of the University of MA. These collaborations have been very helpful in resolving issues on behalf of our shared students. DCF Adolescent Support Service staff have continued their presence on campuses and work in partnership with higher education (in the areas of support services, financial aid, registrar, etc.) to enhance the availability of and access to needed resources for our students. Outreach to the private colleges and post-secondary vocational training programs our youth attend have been ongoing. Twelve advising events were held on 11 campuses this past academic year. More detail is provided in the ETV section.
- DCF also works closely with the state Department of Transitional Assistance to assist transition-age youth access SNAP benefits and Transitional Aid to Families with Dependent Children (TAFDC) for parents whose children are not in the custody/care of DCF and may qualify.
- DCF works collaboratively with the state Department of Mental Health (DMH) and the Department of Public Health (DPH) to facilitate access to services for youth and young adults with mental health and/or substance abuse histories. The Department's Caring Together Initiative allows DCF to contract for congregate care and support services jointly with DMH. DCF has also extended this partnership model to contracting for comprehensive foster care with the Department of Youth Services.
- DCF will continue to participate in the Advisory Board of the STAY (Success for Transition Age Youth and Young Adults) Project of the MA Department of Mental Health, which is funded through a SAMHSA Grant. The purpose of this grant is to engage youth/young adults with a serious mental health disturbance (SED) and to promote age-appropriate services.
- The Outreach Program staff routinely refers youth/young adults to community-based agencies for health care, pregnancy prevention and STD prevention and treatment. Staff members receive trainings from the state Department of Public Health, Planned Parenthood League, and other specialists on how to help youth/young adults care for themselves and make informed decisions about their sexual behaviors.
- DCF Adolescent Outreach Workers are continuing their communications with local shelters in an effort to identify any young adults who may qualify for DCF and/or Chafee services. Outreach workers reach out to local shelter programs to ask staff to call them if they identify a young adult who identifies as a former foster youth. Our goal is to connect with the young adult to offer Outreach services and other services as appropriate.

- DCF's 29 Education Coordinators are affiliated with each of our geographical area offices to provide assistance, training and support to workers and families for all education and special education related concerns that impact our children and youth. Their focus includes school enrollment, school engagement and supporting transitions for youth who are hospitalized or returning from congregate care placements. They fulfill a critical role in fostering educational stability and progress for our youth.
- DCF Outreach Program staff members have continued their efforts to strengthen connections with Workforce Investment Act (WIA) funded agencies and career centers with the goal of accessing services and supports for our foster youth. Targeted outreach to foster youth for summer job hiring continues.
- DCF's partnership with a large local business, Jordan's Furniture, has grown significantly over the last five years. In an effort to support youth moving into their first apartments, Jordan's Furniture provides gift cards so the youth can buy furniture. In FY 18, Jordan's Furniture assisted 15 youth each with \$800 in gift cards for a total donation of \$12,000.
- This year's Youth Achievement Celebration honoring youth who graduated from high school, college, a vocational training program or received a HiSET certificate was held on May 6<sup>th</sup> once again at Jordan's Furniture Store in Reading, MA. More than 500 graduates and their guests were invited to celebrate their educational achievements, to share food, activities and a movie. The graduates were also given gifts to commemorate their accomplishments. The DCF Regions will also hold local celebrations for their graduates during the months of May and June at local venues.
- The MA Department of Youth Services (juvenile justice) and DCF have continued the collaboration to identify transitioning youth connected with both agencies who are eligible for Chafee and/or state-funded resources, such as Discharge Support funds, Tuition and Fee Waivers, Education and Training Vouchers, etc. Joint meetings have been held to discuss transition planning for youth served by both agencies.
- More than 200 foster youth, foster/adoptive parents, providers and staff attended this year's statewide College Fair on April 18<sup>th</sup>. Attendees learn about the opportunities of post-secondary education as well as the state and federal financial support available. Representatives from more than 28 colleges and post-secondary educational programs attended along with a representative from the Massachusetts Educational Financing Authority and the Massachusetts Education and Career Opportunities, Inc. Also invited were a select group of private colleges that have committed to providing supportive services to foster care students. Colleges and programs were able to highlight courses of study as well as support programs available to foster youth.

### Human Trafficking

- DCF Adolescent Outreach staff participates in the DCF leadership group on Commercial Exploitation of Children and Human Trafficking and works through this group on policy changes relative to children missing from care and children classified as CSEC who are also eligible for Chafee funded services. Staff has also assisted with an intranet page on the topic and developing a Transition Age Youth Toolkit for community service providers who work with youth and young adults who have experienced sexual exploitation.
- Adolescent staff have participated in the Training of Trainers on the Commercial Sexual Exploitation and have presented at the Outreach Program staff meeting to improve Outreach workers'

understanding of the issue, ability to identify those youth/young adults possibly at risk, familiarity with the statute and related policy (51 A and DA referral), and ability to facilitate access to appropriate services.

- The Department's PAYA Life Skills curriculum addresses the dangers of the domestic violence, dating violence, victimization and human trafficking. The focus on self-esteem building, self-care and personal goal setting is also the approach that the Adolescent Outreach staff use with their youth.

#### Training and Technical Assistance

- On a regular basis, Adolescent Services staff provided life skills and youth development trainings statewide. There were nine PAYA certification trainings (teaching participants how to teach youth life skills) across the state this year and three trainings on supporting foster youth in post-secondary education. All DCF staff, contracted agencies, appropriate other state agencies, community partners, and foster parents are invited to attend these trainings.
- Staff partnered with the Massachusetts Child Welfare Training Institute to train new DCF social workers on several topics.
  - A “cradle to career” approach for child consumers through a trained and empowered workforce. Adolescent Unit staff spoke to the issues of helping foster youth with planning for and executing a post-secondary plan for education, work, or vocational training.
  - Addressing the impact of trauma on child development to help social workers to consider this impact on the functioning of young adults as they face the challenges of adolescence and young adulthood and pursue post-secondary education/training.
- Adolescent Unit staff provided a presentation about child welfare resources for post-secondary education at the 2017 DCF Grandparents Conference for grandparents who are raising their grandchildren in the foster care system. Information and resources about academic planning and support as well as agency contacts available for consultation were shared with grandparents of foster youth.
- The Adolescent Support Services staff also presented 3 trainings for staff, foster parents and providers on post-secondary educational support programs that are available to DCF foster youth and strategies for assisting students to achieve their goals.
- Outreach staff provide resource information and technical assistance to all 29 DCF area offices, many congregate care and independent living programs, foster parent support groups and youth advocacy agencies, including a review of all the available adolescent resources and youth development activities such as the expansion of MassHealth coverage for youth discharging from DCF after age 18 to age 26 through the Affordable Care Act, the Life Skills Support Program, Discharge Support Program, Foster Child Tuition Waivers, the ETV Program, transitional living options and subsidized housing through the FUP-AOP, Peer Leadership trainings, statewide and regional Youth Recognition Dinners, the MA Network of Foster Care Alumni and other support services.

- In August 2017, DCF staff provided a one to one consultation service for DCF Advisory Board Members and youth leaders who are college students in order to do advance academic, career, and financial planning for the 17-18 academic year.
- Outreach staff provided technical assistance this year statewide to the Department's contracted foster care agencies, congregate care and independent living programs in order to increase the competency of care providers in assisting youth/young adults to learn life skills and plan for, pursue and persist in post-secondary education and vocational training.
- Outreach staff issued a newsletter for professionals and supporters of college-age foster youth. The publication includes training opportunities and dates; resource and referral information for professionals supporting youth in post-secondary education.
- DCF staff is collaborating with Ascentria Care Alliance to assist DCF youth who have immigration/refugee status with post-secondary education needs.
- *Transition Planning with Adolescents in Out of Home Placement* - This training assisted social workers and their supervisors to work with youth to create and document effective transition plans in accordance with Permanency Planning Policy. Utilizing the Young Adult Readiness Assessment Tool, PAYA services, and accessing youth development services and funds available to youth and young adults were reviewed.
- *Young Adult Support Payments* - Social Workers gained skills to support youth who receive young adult support payments to budget and maximize their housing resources.
- *Permanency and the Young Adult* - This training helped social workers and supervisors understand the APPLA goal and how to continue to pursue permanency for older adolescents and young adults in care.
- *PAYA for DCF staff* - This training will help DCF staff understand the PAYA curriculum and its role in transition planning. Agency expectations for congregate care and foster care service providers were reviewed and Participants learned how to identify effective life skills training work and engage youth and their caregivers in the work practice.
- *Foster Youth and Post-Secondary Attainment* - This training focused on the basics of the college planning process as well as alternative paths such as vocational training and certification. Information related to academic and social-emotional planning as well as financial aid and financial literacy for post-secondary students were reviewed.

### **Training Planned for FY 2018**

Based on the success of the newly developed trainings listed above, Adolescent Services staff will provide each training at least one more time through the Massachusetts Child Welfare Training Institute. As a follow up to these trainings, Adolescent Outreach Workers have attended area office staff meetings to address follow up questions and provide practical support in the content areas.

### **Consultation with Tribes (section 477(b)(3)(G))**

Adolescent Outreach in the Southeast Region continues to provide support and consultation on issues related to transition age youth to the Mashpee Wampanoag Tribe and the Aquinnah Wampanoag Tribe. Training on Adolescent Outreach Services is made available to Tribal youth in placement, including all the Chafee funded services and the educational supports available through the Education and Training Voucher Program as well as the state-funded supports is planned for 2018. Updated referral forms and applications are regularly made available to tribal staff who assist the transition age population.

The Outreach Program will continue to work with Tribal officials from the Mashpee Wampanoag Tribe and the Aquinnah Wampanoag Tribe and to identify and serve Tribal adolescents in placement.

### **Post-Secondary Education**

- For more than a decade, the Department has hosted Statewide and Regional Youth Recognition Dinners to acknowledge the achievements of foster youth who graduated from high school, college, a vocational training program or received a GED/HiSET. This year the academic/vocational achievements of 554 youth were recognized (446 graduating from high school, 17 youths achieving their GED certificate, 30 youth receiving a post-secondary vocational certification, 43 youth graduating with a Bachelor's degree and 18 with an Associate Degree.) The Jordan's Furniture Store is a primary sponsor providing the space for the largest recognition event – statewide - with gifts for all the youth and a free movie in the IMAX Theater. Private local donors also help to sponsor the event.
- The Department has issued 357 State College Tuition and Fee Waivers to current or former DCF foster youth in the last 12 months. In June 2008, the MA legislature expanded the waiver program to cover fees in addition to tuition. The eligibility for the waiver was also expanded in 2008 so that DCF foster youth who are or were in agency custody and were not able to return home to age 18 are eligible for this benefit at the Massachusetts state two and four year colleges and all University of Massachusetts campuses. Youth who were adopted or placed in a guardianship home through DCF are also eligible for the same waiver of tuition and fees.
- In the academic year 2017-2018, DCF referred 488 youth to the Massachusetts Board of Higher Education for consideration of the Foster Child Grant Program to assist financially with their college/vocational training needs. The Board makes the final determination of eligibility. Awards are based on financial need and student status, including full-time attendance, MA residency, and eligible educational program. The Massachusetts Foster Child Grant is limited to students whose custody status was protective.
- Adolescent Support Services Unit staff presented Educational/Vocational Fairs in 28 of 29 area office for youth, foster parents, congregate care providers, and DCF staff. Outreach staff presented information on financial aid, assisted youth in completing their FAFSA applications and discussed the many options of college/vocational training opportunities available to foster youth. Foster youth who were currently attending college were also present to answer youths' questions. This is a resource that has been provided for more than ten years and will continue.
- Young adults who leave DCF care after the age 18, but prior to age 21, are eligible for the Chafee funded services and the Education and Training Vouchers described below. The vast majority are also eligible for the state-funded Tuition and Fee Waivers. The Adolescent Outreach workers are

fundamental in assisting these young adults to access the needed services including those to address their educational/vocational needs.

- Updated information on post-secondary education funding including scholarships for transition age foster youth is made available to social workers and internal youth partners via the DCF Social Intranet and an electronic shared resource file available to staff via an internal shared drive. Through this technology, updates can be made in real time as scholarship information and other information relative to post-secondary planning and support becomes available.
- The DCF website, [www.mass.gov/dcf](http://www.mass.gov/dcf), provides an online public resource for students and foster parents and partners to access up to date post-secondary and higher education financial benefits and support programs. The information is found under the Adolescent Support Services tab. ETV social workers update and maintain the education information provided via the website.

## **EDUCATION AND TRAINING VOUCHER PROGRAM**

### **Accomplishments**

- Massachusetts awarded 481 Education and Training Vouchers in the academic year 2017-2018.
  - 48 students who applied for ETV awards and had to be denied as they were age 23 upon their first application or they were not eligible due to custody type.
  - There were 226 new vouchers and 255 ongoing vouchers this year; 53% of the vouchers awarded this year were for returning students. The students who received an ETV award this year attended 99 different colleges, universities and vocational programs in 17 states.
  - Of the 481 recipients, 426 (88%) students were enrolled full-time, and 55 students (12%) were enrolled part-time.
- In an effort to serve more students and to respond to feedback provided by ETV recipients, Education and Training Specialists held individual meetings with students and their social workers. . In addition to these private consultations, twelve college advising events were held on 11 campuses this past academic year. More than 200 foster youth were served through these events via attending an advising day, meeting privately with ETV Social Workers or through advocacy on their behalf to college financial aid or student support personnel. Students were assisted with financial planning, housing, academic progress and social/emotional needs. Group advising also provided an opportunity for interested students to meet peer mentors from foster care who attend the same academic institutions.
- DCF staff provided workshops for foster youth on understanding financial aid. Students reviewed financial aid award letters and were given information and tools to understand grants, loans, and scholarships. They participated in a cost comparison exercise and decision- making skills exercise. Feedback on the workshop evaluation was very positive from the participants.
- The Commonwealth of Massachusetts has developed a Single Point of Contact Network (SPOC) on college campuses. These individuals are staff volunteers from varying departments on college campuses that will work with students at risk of not completing school due to challenges that are not - academic in nature. Together DCF staff and the campus SPOCs assist foster youth with needed support and resources.
- The Department hosted its 11<sup>th</sup> annual statewide College Fair on April 18, 2017. The event was attended by over 200 participants including foster youth, foster parents, agency and congregate care

program staff. There were representatives from more than 30 colleges/universities, and vocational trainings programs as well as organizations that included the MA Educational Finance Authority (MEFA), the Massachusetts Network of Foster Care Alumni and the Massachusetts Education and Career Opportunities Inc. Also invited were a select group of private colleges that have committed to providing supportive services to foster care students and community-based post-secondary support programs. Colleges and programs were able to highlight courses of study as well as support programs available to foster youth.

- DCF continues to publish a newsletter for ETV student recipients to invite input from college students and educates readers on resources and events geared toward post-secondary success. Guidance from the Youth Advisory Board members and DCF college students will continue to be solicited to ensure the information is relevant to the needs of the students and presented in a manner that will engage students.
- In person meetings and conference calls of Advisory Board Members and other college students interested in providing guidance and feedback to the ETV program took place in the summer of 2017

The ETV Program funding is particularly helpful to the DCF foster youth who were not in protective custody (as they are not presently eligible for the state-funded Foster Child Grant) and to those youth who were adopted from foster care or youth who were placed in a guardianship with kin after attaining age 16. The ETV Program has provided significant post-secondary assistance to eligible foster and adopted youth and has assisted them with making more manageable and safer transitions to adult living.

See chart below:

<b>2017-2018 ETV Program Information</b>	
Total Recipients for 2017-2018	<b>481</b>
<b>Breakdown of Total Recipients for 2017-2018</b>	
<b>New Recipients and Ongoing Recipients</b>	
2018 (NEW)	<b>226</b>
2017, 2018	<b>105</b>
2016, 2017, 2018	<b>68</b>
2015, 2016, 2017, 2018	<b>56</b>
2014, 2015, 2016, 2017, 2018	<b>16</b>
2016, 2018	<b>4</b>
2015, 2017, 2018	<b>2</b>
2015, 2018	<b>1</b>
2015, 2016, 2018	<b>1</b>
2013, 2016, 2017, 2018	<b>1</b>
2013, 2014, 2015, 2018	<b>1</b>



Total	<b>481</b>
<b>Number of Universities/Colleges/Vocational attended by 481 ETV Recipients</b>	<b>99</b>
Number of States	<b>17</b>
<b>Enrollment Status of 481 ETV Recipients</b>	
Full-Time	<b>426</b>
Part-Time	<b>55</b>
4 Year Public	<b>212</b>
2 Year Public	<b>180</b>
4 Year Private	<b>68</b>
2 Year Private	<b>6</b>
Vocational Training	<b>15</b>
Students enrolled not awarded ETV @ age 23	<b>48</b>
under 23- other (age/custody)	<b>15</b>

**The goals for the ETV Program are as follows:**

- Providing all eligible students with support via the ETV Program and other means of assistance. Providing academic and personal support to foster youth pursuing post-secondary education;
- Maximizing all state and federal academic and financial resources available to students involved with DCF;
- Incorporating initiatives to connect youth with adult and peer mentors at academic institutions and with support staff on campus and at DCF;
- Educating the DCF workforce and its partners that serve adolescents on the importance of adequate college planning and preparation as well as the need for intensive support while youth are attending post-secondary educational programs;
- Increasing education and capacity of college staff who work in student support services to help them understand the needs of foster youth who are pursuing post-secondary education;
- Encouraging participants of the ETV Program to join the DCF Youth Advisory Board and the MA Network of Foster Care Alumni;

- Continuing focus groups of ETV recipients to obtain feedback on program services and recommendations for improvements, and
- Increasing and sustaining representation of ETV consumers on the DCF Youth Advisory Board and Joint Youth Advisory Committee.

### **Collaboration**

- DCF has and will continue its membership on the Massachusetts Department of Education's Financial Aid Advisory Board to ensure that foster care youth are represented when financial aid policy and practice is developed at Massachusetts colleges.
- DCF staff met on campus with financial aid staff of Massachusetts public colleges for the purposes of programmatic planning as well as a review of current financial aid packaging for enrolled foster youth
- DCF staff partnered again with TRIO staff at community colleges in 5 regions across Massachusetts to develop processes to increase referral to Trio and collaboration between the DCF and TRIO programs.
- DCF staff continued to provide support to the University of Massachusetts Boston UAccess Program. This office is designed to provide support and referral for students who are facing social, emotional, and financial challenges at the university. DCF staff work to facilitate services offered by the UAccess Program to foster care students enrolled at UMASS.
- DCF staff continues to serve as advisory board members on the Statewide Network on Homeless College Students and the Massachusetts Board of Higher Education Financial Aid Advisory Board. On these Boards, DCF staff ensures that current state programming and resources are inclusive of the needs of foster youth.
- DCF staff have developed and maintained partnerships with state community colleges to identify housing and educational support resources and have presented at numerous informational meetings for field staff and providers to share information on these resources.

### **Massachusetts State Financial Aid Programs for Foster Youth**

DCF coordinates the ETV Program with other Massachusetts state-funded education and training programs currently offering financial assistance to eligible foster and adopted youth including the State College Tuition and Fee Waiver Program, the Foster Child Grant Program and the William Warren Scholarship Program.

The ETV staff work with the MA Board of Higher Education – Office of Student Financial Assistance around the Foster Child Grant. ETV staff review all ETV applications, Foster Child Grant Applications, William Warren Scholarship applications and financial aid award statements in an effort to prevent duplication of benefits and determine that the amount of assistance from any Federal sources combined with ETV funds does not exceed the “cost of attendance” as outlined in 477 (b) (3) (J).

### Foster Child Tuition and Fee Waiver Program

The Foster Child Tuition and Fee Waiver Program provide waivers for undergraduate tuition and fees for state-supported classes at the in-state rate to foster children at any one of Massachusetts' 29 state universities and community colleges. Initially approved by the Board of Higher Education in June of 2000 for tuition waivers, this program was expanded to include fees in July of 2008. Youth eligible for the state college undergraduate or certificate tuition and fee waivers include:

- A current or former foster child who was placed in the custody of the DCF and remained in custody through age 18 without subsequently being returned home. The youth must have been in custody for at least six months immediately prior to age 18;
- Youth adopted through DCF; and
- Youth who have been in the custody of the DCF and whose guardianship was sponsored by DCFs through age 18.

To date (May 2017), the Department has issued 5878 State College Tuition and Fee Waivers to current and former foster and guardian DCF youth, 357 waivers in the last 12 months. DCF also grants state college tuition and fee waivers to children and youth who were adopted through the agency.

### Massachusetts Foster Child Grant Program

The Foster Child Grant Program was developed in January 2001 and provides up to \$6000 of financial aid for current and former DCF youth (in custody via a C&P) who have left care at age 18 or older without returning home. This aid may be used at any IV- E eligible public or private college. The MA Board of Higher Education manages these grants, determining the level of funding per student. This academic year (2017-2018) the Department referred 488 youth to the Massachusetts Board of Higher Education for consideration of the Foster Child Grant Program to assist financially with their college/vocational needs.

### William Warren Scholarship Program

The Department issued five William Warren Scholarships this year to youth served by the agency who were attending four-year colleges and who demonstrated need beyond financial support programs available at the state and federal level. These scholarships were financed with donated funds and nominally by the State Ward account. Many of the youth who apply for the program are also eligible for the Massachusetts Tuition and Fee Waiver and other higher education support programs such as ETV. Applicants who qualify for other forms of student aid are supported by DCF workers to access such aid.

### Hope Worldwide Dr. Martin Luther King Essay Contest

DCF has continued its partnership with Hope Worldwide, an agency that sponsors an essay contest annually to celebrate the birthday of Dr. Martin Luther King. College students from foster care are invited to compete in an essay contest where they reflect on their public service. More than \$3500 in scholarships was awarded to foster youth enrolled in college. The winners were honored at a service dedicated to Dr. King.

## **Program Adjustments**

No changes have been made with the ETV Program this year, and none are planned for FY 19.

### **Changes as result of the amendments made to the Chafee and ETV Programs as a result of the passage of P.L. 115-123, the Family First Prevention Services Act.**

In FY19, DCF will conduct analysis on its current utilization of ETV and Chafee funds to determine the impact of exercising the option to extend these programs to older youth. DCF will review its current spending, amount of youth served via what programs, and the outcomes of these programs. Based on these findings, DCF will determine whether to exercise this option in the future.

**JOHN H. CHAFEE FOSTER CARE INDEPENDENCE PROGRAM**

(1) **RESPONSIBLE STATE AGENCY**

The Massachusetts Department of Children and Families (DCF) is the state agency responsible for administering the Title IV-E program; DCF will also administer the Independent Living Program under section 477 (section 477 (b) (2)). DCF will cooperate in national evaluations of the effects of the programs implemented to achieve its purposes.

**CFCIP FUNDS REQUESTED**

Federal Funds Requested	\$3,426,896
State Match Amount	\$685379.20

Source: Account 4800-0041  
RESG02  
Independent Living/Congregate Care Programs

Amount of Federal Funds to be Used for Room and Board: \$100,000

Education and Training Voucher Program Funds Requested: \$1,170,617

**Annual Reporting of State Education and Training Vouchers Awarded**

Name of State: Massachusetts

<u>Final Number:</u>	<b>Total ETVs Awarded</b>	<b>Number of New ETVs</b>
<b>2016-2017 School Year</b> (July 2016 to June 2017)	484	221
<b>2017-2018 School Year</b>	481*	226

\*Number of vouchers awarded as of May 2018.

## **F. UPDATE TO TARGETED PLANS WITHIN THE 2015 – 2019 CFSP**

### **Foster and Adoptive Parent Diligent Recruitment Plan**

- *Describe the progress and accomplishments in implementing the state's Foster and Adoptive Parent Diligent Recruitment Plan.*

DCF continues its commitment to recruiting foster and adoptive parents that:

- 1) Reflect the characteristics of the children in our care, including culture, race, sexuality, ethnicity and language.
- 2) Prioritize homes that support keeping siblings together (when appropriate), older youth and children with complex physical and emotional needs.

During 2017, DCF made significant changes in our foster care recruitment efforts. The department now has regional recruiter positions, has increased marketing/advertising and implemented other system enhancements.

#### Regional Recruiters

In 2017, DCF created 15 new recruitment positions in order to enhance the recruitment efforts in our local offices and communities. Their roles and responsibilities are organized by our five regions and they are responsible for specific recruitment activities, such as events, information sessions and initial screenings of foster care applicants.

Each of DCF's 29 area offices works in conjunction with the regional recruiter that is assigned to their office to develop a recruitment plan specific to their office's needs. An area office could identify any number of criteria that they wanted to work on, such as specific age group or specific city/town where they assessed a need for foster/adoptive homes.

This new recruiter role has strengthened our recruitment efforts. It also alleviates a portion of the workload traditionally held by our family resource workers, allowing them more time to focus on the licensing and ongoing support of our foster families.

#### Marketing & Advertising

With the support of an advertising company to develop a new tagline, Foster MA – Every Parent Makes a Difference, DCF launched a public campaign to enhance our exposure in local communities and bring awareness to our continued need for foster families.

This campaign included:

- Updated materials with a modernized look and feel
- Two 30-second videos that highlighted diverse foster families
- A Google Search Campaign targeting particular demographics (age, marital status, gender) to broaden visibility and solicit interest with direct links to our newly designed mass.gov website and new Facebook page
- Outdoor Advertising on over 200 billboards, bus shelters, buses, etc. throughout the state with new logo and images
- Increased number of recruitment events statewide

- Since July 2017, results from this effort include:
  - Over 5 million impressions on our online videos and ads
  - 37,362 clicks to the mass.gov site
  - Over 2500 followers on our Facebook Page: Foster MA - Massachusetts DCF

### System Enhancements

The Department acknowledged a need to enhance our online capacity to improve access to information and provide multiple ways for the public to engage with our system. This not only offers instant access to information but allows prospective applicants to review our materials and learn about the process to make a more informed decision.

Our online capacity increased to include the following:

- Facebook Page - used to build a community of current and potential foster and adoptive parents by promoting recruitment events statewide, highlighting key foster care/adoption stories, celebrating and acknowledging positive work being done in the community by foster parents, and providing a platform to ask questions and share information.
- New Online Application – allows potential applicants to submit an application via online system to expedite the process. We have seen a significant increase in applications since this implementation in February 2018,
- Update Mass.gov Pages - to provide information to the engaged public such as:
  - Information sessions
  - MAPP training schedules
  - Resource information

With the 2017 implementation of the regional recruiters, the launch of the recruitment campaign and increased online capacity, we have seen a consistent increase in interest, engagement, number of applications and licensed foster homes over the prior year.

- Over recruitment 500 events statewide
- Gain of over 200 homes (11% increase)
- 34% increase in applications

### Diligent Recruitment

In collaboration with our Continuous Quality Improvement Team, we increased our data collection to capture and track the number of inquiries, applications and licensed homes that are produced. We also designed a metrics tool that will allow us to set target goals based on data related to individual area office needs. This will enhance our ability to implement diligent recruitment and target communities and/or populations that fulfill the needs outlined via qualitative and quantitative information.

This tool will be distributed to staff, which will allow them to collaborate with regional recruiters and support thoughtfully-planned recruitment efforts.

### Budget

The budget for recruitment this fiscal year was accommodated to match last year and allows us to promote our foster care and adoption programs. The ability to pay entry fees into events, have money for



supplies, and being able to promote our programs with printed materials has had a positive impact on the recruitment work.

The increase in budget has allowed DCF to prioritize the translation of recruitment materials into Spanish to accommodate the large Spanish-speaking population in the state of Massachusetts. The following documents have been translated:

- Recruitment materials...brochure & fliers - Spanish & Portuguese
- MAPP Curriculum – Spanish
- Resource Application – Spanish
- General Agreement – Spanish
- License Study, Denied – Spanish
- License Study, Approved – Spanish
- Child Placement Agreement – Spanish

Each area office also has the support of a Foster Parent Ambassador. These ambassadors are current foster parents that contribute about 30-hours a month to the work of recruitment. DCF has expanded their role to include supporting incoming foster parent applicants. DCF wants our applicants to have the ability to connect with an Ambassador in order to ask all the questions no one else can answer. The Ambassadors also attend recruitment events which connect them to potential applicants from the start.

### Adoption Recruitment

DCF continues its partnership with the Massachusetts Adoption Resource Exchange (MARE) and with Jordan's Furniture. Our private/public partnership has enabled the Department to improve the quality and effectiveness of our recruitment efforts as they pertain to adoption.

Adoption Recruitment Events, held annually:

- Walk/Run for Adoption, May 2018
- Adoption/Foster Care Information Weekend, June 2018
- Adoption Option, October 2018
- National Adoption Day, November 2018

While DCF continues to participate in large statewide adoption recruitment events with our public/private partners, we also hold a number of smaller adoption parties in our five regions across the state. These smaller parties have proven to be successful venues which bring approved pre-adoptive families and children with a goal of adoption together.

DCF has re-contracted with a consulting agency to update our adoption materials to replicate the design and modernization of our foster care materials. We anticipate these products to be completed by the end of the summer.

DCF continues to maintain a full-time Foster Care and Adoption Recruitment Unit that is part of the Foster Care, Adoption and Adolescent Services Division. The recruitment unit has three supervisors who oversee the 15 recruiters in the field, the area office Foster Parent Ambassadors, conduct statewide recruitment outreach and answer the 1-800 call-in recruitment line.

## Health Care Oversight and Coordination Plan

The DCF Health Care Oversight and Coordination Plan builds upon and revises previously submitted plans. The Department continues to strive to strengthen our efforts to ensure that children in the care and custody of the Department receive routine health care and that their specialized medical needs are addressed. These efforts have included increased collaboration with other state agencies and the medical community, as well as working toward enhanced integration of medical and behavioral health care.

DCF now has a robust Health and Medical Services team. Linda Sagor, MD, MPH, Professor of Pediatrics at UMass Medical School, leads the team as medical director. Dr. Wynne Morgan, Assistant Professor of Psychiatry at UMass Medical School, is the consulting child psychiatrist. Mary Lutz RN is the supervisor of six regional nurses who provide consultation to their regions and at Children's Hospital Boston. A data analyst joined the team in November 2016. Finally, there are 29 medical social workers, one in each area office. These medical social workers are considered the "champions" for medical/dental/psychiatric/developmental care for all youth in custody in their area office. While they attend too many different tasks related to health issues of these children, their main priorities are:

1. Ensuring that all children coming into custody have an initial medical screening, ideally within 7 days, and a comprehensive assessment, ideally within 30 days, preferably with their own PCP. If this visit is scheduled with another doctor, the medical social workers request the previous medical records from offices and hospitals and send to the new medical provider.
2. Documenting all medical information from visits as well as diagnoses, allergies, medications, and immunizations into iFamilyNet.
3. Coordinating all follow-up care as indicated from exams above in a timely manner.

While these continue to be the current priorities, the group will be open to learning about new concerns and areas that will require the attention of the Health and Medical Services Team and the medical social workers in the coming months and years.

### *I. Schedule for initial and follow-up health screenings that meet reasonable standards of medical practice.*

#### *DCF Policy on Medical Exams for children entering DCF care or custody.*

In 1998, the Department established a directive that all children in DCF custody receive medical screening examination within seven days of placement and a comprehensive medical examination within 30 days of entering out of home placement.

This directive was subsequently formalized in agency policy. The policy provides greater detail about the role of the social worker, foster parent, and healthcare providers in scheduling, coordinating, and communicating the findings. This policy also specifies that all children in DCF custody receive healthcare in accordance with the EPSDT periodicity schedule. The policy is reviewed with new social workers during pre-service training and is posted on the DCF intranet.

This policy ensures that all youth in placement are assessed for emotional/behavioral/developmental concerns by a pediatrician, family physician, or nurse practitioner at their initial screening and their comprehensive evaluation. In addition our Medicaid agency, MassHealth, requires a psychological and developmental assessment at each well child check using standardized evaluations such as the Pediatric Symptom Checklist and the M-CHAT. For children who have been diagnosed with mental health disorders or developmental disabilities these medical visits ensure that the child is being reevaluated at regular intervals by generalists. These visits can support and validate psychiatric

diagnoses when appropriate – but can also provide other considerations/formulations in cases in which there is a difference of opinion.

In addition, the DCF child psychiatrist is consulted by DCF staff and other psychiatrists and mental health professionals when a diagnosis for a youth in custody is very complex or unclear. She also provides recommendations about placement and medication. She has become visible in the psychiatric provider community and has a collaborative relationship with many of her colleagues.

#### *Foster Care Clinics*

The Department has collaborated with Children's Hospital in Boston and UMass Memorial Medical Center pediatricians to establish health care clinics that are specifically focused on providing the required medical screening and comprehensive examinations for children in foster care in Boston and central Massachusetts. Following the examinations, the clinic sends the physician's written report summarizing the visit and recommendations for follow-up care to the DCF ongoing social worker. The UMass Clinic, called FaCES (Foster Children Evaluation Services), founded in 2003 by the current DCF Medical Director, Dr. Linda Sagor, sees approximately 500-600 children each year who have been newly placed in foster care each year in central Massachusetts. The Children's Hospital Foster Care Clinic, established in 2008, serves children entering DCF custody in the Boston region. This past year 70 children were seen at the Children's clinic.

There has been increased interest in developing foster care clinics in other regions. Currently, a pediatric nurse practitioner at the Holyoke Health Center is working with her colleagues to develop a foster care evaluation clinic and medical home for children in foster care. In addition, a child protection-trained pediatrician at Boston Medical Center, Dr. Kim Schwartz, has started a foster care clinic at her institution.

The FaCES Clinic has recently received a grant, "Safe and Sound", to expand their psychiatric evaluation services along with intensive foster parent support. They refer youth with the most complex mental health needs to a child psychiatrist for immediate evaluation and treatment and provide coaching and support to the foster families where these youth are living. The Department has pledged support in this endeavor and will be collaborating with UMass to provide outcome data.

#### *Compliance Reports*

The Department collects data to track which children have received the seven and 30 medical appointments in compliance with DCF policy. Child-specific data include each child who had a home removal episode within the last 60 days, whether appropriate examinations were done and the date the examinations were documented in the electronic case record, FamilyNet. This report is sorted by area and region and includes the unit and social worker assigned to the case. The aggregate compliance data include the number and percentage of required exams that are documented in FamilyNet as having been completed.

Since the completion of the medical social worker team in December 2017, with all 29 area offices having a medical social worker, compliance rates and documentation of visits have improved greatly. In May 2016, before any medical social workers started, the percentage of children newly in placement seen in the first 60 days was 22% statewide. The most recent statistics from March 2018 indicate that 85% of children were seen within that time frame. The percentages seen within 7 and 30 days continue to increase as well. The current plan is to revise the policy to develop a triage protocol related to age and health status of children coming into custody.

### *Access to MassHealth EPSDT and Claims Data*

Children in DCF care or custody are eligible for Medicaid through MassHealth. The DCF Health and Medical Services Team (HSMT) has access to information from the MassHealth system regarding healthcare services provided to DCF involved children. The HSMT has the ability to request All Services Reports directly from MassHealth for children in DCF custody in specific cases where past provider or medical treatment information is not accessible. The HSMT collects child-specific data on an ongoing basis to track children who are in hospitals and group care placements needing a more appropriate disposition plan.

The medical social workers also have access to the MMIS Medicaid claims information system. This has been very helpful in determining eligibility for services and medical appointments, especially as Massachusetts has revamped their Medicaid structure with new Accountable Care Organizations (ACOs). They also have recently been trained to use the MIIS system, the Massachusetts Immunization Information registry which allows them access to immunization data for most children in Massachusetts. The data analyst has provided much-needed information about current health status, insurance coverage, and psychotropic medications of children in custody. This will be even more important as we make progress on our new initiatives below.

### *Areas for Enhancement / New Initiatives*

- As the Department transitions from its legacy electronic case record FamilyNet to a web-based electronic case record, i-FamilyNet, enhancements will be pursued to provide prompts to social workers to enter data regarding seven and 30-day medical exams and modify healthcare screens to gather additional information about the child's health and well-being. Medical social workers work with their colleagues in each office to ensure that these visits are being scheduled and the data is being documented in iFamilyNet.
- Training provided to new supervisors is being enhanced to strengthen supervisors' understanding of the importance of monitoring children's healthcare status in regular supervision with workers.
- Dr. Sagor worked with members of the DCF IT group to develop a statewide Home Removal Episode report so that medical social workers would have a daily report to keep track of the children coming into custody in order to ensure that they receive their initial screenings and their comprehensive medical assessments on time. This report has been available for the past two years and is currently being revised to make it more user-friendly and conform more clearly to policy guidelines. It has been a very useful tool for medical social workers to use it to track scheduled visits for children newly placed in foster care.
- Medical social workers meet for a full day every other month with Dr. Sagor and Jessica Coolidge, Statewide Medical Social Worker specialist, to discuss challenges and successes from their work and to have additional educational experiences. In the past year, the medical social workers have had presentations from the CANDO Autism Clinic at UMass, the GROW Clinic at Boston Medical Center, and a leadership expert. Future topics will include trainings related to opioid addiction, substance-exposed newborns, and transgender issues.
- Ad hoc trainings for DCF staff have been coordinated with the DCF Child Welfare Institute by Mary Lutz, supervisor of nurses. In the past year trainings have included two day-long presentations on "Health Care Issues in Child Welfare." These were very well-attended and received excellent evaluations.

- Data analyst: The data analyst provides reports to measure progress in meeting the medical, dental, behavioral health, and developmental needs of children in the care and custody of DCF.

These reports include:

- a. Daily reports of children who have been recently placed in custody, along with due dates for their medical screenings
  - b. Weekly reports of all initial screening and comprehensive exams needed
  - c. Weekly reports of hospitalizations for all children in foster care
  - d. Monthly report of compliance statistics for screening/comprehensive visits by area office
  - e. Monthly report of all psychotropic meds for children in state custody
  - f. Monthly report on antipsychotic medications use in youth in state custody
  - g. Bi-annual reports on chronic illness diagnoses
  - h. Bi-annual reports on immunization delays for children in foster care
  - i. Biannual report on demographics of medical providers of care
- Dr. Sagor, chair of the Foster Care Committee and a member of the Child Protection Committee of the Massachusetts Chapter - American Academy of Pediatrics, has met with committee members to discuss issues related to compliance with health screening policy. She has been working with the chair of the Child Protection Committee to discuss a way to ensure that pediatric child protection evaluations are available to all DCF offices throughout the state. In addition, she had discussions with the presidents of the Massachusetts Chapters of the American Academy of Pediatrics and the American Academy of Family Physicians. Though they both indicated that many of their physician members give high priority to caring for children in foster care, they pledged the support of their organizations to improve access to all medical offices and community health centers in a timely manner. The medical social workers have met with many of the medical providers in their areas and have found, after they explain the DCF policy, that they are able to schedule appointments within the policy time frame. The pediatricians and family physicians have indicated their appreciation for having one person to call about medical concerns at each area office.

## *II. How health needs identified through screenings are monitored and treated.*

### *Comprehensive Coverage through MassHealth*

DCF has the ability to directly enroll children in its care or custody into MassHealth. Enrollment occurs in real time facilitating immediate access to insurance coverage. Medical social workers are trained to use the MMIS system and greatly facilitate the enrollment in each office.

### *WIC Qualification*

DCF involved children are eligible to receive WIC services and social work staff is well versed in the process for applying of these services.

### *Treatment*

While the child's caretaker (e.g., foster parent, group care provider, etc.) schedules and transports the child to medical care, the social worker is ultimately responsible for ensuring that identified healthcare needs are met. The HSMT is available to assist social workers if they have questions about needed medical treatment. The HSMT includes the supervisor and two medical social workers who are located at the Central Office, 5 Regional Nurses, and a fulltime DCF Nurse Liaison located at

Children's Hospital. In addition, the medical social workers in each office support their ongoing social worker colleagues to ensure that these visits take place and are documented.

#### *Forms to Support Information Exchange*

The HSMT developed forms (Dear Doctor Affidavit) to ensure that the social worker is fully informed about a proposed treatment, benefits and risks and potential complications. The physician is asked to complete these forms and return to the social worker to support providing informed consent as the child's legal guardian. Medical social workers all receive training in how to access medical records and other medical information and how to ensure timely transfer of this information for children receiving medical evaluation in offices where they have not been seen before.

#### *Monitoring*

The Department has established a process for monitoring treatment after screening and comprehensive examinations. Healthcare providers are asked to complete an Encounter Form. If this is not available medical social workers are able to contact the medical offices to request additional information. The social worker is then responsible for entering this data into the iFamilyNet system. This information is then available to all who need it while the child is in custody. It is especially important if the child is then moved to another home so that prospective foster parents will be aware of medical issues, allergies, and medications.

The nurses from the HSMT are available to assist social workers in determining whether a specific medical treatment is routine or extraordinary in individual cases. Treatments that are determined to be extraordinary per DCF regulations require judicial review.

#### *Special Kids/Special Care Program*

This collaborative effort between DCF, MassHealth and Boston Medical Center public insurance plan is designed to provide care management by pediatric nurses and nurse practitioners to children who have unstable and/or complex medical conditions and intensive medical needs. This is a statewide program with approximately 100 children enrolled.

#### *Complex Foster Care/Medical Program*

The supervisor of the HMST manages contracts with two foster care agencies for specialized foster homes that serve the children with most intensive medical care needs. Currently, the capacity is 11 children and the hope is that there will be an expansion of several homes by the end of 2016 and that more of these homes will be established ongoing.

This program is a model of foster care that is designed to provide care and treatment supports to children and youth who require intensive medical care management and coordination. Foster families recruited to serve as foster homes receive extensive ongoing specialized training. The profile of children and youth who require this level of service includes children who require regular skilled and non-skilled home care, medical advocacy, complex medical management, services by numerous medical specialists, and often need a range of medical equipment. Such children experience or are at risk for life-threatening events and require intensive ongoing monitoring.



Examples of children requiring this level of care include but are not limited to children who:

- a) Have tracheostomies;
- b) Require oxygen supplementation;
- c) Are ventilator dependent for all or part of the day;
- d) Are diagnosed with cancer and are receiving treatment;
- e) Are diagnosed with serious birth defects that impair their functioning and require skilled care;
- f) Have serious medical conditions resulting from prematurity; or
- g) Require intravenous or tube feedings and have complex or unstable medical conditions.

#### *Individualized Care Plans*

The agencies that administer the Complex Foster Care/Medical Program submit reports about the medical status of children in these homes to the Supervisor of the HSMT. For the Special Kids/Special Care Program, BMC will submit quarterly individual care plans to the HSMT and to the PCP and the substitute caretaker.

#### *Areas for Enhancement / New Initiatives*

- Medical Residence Foster Homes will be re-procured. This will provide an opportunity to review the standards and expectations established for Medical Residence Foster Homes and to strengthen those as needed.
- Safe Sleep Initiative – Because of the increasing prevalence of infant fatalities in unsafe sleep environments as indicated by COIN reports, Dr. Sagor is now co-leading a new statewide campaign to reduce unsafe sleep deaths. She was a participant in the 2012 campaign that included educational presentations to the DCF community and others as well as publicity on public transportation, at shelters, hospitals, schools, WIC and medical offices, and a legislative breakfast hosted by the Massachusetts Secretary of Health and Human Services. The current campaign, in conjunction with the Department of Public Health and the Executive Office of Health and Human Services, will include a public awareness campaign as well as targeted interventions to the most vulnerable groups for unsafe sleep deaths.
- A recent area of concern has been health care of transgender youth. The Department has received several requests for medication treatment (puberty blockers, hormones) and has dealt with these situations on an individual basis. Drs. Sagor and Morgan are now working with DCF staff on the LGBTQ Committee to develop a standard protocol for providing consent for treatment.

#### *III. How medical information will be updated and appropriately shared, which may include development and implementation of an electronic health record.*

##### *Electronic case record*

As noted previously, medical information on DCF children is entered into the DCF electronic case record, iFamilyNet.

##### *Encounter Forms*

This form is provided to the caretaker and completed by the physician and returned to the DCF social worker who enters the information into FamilyNet. When the Encounter forms are unavailable or inadequate, the medical social workers are able to contact the medical office and request further

information. Since most medical offices now have an electronic medical record system they are now able to send a copy of their most recent visits along with other pertinent information.

Collaboration and communication with medical offices and hospitals have been greatly enhanced with the medical social workers. Because they do not carry a caseload and are not required to make home visits, they are usually in the office and readily available by phone and email. Thus, medical providers who have questions about youth in custody are able to get immediate answers and follow-up to their concerns about these youth.

#### *IV. Steps to ensure continuity of health care services, which may include establishing a medical home for every child.*

##### *Information on Past Providers*

The HSMT and medical social workers have access to past medical providers through the information in the MMIS and by accessing the All Services Reports from MassHealth. Staff makes every effort to have children see their previous Primary Care Providers (PCPs) for screening and follow-up care while they are in foster care.

##### *HMST and School Nurse Collaboration*

Increased collaboration between school nurses and the HMST helps to support continuity of medical care/information and to facilitate appropriate school accommodations and the sharing of relevant health-related information between the agency and school system.

Dr. Sagor has spoken at medical meetings and written for local medical newsletters to facilitate collaboration and communication between medical offices and the Department. She often receives call from members of the medical community to ask about policies and individual cases

#### *V. Oversight of Psychotropic Medications.*

##### *Access to Consultation*

In April 2016, Dr. Wynne Morgan became the consulting child psychiatrist in the Office of the Medical Director. DCF social workers/supervisors now have access to child psychiatric consultation when there are questions about psychotropic medications. Regional nurses often provide first line consultation around basic psychotropic medication questions, but they refer to Dr. Morgan to guide treatment. For complex psychiatric treatment questions requiring face to face consultation, DCF can also request a consultation from a DMH psychiatrist. Each region has access to a Mental Health Specialist who can support behavioral healthcare planning and access to services for individual cases as well as help coordinate discharge from psychiatric hospitalization. In addition, the HSMT has access to a pharmacist from the Drug Utilization Review Program at MassHealth to obtain clinical information and advice when questions arise that pertain to use of prescription or illegal drugs.

PCPs who are often the front line treaters for mental health needs in the foster care population have access to child psychiatric consultation through the Massachusetts Child Psychiatry Access Project (MCPAP). Established in 2002, this first-in-the-nation-program was designed to provide quick access to child psychiatrist consultation for primary care providers.



### *Medication Administration in Congregate Care*

The Caring Together contracts for all congregate care services established new standards related to the administration of medication within these programs. Each provider is required to implement the Medication Administration Program (MAP) outlined in the contracts which set forth specific requirements for staff training and administration of medications for any child in these levels of service.

### *Monitoring Psychotropic Medications*

Authorization, oversight, and financing of psychotropic medications for children in foster care in Massachusetts is a shared responsibility across multiple state agencies and the courts. DCF is the agency primarily responsible for coordinating medical care & behavioral health care for children in its custody. Children in DCF custody receive their medical and behavioral health care from community providers (physicians, nurse clinicians, or other clinicians). As noted above, authorization or consent for routine medical treatment has been given by the DCF social worker/supervisor with consultation from the HMST nurses, the Regional Mental Health Specialists, and the DCF consulting psychiatrist. Medical procedures or medications deemed “extraordinary” in nature require consent through the court system through a Rogers Process as outlined below.

With respect to oversight of medication treatment, primary responsibility is shared between DCF and MassHealth, the state Medicaid program. Children in foster care are enrolled in MassHealth when taken into custody to ensure access to medical assessments and treatment. Children in foster care are primarily enrolled in a MassHealth managed care carve-out, currently administered by the Massachusetts Behavioral Health Partnership (MBHP).

Massachusetts currently has two mechanisms for psychotropic oversight for youth in care and protection of DCF. The Rogers process is specifically for youth in custody of DCF and applies to youth when DCF retains medical decision making for the youth. Pediatric Behavioral Health Medication Initiative (PBHMI) is for all youth in MassHealth, whether or not there is DCF involvement. The Rogers process is also specifically for one psychotropic class of medication, antipsychotics, while PBHMI covers all classes of psychotropic medications.

### *Pediatric Behavioral Health Medication Initiative*

In November of 2014, the Mass Health Pharmacy Program, in collaboration with the Department of Children and Families (DCF) and the Department of Mental Health (DMH), developed the Pediatric Behavioral Health Medication Initiative (PBHMI).

This is a medication review program for all children on MassHealth, which includes youth in state custody. high-risk psychotropic medications require a prior authorization (PA) request to a MassHealth pharmacy for approval. The parameters of high risk prescribing are outlined below include age and polypharmacy restrictions. The highest risk medication regimes are reviewed by an inter-disciplinary team weekly to determine the level of oversight and whether a peer to peer phone conversation is required for approval of regime.

#### **PBHMI High Risk Parameters:**

1. Behavioral health medication polypharmacy: pharmacy claims for any combination of four or more behavioral health medications (i.e., alpha2 agonists, antidepressants, antipsychotics, atomoxetine, benzodiazepines, buspirone, cerebral stimulants, hypnotic agents, and mood

stabilizers) within a 60 day period for members under 18 years of age; *Please see link for full table of therapeutic class table:*

<https://masshealthdruglist.ehs.state.ma.us/MHDL/pubtheradetail.do?id=273>

2. Antipsychotic polypharmacy: overlapping pharmacy claims for two or more antipsychotics for at least 60 days within a 90 day period for members less than 18 years of age;
3. Antidepressant polypharmacy: overlapping pharmacy claims for two or more antidepressants for at least 60 days within a 90 day period for members less than 18 years of age;
4. Cerebral stimulant polypharmacy: overlapping pharmacy claims for two or more cerebral stimulants (immediate-release and extended-release formulations of the same chemical entity are counted as one) for at least 60 days within a 90 day period for members less than 18 years of age;
5. Benzodiazepine polypharmacy: overlapping pharmacy claims for two or more benzodiazepines for at least 60 days within a 90 day period for members less than 18 years of age;
6. Mood stabilizer polypharmacy: overlapping pharmacy claims for three or more mood stabilizers for at least 60 days within a 90 day period for members less than 18 years of age;
7. Any pharmacy claim for an antidepressant, antipsychotic, atomoxetine, benzodiazepine, buspirone, hypnotic or hypnotic benzodiazepine, or mood stabilizer for members less than six years of age;
8. Any pharmacy claim for an alpha2 agonist or cerebral stimulant for members less than three years of age.

#### *Rogers Process*

Since 1987, DCF regulation considers the use of antipsychotic medication as extraordinary treatment. In accordance with the policy, DCF seeks judicial authorization (a "Rogers Order") prior to the administration of antipsychotic medication to a child in its custody. Through the Rogers process, a medical guardian ad litem is appointed, a hearing is held, and the judge either grants or denies the petition (specifying medication(s), dosages, and rationale for administration) or makes a modification to the dosage. A new petition and hearing are required if the prescriber determine a clinical need for a dosage outside the initial authorization or a need for a different antipsychotic than those authorized by the judge. Rogers orders are periodically reviewed by the court at the judge's determination.

#### *Psychotropic Medications Steering Committee:*

This committee formed in 2012 following the GAO 2011 report flagging concerns about inappropriate psychotropic medication prescribing for youth in foster care. This report followed the 2008 Office of the Child Advocate report which recommended that the authorization process for psychotropic medications be improved by adopting a more responsive and effective consent process. The purpose of the Committee has been to continue to assess the use of psychotropic medication for children in foster care and monitor access to psychosocial supports provided to youth in foster care. The Steering Committee is co-chaired by the Office of the Medical Director and the DCF Commissioner, with representatives from the Executive Office of Health and Human Services (EOHHS), DCF, DMH, and MassHealth, and the Massachusetts Behavioral Health Partnership.

The principles initially established to guide the work of the committee are:

1. Maintain a focus on the whole child—medical/behavioral/social— promoting a holistic approach to prescribing practices.
2. Psychopharmacology should be matched to the strengths and of the child, family, and substitute family with a focus toward safety, permanency and well-being.
3. All partners involved in the care of and services to a child should be optimally informed of the emotional, medical and behavioral needs of the child.
4. Psychopharmacological regimens should be guided by scientific best practice.
5. Systematic State Agency oversight is needed to promote best practices related to authorization and monitoring of psychotropic medication.
6. Though clearly defined standards of care may not exist, there is enough agreement to define ranges for effective outlier management
7. Psychopharmacology should occur within a well-defined practice of Trauma Informed Care.
8. There is a system-wide commitment to "informed consent."
9. Commitment to ongoing improvement of prescribing practices grounded in data and evidence.
10. Psychopharmacology is only one component of efforts to improve overall healthcare of children.
11. Youth are engaged in the management of his/her ongoing treatment plan.
12. Building consensus among stakeholders is fundamental to the success of any plan.

In the past year, the Committee, with the support of the DCF Commissioner, has developed a protocol for providing consent for all psychotropic medications for children in custody. An initial pilot project will start September 1, 2018, in a residential placement and a group home run by Youth Opportunities Unlimited (YOU Inc.) in Worcester. = As the program is expanded, a psychiatric social worker will be hired to assist Dr. Morgan in its implementation. The goal of the Committee is to have a statewide consent policy for all psychotropic medications for all youth in custody by January 2020.

VI. How DCF actively consults with and involves physicians or other appropriate medical and non-medical professionals in assessing the health and well-being of children in foster care and in determining appropriate medical treatment for children.

*Training*

Pediatricians and social workers from Children's Hospital in Boston and UMass Medical Center in Worcester provide training for new DCF Social Workers and periodically provide additional workshops

/in-service training opportunities on selected medical topics. In addition, staff from Children's Hospital provides training for all DCF investigators on assessment of non-accidental trauma.

DCF has collaborated with Children's Hospital and Boston Medical Center to institute the "Building Bridges" program. This unique program provides critical training and consultation between DCF social workers and psychiatrists. Drs. Gordon Harper and Joel Goldstein, child psychiatrists, are currently participating in this program.

#### *Protocol for Life-Sustaining Medical Treatment*

For proposed orders to forgo or discontinue life-sustaining medical treatment DCF has established processes for accessing medical recommendations from providers in addition to the treating provider and from hospital Ethics Committees. Once these professional opinions have been obtained, the request is reviewed by the Commissioner, Deputy Commissioners and the General Counsel, and if approved, the Department seeks a judicial determination on the decision. Orders to discontinue or forgo life-sustaining medical treatment are reviewed by the child's current treating physician on an annual basis to determine whether the order is still medically justified.

#### *Collaboration with Child Protection Teams (CPTs)*

The HSMT works closely with CPTs in hospitals statewide to collaborate regarding a range of healthcare and psychosocial issues for children who have experienced suspected physical or sexual abuse. Physicians and the DCF Nurse Liaisons from Children's Hospital CPT provide training to new social workers and investigators on assessment of non-accidental trauma. Regular meetings between HSMT and CPT staff statewide are held on a regular basis.

#### *Areas for Enhancement / New Initiatives*

The Department has obtained data from MassHealth that will assist us in identifying community pediatricians that are seeing a number of DCF clients. In partnership with the Massachusetts Behavioral Health Partnership, the Department will be reaching out to these providers to provide training (including trauma training utilizing the curriculum developed by Dr. Heather Forkey for pediatricians), providing a resource toolkit to pediatricians on special issues of treating children in foster care, and identifying strategies for improving communication between DCF and healthcare professionals. In addition, this effort is designed to improve access to healthcare services. See the overview of this collaboration with MBHP in the Appendices.

#### *Strategies to Build Capacity to Provide Trauma Informed Casework Practices and Trauma Specific Evidence Based Treatments*

##### *Integrated Casework Practice Model*

With the implementation of a new casework practice model in 2009, the Department established "trauma-informed" as one of three key clinical approaches to be integrated into all aspects of our casework practice. The four cornerstones of our casework practice model are: 1) Positive Engagement; 2) Progressive Understanding; 3) Capacity Building; and 4) Consolidating and Sustaining Gains. Throughout each of these phases of casework, the Department utilizes Safety Organized, Trauma-Informed, and Solution Focused Clinical approaches. Significant training has occurred throughout the past three years of the implementation of the casework practice model on these clinical approaches.

### *ACF Trauma Grant*

Massachusetts is one of five states selected to receive an ACF grant to build system capacity to provide trauma informed care to children served within the child welfare system. The grant has been an exciting opportunity to enhance the state's efforts in this area. Specifically, through the trauma grant:

- DCF social workers receive Basic and Advanced Trauma training,
- Trauma-Informed Leadership Teams are being established in each DCF Area Office to identify and disseminate trauma-informed casework practices
- Mental Health providers serving DCF children are being trained on one of three evidence-based trauma-specific treatments (Child-Parent Psychotherapy, Trauma Focused-Cognitive Behavioral Therapy, or Attachment, Regulation and Competency)

Between November 2012 and June 2013 DCF social workers in the West and Northern Regions received Basic Trauma training and had the opportunity to participate in Advanced Trauma training utilizing the NCTSN Toolkit for Child Welfare Staff. Each of the Area Offices in these Regions has also established Trauma-Informed Leadership Teams to enhance casework practices that are more trauma-informed. Over that same time period, mental health providers were selected to be trained on one of the evidence-based treatments and have participated in an intensive learning community for additional supervision and coaching. To date, over 120 mental health clinicians have been trained and approximately 150 DCF children have been enrolled in one of the evidence-based treatments.

In September 2013, the Boston and Southern Regions engaged in the same process of training DCF staff and mental health clinicians. In November 2013 DCF began a new program to provide training for DCF resource parents on the impact of trauma on children the care for. Additional detail on the efforts to build system capacity to provide more trauma informed care may be found in the Semi-annual Report on Enhancing Trauma-Informed Care.

### *VII. Health care needs of youth aging out of care.*

Planning for discharge and transition from placement and case closing can begin at many different points 90 calendar days prior to discharge and case closing the Department must provide a transition planning process in collaboration with the youth/young adult, based on an assessment of her/his readiness for living interdependently in the community, age and follow up supports. The discharge and transition planning process must include a discussion of the youth/young adult's education, employment or work skills development, housing, health insurance including the importance of a medical health care proxy, local opportunities for mentoring and other specific support services. The plan should be reflected in the Service Plan and/or dictation and must be reported in any Permanency Hearing Report filed with a court after the youth/young adult turns age 17 years and 9 months old. Any outstanding life skills needs are prioritized and addressed prior to discharge from placement and case closing. The Department must also provide written notice to the youth/young adult at least 30 calendar days prior to the anticipated date of discharge from placement and case closing (which may occur later). The scheduling of both steps should be planned.

- For the youth who intend to leave Department care or custody on her/his 18th birthday, the discharge and transition planning must begin 90 calendar days prior to discharge and the closing of the case. The written notice of discharge from placement and case closing should be sent within 90 calendar days and at least 30 calendar days prior to her/his 18th birthday. The notice must contain

notice of the right of the youth to challenge the discharge from placement and the closing of her/his case through the fair hearing process.

- For the young adults who have continued sustained connections with the Department beyond age 18, the discharge and transition planning is completed within 90 days prior to the closing date. The dates for discharge from placement and case closing should be reflected in youth readiness assessment tool if being utilized and the current Service Plan. Written notice of the discharge from placement and/or case closing is sent at least 30 calendar days prior to the date of the discharge from placement or case closing accordingly
- More information about health care for youth transitioning out of foster care can be found in the CFCIP section of the APSR.

## **Disaster Plan**

This report is submitted as part of the plan of the Commonwealth of Massachusetts for compliance with title IV-B of the Social Securities Act (the Act). The report includes the Disaster Plan as required by Section 422(b)(16) of the Act.

### *Summary of disasters during 2017 – 2018, and DCF responses*

During the past year, Massachusetts experienced four occurrences of severe winter weather that resulted in the partial activation of DCF's COOP and Virtual Coverage Plans. They were both successfully utilized during these events.

#### *Severe Winter Weather:*

The winter of 2017-2018 was fairly significant in respect to inclement weather and snow.

On January 4, March 8, and March 13, of 2018, Massachusetts was hit with significant snow storms. Blizzard conditions were reported in many areas of the state. Travel by automobile became treacherous and hundreds of flights in and out of Boston Logan Airport were canceled. Snow accumulation was significant in most cities and towns of the Commonwealth and significant coastal flooding occurred up and down eastern Massachusetts.

Due to these weather events, the Governor directed that all non-emergency Executive Branch employees not report to their workplaces on Thursday, January 4, 2018; Thursday, March 8, 2018; and then again on Tuesday, March 13, 2018. Accordingly, the Department of Children and Families immediately initiated its Employee Notification Plan.

DCF offices were closed for each of these days. The DCF Child-at-Risk Hotline was activated to operate during normal business hours. The Virtual Coverage Plan was implemented, with Incident Command Center provided by the DCF leadership. Conference calls were regularly held with agency leadership to provide updates from MEMA, area offices, the hotline, and program providers.

Despite challenges posed by the weather, the Department was able to ensure a child protective response capability for emergency reports of abuse and/or neglect. The DCF Incident Command Center operated throughout the storms to ensure communication with management and employees.

This same Virtual Coverage Plan was also successfully implemented on Friday, March 2, 2018 and then again on Wednesday, March 14, 2018, for only an abbreviated portion of the day. Due to inclement winter weather that made the morning commutes treacherous on each of these days, a delayed start time of 11:00AM was authorized for non-emergency Executive Branch employees. The delayed start time on March 2<sup>nd</sup> only affected two offices in Massachusetts, those that were hardest hit by the weather (the Berkshire Area Office and Cape Ann Area Office). This delayed start was authorized by the DCF Commissioner in consultation with the Governor's Office and Executive Office of Health and Human Services. The delayed start time on March 14<sup>th</sup> was authorized by the Governor for all non-emergency Executive Branch employees statewide and was the result of ongoing recovery efforts still underway from the previous day's (3/13/18) storm and the hazardous commuting environment still evident across the state.

### *The DCF 2015-2019 Disaster Plan*

There are no changes or updates to the Department of Children and Families Disaster Plan as of June 2018.

## **Training Plan**

This is a new DCF/CWI Training Plan that replaces previous submissions. The primary goal of the CWI is to promote effective child welfare practice. CWI activities are designed to improve the practice, knowledge, and skills of individual social workers, the quality of supervision and the agency environment that promotes creativity and professional growth. CWI is committed to advancing the strategic goals and objectives of the Department of Children and Families.

The CWI has responsibility for providing training and professional growth opportunities for all of the approximately 4,200 staff. The learning programs available to staff through the CWI are varied and include:

- New Social Worker Preservice Training Program
- New Supervisor Professional Development Program
- Response/Hotline Training
- New Area Program Manager Training
- In-Service, Evidence-Based Practice Training
- Field Based Implementation and Practice Coaching
- MSW Fellowship Program
- Post-Masters Clinical Certificate Programs
- Professional Certificate Programs
- Licensing Test Preparation
- Professional Conferences
- Policy Implementation and Training

Since FFY 2017, CWI has created a 2.5-hour clinical practice webinar, 5 in-service courses, and 17 E-learning modules to support casework and practice around the statewide Family Assessment and Action Planning initial policy training that was previously submitted. Other important highlights include a training series for managers that direct the work of caseworker supervisors and a training series for new supervisors.

Additionally, in this last quarter, a complete review and revision of the existing DCF New Social Worker Preservice Training (NSWPT) course were initiated. The end goal is to have a rigorous formal curriculum (e.g., trainer guide and student manual, etc.) and parallel field-based transfer of learning process that reinforces NSWPT learning and base competencies. Lastly, DCF is in the process of looking at Family Resources competencies and the development of formal training.

DCF provides its new training plan on the following pages.

### **Cost allocation methodology for claiming training**

The cost allocation methodology indicated below is based upon the subject matter of each training, the length of each training, the salary of each participant, non-salary expenses, and the CAP code for each participant or expense.

- (1) Identify training topics allowable at varying percentages (0%, 50%, or 75%).
- (2) Calculate salary expenses associated with allowable trainings.



- a. For each training, produce a list with DCF participant (trainer or attendee) names, duration in hours, and date of training.
  - b. For each DCF participant, calculate percentage of their time spent in allowable trainings.
  - c. For each DCF participant, based on that percentage, calculate percentage of their salary in the claiming period spent and identify salary expenses for allowable training hours.
  - d. Sum the training time salary in each CAP cost pool.
  - e. Transfer identified training time salary from the dollars in each CAP cost pool to the appropriate Training (50% or 75%) cost pool.
- (3) Calculate non-salary expenses associated with allowable trainings.
- a. Transfer identified expenses from the dollars in each CAP cost pool to the appropriate training (50% or 75%) cost pool.

**Commonwealth of Massachusetts Department of**

**Children & Families**

**Child Welfare Institute Training Plan**

**2015-2019**

**Revised: June 1, 2018**

**FFY 2019 DCF Training Plan  
Department of Children and Families  
Child Welfare Institute**

The primary goal of the CWI is to promote effective child welfare practice. CWI activities strive to improve the knowledge and skills of individual social workers; the quality of supervision; and the agency environment that promotes creativity and professional growth. The CWI is committed to advancing the strategic goals and objectives of the Department of Children and Families.

**FFY 2019 DCF Training Plan  
Department of Children and Families  
Child Welfare Institute**

This is an updated state training plan for Fiscal 2019. In Fiscal Year 2018, The Commonwealth of Massachusetts made wholesale revisions to the existing training plan to allow for specific Title IV-E appropriate federal financial participation. This training plan is submitted as required by intersecting federal law, regulation, and Program Instructions (ACYF-CB-PI-04—01; 45 CFR 1356.60 (b); 45 CFR 1357.15 (t) (1); and 45 CFR 235.60-235.66), lays out the planned training activities for DCF to achieve a higher level of excellence in staff development in child welfare practice. The allocation descriptions herein reflect claiming mechanisms as required by Title IV-E for enhanced federal financial participation.

The coursework and programmatic details included in this plan are organized in accordance with the requirements noted specifically in ACYF-CB-PI-04-01 using the following key where the label for each row in this section of the report represents a shortened version of a corresponding federal requirement:

## Training Plan



### **FY 2019 Title IV-E Training Plan**

#### **Purpose**

The Child Welfare Institute (CWI) is the professional development and training division of the Department of Children and Families. The purpose of the CWI is to improve child welfare practice in the Commonwealth. Through a focus on three interdependent responsibilities, the CWI promotes a shared understanding of and agreement about the Department's core practice values, commitments, and priorities; teaches the knowledge, skills, and child welfare best practices, which makes it more feasible for social workers to help families keep their children safe; and, supports the continuous learning of social workers, supervisors, and managers as they lead agency initiatives and practice innovations.

#### **Context: Highlights of FY2018**

The CWI is focused on a vision of providing high quality, evidence-informed, and relevant training programs that are helpful to the approximately 4050 DCF social workers, supervisors, managers, and administrative staff across the Commonwealth in their efforts to ensure the safety, permanence, and well-being of children and families. The CWI had a budget of 2.5 million dollars for FY2017. The appropriation for FY2018 to fund CWI training programs is expected to be unchanged at approximately 2.8 million dollars. This represents a stable funding level to support professional development and learning programs for DCF staff. The CWI consists of 11 full-time staff members focused on training and professional development programs (Director, Associate Director, 4 Professional Development Managers, 2 Program Coordinators, Fiscal Coordinator, Administrative Assistant, and a Coordinator of Fellowship Programs) and a number of part-time contracted training specialists. The CWI also employs a part-time librarian to manage the DCF child welfare library. CWI training managers oversee the design, development and implementation of agency training programs, coordinate the work of external trainers, and conduct a considerable amount of classroom training, train DCF policy, and support practice innovations in the field.

## Training Plan

CWI has advanced and implemented a series of programs framed by DCF's overarching priorities. With a considered strategy to promote continuous learning and a professional identity for child welfare social workers, supervisors and managers at DCF, the CWI promotes organizational effectiveness by building on our many strengths of training, including:

- o The agency's core practice expectations clearly state that continuous learning is key for professional growth and organizational improvement.
- o CWI staff promote critical thinking, are dedicated and experienced child welfare practitioners and facilitators of innovative learning for staff.
- o The agency has a highly educated and experienced workforce.
- o Historically, staff turn-over rates have been low which promotes a deep knowledge of the child welfare system and practical experience in the agency.
- o The CWI has created an approach to curriculum design and training development that is founded on current child welfare best practices.
- o The CWI offers practice and implementation coaching to support the transfer of learning from the classroom to the field.
- o The CWI contributes to the planning and implementation of policy change initiatives.
- o The CWI supports DCF staff efforts to become licensed social workers. As of June 1, 2018, 99% of DCF social workers held a license.
- o Training programs offered by the CWI have continually evolved to include a variety of professional development opportunities for staff, including MSW fellowships, Post-masters clinical certificate programs, clinical practice in-service training, child welfare conferences, and orientation training for newly hired staff.
- o Staff training and professional development are essential agency priorities which strengthen effective succession planning and cultivate organizational leadership.
- o The CWI has a clear budget allocation from a dedicated line-item within the DCF appropriation.
- o In June 2017, the CWI opened its dedicated statewide training center. This facility is a large training and conference space to house all of the CWI training events. This is a significant milestone for the CWI as it creates a permanent physical space that is designed specifically to support professional learning opportunities.

## Training Plan

Over the years, the department has continued to expand, diversify, and evolve training and professional development programs for staff. This has included a continuous revision of the New Social Worker Preservice Training, the evolution of the Supervisor Professional Development Program, and the creation of a Child Welfare Supervisor Practice Model. These examples are a sample of the many progressive and meaningful learning programs lead by the CWI. All of the programs designed and implemented by the CWI are informed through agency priorities and policies, best practices, a close connection to the field, and direct participation from staff at all levels of the agency. The CWI gathers input through practice committees, field advisory groups, focus groups, and the feedback received from each training event to upgrade the learning experience for all participants.

### **Desired Outcomes**

Framed and organized by the DCF policy and practice priorities, the CWI training and professional development programs are focused on the following important outcomes:

- Social workers, supervisors, and managers will leave any learning experience with an increased sense of their capacity, competency, and confidence in child welfare practice.
- Participants will demonstrate child welfare practices that increasingly improve the level of safety, permanency, and well-being for children and families.
- Participants will embrace continuous learning as a key to professional growth, professional identity, and advancement in the agency.

### **Framework for Professional Development**

The Department of Children and Families, through its Child Welfare Institute, employs an innovative methodology for engaging staff in training and learning forums. The CWI helps staff demonstrate practice skills that reflect the agency's practice expectations of critical thinking, clinical formulation, team decision making, basic analysis, and quality oversight to support safety, permanency, and well-being. Interactive facilitation is an approach to training used by CWI to engage participants through their own experiences and knowledge. An essential principle of this approach is that child welfare social work is a defined, unique and distinct profession within the field of social work. As a profession, child welfare social workers embrace a clear set of values which describe why their work is important and necessary. They also share common principles about how the work gets done in an effective manner. Further, the profession of child welfare social work requires that staff have a grasp of core competencies and specific knowledge and skills needed to help families keep their children safe. Finally, the profession of child welfare social work utilizes unique tools to facilitate the engagement, assessment and planning processes with vulnerable children and families.

## Training Plan

Understanding that the purpose of training for DCF staff is to prepare social workers, supervisors and managers with the practices and skills needed to engage with families, the CWI uses a practice and learner-centered design that blends classroom and online learning. This approach helps participants gain more confidence using new skills and tools in practice. Practice and learner-centered principles are directly aligned with a basic tenet of adult learning - that learning is an individual's process of incorporating new ideas and actions to enhance their existing knowledge base or skill set.

A practice and learner-centered approach changes the relationship between the trainer, the participant, and the course material. The role of the trainer transforms from “the expert with the answers” to “the facilitator asking questions”. This supports a shift in the development of new practice skills that capitalize on the power of questions to promote critical thinking in a shared learning experience. In order for the CWI to successfully prepare staff for the demands of child welfare work, trainers and facilitators must master a range of facilitation skills and have knowledge of the content needed to effectively lead adult learning. Facilitators are challenged to demonstrate these advanced skills in order to help social workers, supervisors, and managers:

- know the importance of safety, permanency, and well-being in their daily practice and work
- understand the purpose and application of critical thinking, clinical formulation, team decision making, basic analysis, and quality oversight
- create a shared understanding and consistent implementation of DCF policy and procedures
- know how to access supervisory, management, and area office support in decision making
- have a commitment to the shared values and purpose of DCF interventions
- be able to reflect on their own practice skills and the impact that they have on families
- build collaboration among all key stakeholders needed to help families keep their children safe
- learn about tools that support their work and have confidence in using the appropriate tools effectively

This framework is a shift from the Department's traditional delivery of content based, expert driven training and appreciates that effective child welfare practice is less reliant on “what content a social worker knows”-- and more on practice and “how well a social worker can facilitate change”. This distinction informs the emergent curriculum design of the CWI professional development programs, in particular the New Social Worker Preservice Training and the Supervisor Professional Development Program.



**Scope of DCF Training and Professional Development Activities**

The CWI has responsibility for providing training and professional growth opportunities for all of the approximately 4,000 staff. The learning programs available to staff through the CWI are varied and include:

- o New Social Worker Preservice Training Program
- o New Supervisor Professional Development Program
- o Response/Hotline Training
- o New Area Program Manager Training
- o In-Service, Evidence-Based Practice Training
- o Field Based Implementation and Practice Coaching
- o MSW Fellowship Program
- o Post-Masters Clinical Certificate Programs
- o Professional Certificate Programs
- o Licensing Test Preparation
- o Professional Conferences
- o Policy Implementation and Training

**The CWI is limited to training data showing participation rates for the following programs in Fiscal Year 2017:**

- o New Social Worker Preservice Training Program had about 565 individuals divided by monthly training groups for 12 months in FY2018
- o New Supervisor Professional Development Program included 120 individuals in three separate training series during FY2018
- o NASW Licensing Test Preparation Course included approximately 450 participants during FY2018
- o In-Service training for new social workers (total participants: 1674) included the following topics:
  - Effective Strategies,
  - Trauma Informed Practice,
  - Integrated Clinical Practice,
  - Foundations of Health and Wellbeing, and
  - Writing and Testifying in the Legal Process
- o New Area Program Manager training had 37 participants attend the series during FY2018
- o Protective Response Training series had 180 participants in three separate training groups during FY2018

## Training Plan

- o Professional Conference slots: 520 individuals were registered to attend conferences in fiscal year 2018

- o In-Service Training: Although cumbersome to calculate in the Commonwealth's LMS called PACE, the CWI estimates that 2700 slots were filled by DCF staff for professional development and advanced practice workshops.

The CWI offers extensive professional education opportunities for staff including MSW Fellowships and professional certificates. Although tracking of participation in these programs occurs outside of the PACE system, the data presented below is considered to be accurate:

- o MSW Fellowship Program, in its thirteen years, has included over 180 DCF staff from the schools of social work at Salem State University, Bridgewater State University, Westfield State University, Springfield College, and Simmons College.

- o Each year, up to 20 DCF staff are awarded Fellowships to attend MSW programs in the partnering universities. The Fellowship supports student academic learning through the completion of the MSW program.

- o Simmons College School of Social Work Post Master's Clinical Certificate in Trauma included 22 DCF staff in the class for FY2018

- o Bridgewater Child Welfare Certificate in Trauma Informed Practice has enrolled 22 DCF social workers in a year-long academic program

- o Springfield College Post-Masters Certificate Program in Advanced Practice with Children and Adolescents included 20 DCF staff members

- o The Commonwealth offers tuition remission benefits to all employees who are attending degree programs at state colleges and universities.

- o Through the DCF tuition support program, eligible staff members can receive a tuition reimbursement of up to \$1,000 per year to assist with the costs of their graduate level education when they attend a private college or university

## Training Plan

### **CWI Training and Professional Development Activities**

The CWI offers a range of training opportunities for DCF staff. (Please refer to the ACF Title IV-E State Training Plan for a detailed list and explanation of the training and professional development programs offered to DCF staff.) The following table summarizes the primary CWI training programs and identifies the steps necessary to connect the curriculum and content of these topics to the major strategic areas and priorities for organizational effectiveness and practice improvement:

Training Program	Current Program Objectives and Highlights	Program Goals and Objectives
New Social Worker Pre-Service Training	<p>The NSWPT consists of 15 days of in-class training for the first month and 4 On-the-Job training days. New workers also attend 4 Evidence-Based Practice In-service workshops during first 6 months.</p> <p>The NSWPT curriculum engages participants to help them:</p> <ul style="list-style-type: none"> <li>understand the purpose of practice tools and can use tools to strengthen their initial involvement with families,</li> <li>commit to the shared values of effective child welfare practice and case processes to improve interventions with families,</li> <li>demonstrate that they are willing and able to reflect on their own practice skills and the impact that they have on families,</li> <li>Have an increased level of collaboration among all of the key stakeholders who are committed to continuous learning and professional development in the Department of Children and Families.</li> </ul>	<ul style="list-style-type: none"> <li>The NSWPT will serve as a national model for training new social workers</li> <li>CWI will work to integrate the content of NSWPT with trauma informed practices defined by the DCF trauma grant</li> <li>The CWI will continue to refine the training schedule to include necessary content</li> <li>The NSWPT curriculum and approach to training will be documented</li> <li>In-Service training for NSWPT will be developed further to align with the content and methods of the first month</li> <li>The CWI will facilitate stronger and consistent connections to the field to support OJT</li> <li>The CWI will include field staff directly in the training as co-facilitators</li> <li>The CWI will include family representatives intentionally in key training segments</li> </ul>
MSW Fellowship Program	Through partnerships with the schools of social work at Salem State University, Bridgewater State University, Springfield College, Westfield State University, and Simmons College, participating DCF social workers are advancing their education and practice skills and leadership opportunities.	In the future, the CWI will involve Fellows more as practice leaders to support the agency initiatives and learning culture. Fellows will play a more defined role in the NWPDP, as mentors and will promote the professionalization of social work at DCF.
Protective Intake and	The current 7-day training series represents an evolution of content and curriculum to better reflect revised agency policy.	Future development of the program will be guided by the emerging practices and include a more clear emphasis on trauma and the specific

Training Program	Current Program Objectives and Highlights	Program Goals and Objectives
Response Training Series	In addition, the CWI supports a regular conference to bring together Hotline workers to share best practices and challenges.	practice skills of safety organized child welfare work.
In-Service Training	The CWI offers topic-based training programs and workshops for all staff. The CWI has a partnership with CPI and the Bridge Training Series to offer a range of highly regarded trainings that are relevant to DCF staff.	In the next three years, the CWI will develop child welfare specific in-service training that capitalized on the clinical expertise of DCF staff as contributors to the content and delivery.
New Supervisor Training Series	The New Supervisor Training Series consists of 7 full days of training for newly hired child protection supervisors. This is a competency based training program which utilizes the DCF Supervisory practice framework and informed by the DCF Supervisor Policy. This series prepares staff for the transition to effective supervision with a focus on DCF policy and practice, unit team building and facilitation, group supervision processes, worker development and retention, and cultural humility.	In the coming fiscal year, the CWI will run this program to support the development of supervisors and expects to include approximately 75 newly hired supervisors. The program goals are focused on creating contemporary curriculum, supporting materials, and on-line learning resources to support supervisors in their work.
New APM Manager Training Series	This series of training is designed to support newer managers in the role as practice and policy leaders in the area offices. Participants engage in workshops focused on continuous quality improvement, cultural humility, managing change, facilitation of groups, effective decision making, and personnel management.	DCF has greatly expanded the workforce over the past fiscal year and this has cascaded to an increase in the number of area program managers. This positive development poses an opportunity for the CWI to engage larger numbers of managers while improving our approach to the learning experience. The upgrades that CWI hopes to make for FY18 focus on the identification of a competency model for DCF managers and the creation of on-line resources for distance based learning.

## Training Plan

DCF State Plan Label	Federal Language
“Training Description”	A brief, one paragraph syllabus of the training activity
“Admin Function”	Indication of the specifically allowable Title IV-E administrative functions the training activity addresses (45 CFR 1356.60 (c) (2) (i- x))
“Venue”	Indication of the setting/venue for the training activity
“Duration”	Indication of the duration category of the training activity (i.e. short-term, long-term, part-time, full-time) (45 CFR 235.63-235.66 (a))
“Provider”	Indication of the proposed provider of the training activity
“Days” and “Hours”	Specification of the approximate number of days/hours of the training activity
“Audience”	Indication of the audience to receive the training
“Cost”	Description of the estimated total cost
“Allocation”	Cost Allocation Methodology (45 CFR 1356.60; SEC. 474 (3) (A-B))
Training Criteria	Identification of % of overall training time spent on: 1. 75% FFP topic areas, 2. 50% FFP topic areas, and 3. 0% FFP topic areas

SECTION 1: NEW SOCIAL WORKER PDP	
Training Title	Day 1 Starting the Journey Welcome to DCF
Training Description	<p><b>Purpose</b></p> <ul style="list-style-type: none"> <li>• We are here to share in a dialogue and learn together about what it means to be a child welfare social worker for DCF and how families become involved with DCF.</li> <li>• We are here to learn about the training program and the role that we all play in making it successful.</li> </ul> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>• A better understanding of what it means to be a child welfare social worker.</li> <li>• A greater awareness of how power and authority impacts my engagement/relationship with children and families.</li> <li>• Able to articulate and describe the purpose of my work with children and families.</li> <li>• An understanding of the expectations of the New Social Worker Preservice Training Program.</li> <li>• An understanding of the HR policies, benefits, and professional expectations of working for DCF.</li> <li>• The knowledge and resources needed to begin the process of earning a social work license.</li> </ul>
Admin Function 1	Case management and supervision
Admin Function 2	Referral to services
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	1 per month (12 days per year)
Hours	7 per day (84 hours per year)
Audience	New social workers
Cost	\$400.00/day (\$4800 per year) estimated trainer costs
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	40%	<ul style="list-style-type: none"> <li>• Ethics training associated with a title IV-E State plan requirement, such as the confidentiality requirements in section 471(a)(8) of the Act. (20%)</li> <li>• Title IV-E policies and procedures. (20%)</li> </ul>
FFP Standard: 50%	60%	<ul style="list-style-type: none"> <li>• State agency personnel policies and procedures (40%)</li> <li>• Worker retention and worker safety (20%)</li> </ul>
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 2 (Part 1) Effective Decision Making in Child Welfare Practice	
Training Description	<p><b>Purpose</b> To share in a dialogue about how we make effective decisions in child welfare practice.</p> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>• Have a better understanding of what influences our decision-making.</li> <li>• Know what the key decisions are in DCF's work with families.</li> <li>• Understanding of what tools/resources available to assist decision-making.</li> </ul> <p>To share in a dialogue about how we make effective decisions in child welfare practice.</p>	<p><b>Content Learning Modules</b></p> <p>9:00-9:30: Introductions</p> <p>9:30-9:45: What are decisions?</p> <p>9:45-10:30: What are the key questions in DCF?</p> <p>10:30-10:45: Break</p> <p>10:45-11:00: How do we make significant decisions? What is the best process to follow?</p> <p>11:00-11:40: What influences our decision making process?</p> <p>11:40-12:00: What resources or tools are available to help us make decisions?</p> <p>12:00-1:00: Lunch</p>
Admin Function 1	Case Management and Supervision	
Admin Function 2	Placement of the Child	
Admin Function 3	0	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	CWI Staff/Trainer	
Days	1/2 per month (6 days per year)	
Hours	3.5 per day (42 hours per year)	
Audience	New social workers	
Cost	\$200.00/day (\$2400 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Identifying a child and families' risk for the removal of the child from the home (20%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (40%)</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (20%)</li> <li>• Title IV-E policies and procedures (20%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP	
<b>Training Title</b>	<b>Day 2 (Part 2) Strategies for Social Worker Safety in the Field and Lock Down Procedures</b>
<b>Training Description</b>	<p><b>Purpose</b> To share in a dialogue with experienced social workers and supervisors the most important ways to increase your safety while out in the field and Lockdown Procedure Desired Outcomes.</p> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>- Increased understanding of the challenges of being a DCF social worker</li> <li>- Basic understanding of the importance of the social worker client relationship as it relates to safety.</li> <li>- Enhance skills regarding de-escalation and identifying when to leave a potentially dangerous situation</li> <li>- Explore techniques to support safety during home visits and in the community</li> <li>- Understanding of risk assessment for social workers when working with gangs, individuals with aggressive behaviors, mental health worries, or substance abuse-- and how to engage safety</li> </ul>
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Placement of the Child
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	Massachusetts State Police Academy Trainers
<b>Days</b>	1/2 per month (6 days per year)
<b>Hours</b>	3.5 per day (42 hours per year)
<b>Audience</b>	New social workers
<b>Cost</b>	\$200.00/day (\$2400 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	No	
<b>If Yes is the Caseload Partial/Full?</b>	No	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	100%	• Worker retention and worker safety (100%)
<b>FFP Unclaimable</b>	0%	N/A



SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 3 Child Development-- Connection, Consistency, and Contact	
Training Description	<p><b>Purpose</b> To integrate the concepts of child and youth development across ages and stages, with awareness of the impact of early traumatic experience.</p> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>• Increased knowledge of the domains of well-being;</li> <li>• Increased knowledge of the key issues related to health and well-being in child welfare practice;</li> <li>• Knowledge of how to access child care for DCF families;</li> <li>• A basic understanding of school readiness, and the provision of Early Intervention, K-12 education, post-secondary education, and special education;</li> <li>• Awareness that all DCF children have medical needs and that they exist on a continuum ranging from well child to special medical needs;</li> <li>• Increased knowledge of adolescent support services;</li> </ul> <p>Have awareness of protective factors and positive youth</p>	<p><b>Content Learning Modules</b></p> <p>9:00-9:15: Introductions and Overview  9:15-10:30: The relational aspect of child development?  10:30-10:45: Break  10:45-12:00: Cont.  12:00-1:00: Lunch  1:00-2:00: Educational needs of Children Working with DCF  2:00-3:30: Neurobiological  2:00-3:45: Adolescent Services  3:45-4:00: Questions and Wrap-up</p>
Admin Function 1	Case Management and Supervision	
Admin Function 2	Placement of the Child	
Admin Function 3	Development of the Case Plan	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	CWI Staff/Trainer	
Days	1 per month (12 days per year)	
Hours	7 per day (84 hours per year)	
Audience	New social workers	
Cost	\$400.00/day (\$4800 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	

TRAINING CRITERIA for Federal Financial		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (10%)</li> <li>• Child development (90%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 4 Child Abuse and Neglect-- How do you know if a child is safe	
Training Description	<b>Purpose</b> To share in a dialogue about the key practices to understand what it means for children to be safe.	<b>Content Learning Modules</b> 9:00 - 9:15: Welcome, introductions and check in on previous day, review desired outcomes. 9:15-10:15: “What Do You Think?” exercise? Workers are asked to respond to vague scenarios. Is it abuse or neglect? 10:15-10:25: Break 10:25-10:45: Review DCF definitions of abuse, neglect, sexual abuse, caregiver, etc. 10:45-11:15: Revisit scenarios of child maltreatment. Provide answers consistent with DCF definitions of child maltreatment. 11:15-11:40: Watch Darkness 2 Light Childhood Stories video on sexual abuse. 11:40-12:00: Small group discussion at tables. Report out to large group. 12:00-1:00: Lunch 1:00- 1:15: Provide overview of risk & protective factors in child welfare. 1:15-1:30: Read Carol Smith 51A 1:30-2:00: Group work. Review PP slides which address risk & protective factors. Identify risk & protective factors relative to the Smith family. 2:00-2:30: Introduce the process of safety mapping. Groups will safety map the Smith case. 2:30-2:40: Break 2:40-3:00: Teach groups how to write Danger/Risk Statements. Practice writing statements on Smith case. 3:00-4:00: Presentation from DCF Health & Medical Services Team
	<b>Desired Outcomes - Participants will leave the day with:</b> <ul style="list-style-type: none"><li>• Know how we address child safety.</li><li>• Have increased understanding of the DCF mandate and policies on the assessment of child safety.</li><li>• Have increased understanding of tools that facilitate the assessment of danger, safety and risk.</li></ul>	
	Admin Function 1 Case Management and Supervision	
	Admin Function 2 Placement of the Child	
	Admin Function 3 Development of the Case Plan	
	Admin Function 4 0	
	Venue Agency Training Space	
	Duration Short Term - Part Time	
	Provider CWI Staff/Trainer	
	Days 1 per month (12 days per year)	
Hours 7 per day (84 hours per year)		
Audience New social workers		
Cost \$400.00/day (\$4800 per year) estimated trainer costs		
Allocation Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.		
TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a		No
If Yes is the Caseload		No
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"><li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (30%)</li><li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li><li>• Family Visitation (10%)</li><li>• Communication skills required to work with children and families (10%)</li><li>• Assessments to determine whether a situation requires a child’s removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not</li></ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 5 Engaging Families	
Training Description	<b>Purpose</b> To share in a dialogue and learn how to involve children, families, and their support network in the essential process of ensuring child safety, permanency, and wellbeing.	<b>Content Learning Modules</b> 9:00-9:15: Introductions 9:15-9:40: Dialogue identifying “what makes a person helpful” 9:40-10:00: Essential factors of engagement. 10:00-10:15: Listening to the voices of DCF involved parents and children 10:15-10:25: Break 10:25 -10:45: Understanding the various reasons why parents do not want to work with DCF. 10:45-11:30: Group exercise strategizing how to answer the “tough questions” that parents ask. 11:30-12:00: Solution Focused Questions 12:00-1:00: Lunch 1:00-2:15: Home Visit touchpoints and using the concept of open, narrow, close-in relation to interviewing. 2:15-2:25: Break 2:25-3:00: Engaging children at different developmental stages. 3:00-4:00: Guest Fatherhood advocate speaks to the group about fatherhood engagement.
	<b>Desired Outcomes - Participants will leave the day with:</b> <ul style="list-style-type: none"> <li>• Increase their understanding of the techniques and tools to engage adults and children.</li> <li>• Increase their understanding of what family-centered, strength-based practice looks like.</li> <li>• Increase their familiarity with solution focused interviewing techniques.</li> <li>• Understand the importance of engaging fathers in the DCF casework process.</li> </ul>	
Admin Function 1	Case Management and Supervision	
Admin Function 2	Placement of the Child	
Admin Function 3	Development of the Case Plan	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	CWI Staff/Trainer	
Days	1 per month (12 days per year)	
Hours	7 per day (84 hours per year)	
Audience	New social workers	
Cost	\$400.00/day (\$4800 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (50%)</li> <li>• Communication skills required to work with children and families (25%)</li> <li>• Family Visitation (25%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
<b>Training Title</b>	<b>Day 6 (AM Session) Cultural Humility and Engaging Families Across Difference</b>	
<b>Training Description</b>	<p><b>Purpose</b> To talk about culture and its impact on beliefs, values and practices in families and in our society.</p> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>• Understand the foundations of cultural humility in practice;</li> <li>• Increase awareness of one's own cultural values, beliefs, and practices;</li> <li>• Awareness that difference is not deviance.</li> <li>• Increase their familiarity with solution focused interviewing techniques.</li> </ul>	<p><b>Content Learning Modules</b></p> <p>9:00-10:00: What do we mean by cultural humility?  10:00-10:45: Reflection on your own cultural values, beliefs, and practices;  10:45-11:00: Break  11:00-11:15: Difference is not deviance  11:15-12:00: Introduction to solution focused interviewing techniques.</p>
<b>Admin Function 1</b>	Case Management and Supervision	
<b>Admin Function 2</b>	Placement of the Child	
<b>Admin Function 3</b>	Development of the Case Plan	
<b>Admin Function 4</b>	0	
<b>Venue</b>	Agency Training Space	
<b>Duration</b>	Short Term - Part Time	
<b>Provider</b>	CWI Staff/Trainer	
<b>Days</b>	1/2 day per month (6 days per year)	
<b>Hours</b>	3.5 hours per day (21 hours per year)	
<b>Audience</b>	New social workers	
<b>Cost</b>	\$200.00/day (\$2400 per year) estimated trainer costs	
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	No	
<b>If Yes is the Caseload Partial/Full?</b>	No	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (5%)</li> <li>• Communication skills required to work with children and families (10%)</li> <li>• Family Visitation (5%)</li> <li>• Cultural competency related to children and families (75%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

<b>SECTION 1: NEW SOCIAL WORKER PDP</b>	
<b>Training Title</b>	<b>Day 6 (PM Session) Engaging Adolescents in Child Protection Casework</b>
<b>Training Description</b>	To share in a dialogue and learn how to involve adolescents, community, and their support network in the essential process of ensuring safety, permanency, and wellbeing.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Placement of the Child
<b>Admin Function 3</b>	Development of the Case Plan
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1/2 day per month (6 days per year)
<b>Hours</b>	Day 6 (PM Session) Engaging Adolescents in Child Protection Casework
<b>Audience</b>	New social workers
<b>Cost</b>	\$200.00/day (\$2400 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	No	
<b>If Yes is the Caseload Partial/Full?</b>	No	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (30%)</li> <li>• Communication skills required to work with children and families (20%)</li> <li>• Child development (10%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 7 The Challenges that Families Face in Coping with Substance Abuse and Mental Health	
Training Description	<b>Purpose</b> To talk about and understand the range of challenges that families face and their strengths to succeed.	<b>Content Learning Modules:</b> 9:15-10:45: Contemporary research about the prevalence, trends, types, and treatment approaches 10:45-11:00: Break 11:00-12:00: Understanding Substance Use 12:00-1:00: Lunch 1:00-2:00: Impact of substance abuse on parenting and child safety 2:00-2:45: Dimensions of mental illness and contemporary treatment approaches 2:45-3:00: Break 3:00-4:00: Integrated practices in working with substance abuse and mental illness
	<b>Desired Outcomes - Participants will leave the day with:</b> <ul style="list-style-type: none"><li>• An increased understanding of the impact of substance abuse on individual and family functioning.</li><li>• An increased understanding of how substance abuse impacts the capacity of a parent to insure the safety and wellbeing of their child.</li><li>• An increased understanding of the various types of mental illness</li><li>• An increased knowledge of the contemporary treatment methods to help individuals with substance abuse problems and mental illness.</li><li>• Greater confidence in exploring family systems through the multicultural lens</li><li>• Increased understanding of how to facilitate a change process</li></ul>	
Admin Function 1	Case Management and Supervision	
Admin Function 2	Placement of the Child	
Admin Function 3	Development of the Case Plan	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	CWI Staff/Trainer	
Days	1 day per month (12 days per year)	
Hours	7 hours per day (84 hours per year)	
Audience	New social workers	
Cost	\$400.00/day (\$4800 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	
TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"><li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (10%)</li><li>• Communication skills required to work with children and families (10%)</li><li>• Assessments to determine whether a situation requires a child’s removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (10%)</li><li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (10%)</li><li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (60%)</li></ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 8 Engaging with Families—Domestic Violence	
Training Description	<p><b>Purpose</b> To share in a learning experience about the prevalence, impact, and intervention strategies for families struggling with domestic violence. Desired Outcomes The facilitator will describe the learning outcomes for this day of training and ask the group to add any other ideas that they might have.</p> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>• Leave with a greater understanding of the definition of domestic violence, the impact of violence on family dynamics, and the long term effects on children who witness violence.</li> <li>• Learn to build cooperative approaches to engaging families plagued by violence</li> <li>• Increase their knowledge of the key elements of a safety plan</li> <li>• Identify strategies to insure personal safety while working to engage families where violence is a factor</li> </ul>	<p><b>Content Learning Modules:</b></p> <p>9:00-10:00: What is the definition of Domestic Violence — Prevalence and contemporary research  10:00-10:45: The impact of violence on family dynamics  10:45-11:00: Break  11:00-12:00: Children who witness violence in their homes  12:00-1:00: Lunch  1:00-2:15: Engagement strategies and intervention skills  2:15-2:45: Understanding the process and elements of effective safety planning  2:45-3:00: Break  3:00-4:00: Worker safety in planning for home visits and interactions with the batterer</p>
Admin Function 1	Case Management and Supervision	
Admin Function 2	Placement of the Child	
Admin Function 3	Development of the Case Plan	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	CWI Staff/Trainer	
Days	1 day per month (12 days per year)	
Hours	7 hours per day (84 hours per year)	
Audience	New social workers	
Cost	\$400.00/day (\$4800 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (10%)</li> <li>• Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (10%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system. if the training is not related to providing treatment or services (80%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 9 Assessment and Pattern Recognition	
Training Description	<p><b>Purpose</b> To talk about the skills needed for effective assessment and pattern recognition in child welfare practice.</p> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>Increased understanding of available tools used to gather information to assess danger, risk, and safety: three houses, safety house, safety mapping, ecomaps, and genograms.</li> <li>Understand how to develop and write a clinical formulation.</li> </ul>	<p><b>Content Learning Modules:</b></p> <p>9:00-9:50: Brief check-in, Assessment as an event or Assessing as a Process, Three Houses tool</p> <p>9:50-10:20: Introduce the Safety House tool. Explain process. Provide example.</p> <p>10:20-10:30: Break</p> <p>10:30-11:00: Video and Role-Play using Three Houses and Safety House tools</p> <p>11:00-12:00: Using Genograms, Using Eco-Maps</p> <p>12:00-1:00: Lunch</p> <p>1:00-1:15: The DCF Casework Timeline</p> <p>1:15-2:15: Revisit the Smith case. (The Smith 51B should have been read by all for homework.) Review the safety mapping process. Group activity: Map the Smith case post 51B. Report out to large group.</p> <p>2:15-2:25: Break</p> <p>2:25-3:30: Clinical formulation</p> <p>3:30-4:00: Report back to large group. Questions and answers, wrap up.</p>
Admin Function 1	Case Management and Supervision	
Admin Function 2	Placement of the Child	
Admin Function 3	Development of the Case Plan	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	Contracted Trainer	
Days	1 day per month (12 days per year)	
Hours	7 hours per day (84 hours per year)	
Audience	New social workers	
Cost	\$950.00/day (\$11400 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li> <li>Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (5%)</li> <li>Child development (5%)</li> <li>Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services (30%)</li> <li>Communication skills required to work with children and families (10%)</li> <li>Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (30%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A



SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 10 Assessment Action Planning Day 1 of 2	
Training Description	<b>Purpose</b> To talk about and practice writing assessments and formulations.	<b>Content Learning Modules:</b> 9:10-10:00: Family Assessment and Action Policy: Policy highlights, timelines, and practice elements 10:00-10:20: Five parental protective factors 10:20-10:30: Break 10:30-11:00: Using a case scenario or video clip, have workers talk about what should be done before, during, and after the first visit for an assessment. Report out to large group 11:00-12:00: Role-play, use of inquiry 12:00-1:00: Lunch 1:00-1:30: Continuing with the above case or clip, ask workers to identify a list of collateral contacts and the questions they would ask. Role-play/practice 1:30-2:00: The essential data and information we need to gather 2:00-2:15: Develop genogram on the family used in the scenario or clip 2:15-2:25: Break 2:25-2:50: Table activity. Role play parts of the assessment process 2:50-3:15: Each table writes up their section of the assessment 3:15-3:40: Each table reads their section of the assessment 3:40-4:00: Review of parental protective factors, danger, risk, and safety, patterns of protection/harm, themes, worries,
	<b>Desired Outcomes - Participants will leave the day with:</b> • Increase understanding of the essential elements of the Assessment and Action Plan; • Knowledge of assessment and action plan policies and timelines; • Understand assessment and action plan as a process and a product; • Have strategies for conducting a home visit; • Know how to develop a clinical formulation; • Know how to document information.	
Admin Function 1	Case Management and Supervision	
Admin Function 2	Placement of the Child	
Admin Function 3	Development of the Case Plan	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	Contracted Trainer	
Days	1 day per month (12 days per year)	
Hours	7 hours per day (84 hours per year)	
Audience	New social workers	
Cost	\$950.00/day (\$11400 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	
TRAINING CRITERIA for Federal Financial		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"><li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (40%)</li><li>• Assessments to determine whether a situation requires a child’s removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (5%)</li><li>• Child development (20%)</li><li>• Training on referrals to services, not how to perform the service (15%)</li><li>• Identifying a child and families’ risk for the removal of the child from the home (20%)</li></ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 11 Assessment Action planning Day 2 of 2	
Training Description	<b>Purpose</b> We are here to share in a dialogue and learn together about how to set goals with families to achieve positive outcomes.	<b>Content Learning Modules:</b> This learning experience will include a strong focus on effective writing and documentation through exercises and activities). 9:00-9:30: Review and Update from Prior Training Day: 9:30-10:45: What is the purpose of an Action plan? What does the Family Assessment Action Plan policy say 10:45-12:00: Break, How do we partner with families to develop goals? (Use of solution focused questions, safety mapping, danger and risk statements and-safety goals) 12:00-1:00: Lunch 1:00-1:45: How do we facilitate the implementation of Action Plans? (Family Safety Networks) 1:45-2:00: How can Family Safety Networks promote safety, permanency and well-being for children? 2:00-2:45: How can we include a Child's Voice in Safety and Action planning? (3-Houses and Safety House) 2:45-3:00: Break 3:00-3:45: What are the key elements of an effective Safety Plan? 3:45-4:00: Wrap-Up, Review and Questions
	<b>Desired Outcomes - Participants will leave the day with:</b> • An understanding of the purpose of a DCF Assessment and Action plan • An understanding of the difference between a Safety Plan and Action Plan • An increased knowledge about Assessment and Action Plan policy and process • Participants will leave with concrete resources and tools to help them work most effectively with families in the goal setting process.	
	Admin Function 1	Case Management and Supervision
	Admin Function 2	Placement of the Child
	Admin Function 3	Development of the Case Plan
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	Contracted Trainer	
Days	1 day per month (12 days per year)	
Hours	7 hours per day (84 hours per year)	
Audience	New social workers	
Cost	\$950.00/day (\$11400 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	
TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	• Social work practice, such as family centered practice and social work methods including interviewing and assessment (40%) • Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (5%) • Child development (20%) • Training on referrals to services, not how to perform the service (15%) • Identifying a child and families' risk for the removal of the child from the home (20%)
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 12 Permanency and Placement-- How do we make the decision to place a child out of the home and achieve permanency	
Training Description	<b>Purpose</b> We are here today to talk about the decision to place a child out of the home and the goals for permanency.	<b>Content Learning Modules:</b> 9:00-9:30: Review and Update from Prior Training Day: 9:30-9:45: What is the Definition of Permanency? (Placement is not permanency) 9:45-10:15: How do you Feel about Prospect of Removing Children from their Families? 10:15-11:00: What are the Possible Impacts on the Child from Placement? 11:00-11:15: Break 11:15-12:00: What does the DCF Policy and Regulation say about Placing Children Out of the Home? 12:00-1:00: Lunch 1:00-1:40: How do we Know when Placement is Necessary? (Intuitive and Analytical Thinking, Safety Assessment Tool and collaboration with key-Stakeholders and DCF legal staff and specialists) 1:40-2:30: How can you Engage and Partner with Caregivers in the Process of Removing Children from the Home? (Family Safety Circles, Fatherhood Engagement, Safety Planning, Service Planning) 2:30-2:45: What is the Role of Networks in Developing a Reunification Plan? 2:45-3:00: Break 3:00-3:45: When a Child is in Placement, how Can we Help Caregiver Demonstrate Acts of Protection? (The importance of parent/child visitation) 3:45-4:00: Wrap-Up, Review and Questions
	<b>Desired Outcomes - Participants will leave the day with:</b> <ul style="list-style-type: none"><li>• An understanding of why DCF would take action to place a child out of their home.</li><li>• An appreciation of the traumatic psychological impact of removing a child from their home.</li><li>• An understanding of your own reaction to having to remove a child and the values you have about this aspect of work.</li><li>• An increased knowledge of the types of placements facilitated by DCF.</li><li>• An understanding of the process of reunification.</li><li>• The knowledge and skills needed to create meaningful visitation for children and caregivers.</li></ul>	
Admin Function 1	Case Management and Supervision	
Admin Function 2	Placement of the Child	
Admin Function 3	Development of the Case Plan	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	Contracted Trainer	
Days	1 day per month (12 days per year)	
Hours	7 hours per day (84 hours per year)	
Audience	New social workers	
Cost	\$950.00/day (\$11400 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	
TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"><li>• Permanency planning including using kinship care as a resource for children involved with the child welfare system (40%)</li><li>• Assessments to determine whether a situation requires a child’s removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (40%)</li><li>• Identifying a child and families’ risk for the removal of the child from the home (20%)</li></ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
Training Title	Day 13 What do we need to know about the Legal Process Involved in Child Placement	
Training Description	<p><b>Purpose</b> To share in a dialogue and varied learning activities to explore the law and policy informing the removal of children from their home. Also to work together to understand the court process and oversight in promoting the goal of permanency.</p> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>• Knowledge of the scope and limitations of DCF's responsibility in placement cases.</li> <li>• An increased understanding of the how a placement case moves through the legal process.</li> <li>• Increased confidence in the skills needed to write court reports, affidavits, and case narratives to document the court process.</li> <li>• The ability to describe the reason for alternate permanency plans in compliance with the Adoption and Safe Families Act.</li> </ul>	<p><b>Content Learning Modules:</b></p> <p>9:00-9:30: Review and Update from Prior Training Day: 9:30-10:45: What is the Role of a DCF Attorney and When should I Contact the Attorney in my Region? (Integrating Safety Mapping, Safety Assessment Tool, Danger and Risk Statements, and Safety Goals into the Legal Consult).</p> <p>10:45-11:00: Break 11:00-12:00: What is custody? What does it mean for DCF to have custody of a child? (Using case examples) 12:00-1:00: Lunch 1:00-1:30: What does it mean to file a Care and Protection Petition? (The process, the people and writing the Affidavit) 1:30-1:45: What do you need to know about appearing in court? (Building your own confidence in giving testimony and the utility of the Dialogue Structure) 1:45-2:15: What will happen at the 72 Hour Hearing? 2:15-2:30: Break 2:30-2:45: What needs to happen when DCF is Granted Temporary Custody? 2:45-3:30: What happens if the Caregivers aren't able to Demonstrate Acts of Protection Necessary for-Reunification? (Permanency Planning Conferences) 3:30-4:00: Wrap-Up, Review and Questions</p>
Admin Function 1	Preparation for and Participation in Judicial Determinations;	
Admin Function 2	Placement of the Child	
Admin Function 3	Development of the Case Plan	
Admin Function 4	Case Reviews	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	CWI Staff/Trainer	
Days	1 day per month (12 days per year)	
Hours	7 hours per day (84 hours per year)	
Audience	New social workers	
Cost	\$400.00/day (\$4800 per year) estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	60%	<ul style="list-style-type: none"> <li>• Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services (40%)</li> <li>• Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (20%)</li> </ul>
FFP Standard: 50%	40%	<ul style="list-style-type: none"> <li>• State agency personnel policies and procedures (40%)</li> </ul>
FFP Unclaimable	0%	N/A

SECTION 1: NEW SOCIAL WORKER PDP		
<b>Training Title</b>	<b>Day 14 Transition to the Area Office</b>	
<b>Training Description</b>	<p><b>Purpose</b> To share in a dialogue about the shift from the training program to full time case management in the area office, and to consider the factors that impact workplace safety in the area office.</p> <p><b>Desired Outcomes - Participants will leave the day with:</b></p> <ul style="list-style-type: none"> <li>• The confidence to begin their career in child welfare social work</li> <li>• A clear understanding about how to help families keep their children safe</li> <li>• An increase awareness of workplace safety</li> <li>• An introduction to their bargaining unit leaders and the benefits of being a union member</li> <li>• Understanding of follow up trainings</li> <li>• Expectations for Licensure and Probation</li> </ul>	<p><b>Content Learning Modules:</b></p> <p>9:00-10:00: Presentation on Licensure and Continuous Learning Opportunities  10:00-11:00: Preparing to transition to the field  11:00-11:15: Break  11:15-12:00: Preparing to transition to the field  12:00-1:00: Lunch  1:00-2:00: NSWDPDP Review Union Presentation  2:00-2:15: Break  2:15-3:15: Union  3:15-4:00: Self-Reflection, continuous learning, and Wrap-up of the NSWDPDP</p>
<b>Admin Function 1</b>	Case Management and Supervision	
<b>Admin Function 2</b>	0	
<b>Admin Function 3</b>	0	
<b>Admin Function 4</b>	0	
<b>Venue</b>	Agency Training Space	
<b>Duration</b>	Short Term - Part Time	
<b>Provider</b>	CWI Staff/Trainer	
<b>Days</b>	1 day per month (12 days per year)	
<b>Hours</b>	7 hours per day (84 hours per year)	
<b>Audience</b>	New social workers	
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs	
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	No	
<b>If Yes is the Caseload Partial/Full?</b>	No	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	100%	<ul style="list-style-type: none"> <li>• Safe driving (10%)</li> <li>• Worker retention and worker safety (30%)</li> <li>• State agency personnel policies and procedures (60%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>Assessing and Building Protective Capacities within Families</b>
<b>Training Description</b>	A conversation about research-based Protective Factors, and why/how they provide a foundation for assessing Protective Parental Capacity in our Family Assessment. Participants will become familiar with the five Protective Factors, enhance strategies for assessing and developing protective capacities, how Parental Capacities fit into the Family Assessment and Action Plan. How Safety Informed Practice (Safety Mapping, Danger/Risk Statements, Safety Goals and Family Safety Circles) contributes to assessment of parental capacity and each family's unique ability or challenge to keeping their children safe.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Full	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (40%)</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (20%)</li> <li>• Child development (20%)</li> <li>• Identifying a child and families' risk for the removal of the child from the home (20%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	(FAAP) Beginning the FAAP: Creating the Family Profile and Functioning
Training Description	Child safety, permanency and wellbeing are the guiding principles of the Family Assessment and Action Planning Policy. In becoming familiar with a family's history, both past and present, we become acquainted with the unique attributes that make them who they are as well as the journey that brought the family to our attention. Through the processes of engagement and transparency we will participate in a joint effort to identify and address area of concern that require strengthening while assisting in expanding their network of family and community supports.
Admin Function 1	Case Management and Supervision
Admin Function 2	0
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	1 day per training day (5 trainings/year)
Hours	7 hours per day (35 hours per year)
Audience	DCF staff
Cost	\$400.00/day (\$4800 per year) estimated trainer costs
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (80%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (10%)</li> <li>• Child development (10%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Clinical Formulation- Pulling it All Together</b>
<b>Training Description</b>	Conversations about the Why, What and How of clinical formulation in FAAP. During this workshop participants will understand the value and content of clinical formulation in CPS work and be able to develop a clinical formulation that clearly state the reasons for DCF involvement, show the level of family engagement, create a realistic case plan for what needs to change to promote child safety, permanency and well-being, establish realistic safety/case goals, and work toward timely case closures.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (40%)</li> <li>• Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services (20%)</li> <li>• Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (20%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A



SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>(FAAP) Partnering with Families to Develop Action Plans that Maintain Child Safety, Achieve Permanence and Support Child Well Being</b>
<b>Training Description</b>	This interactive workshop will address how to create actions plans with families in a collaborative and transparent manner to that there is shared understanding of what needs to be accomplished to maintain child safety, achieve permanence, support well-being, and eventually close the case. Special considerations related to action planning with young adults, and cases where adoption is the goal will also be addressed
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (40%)</li> <li>• Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services (20%)</li> <li>• Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (20%)</li> <li>• Communication skills required to work with children and families (20%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>(FAAP) They Don't Come with Instructions- Assessing and Understanding Children's Needs and Behaviors</b>
<b>Training Description</b>	Assessing and understanding children's needs and behavior is an essential part of child welfare. Attachment relationship can tell you a lot about a child's development and the impact of the caregiver, whether it be positive or negative. Child welfare workers need to understand the difference between secure, avoidant and anxious emotional connections, the need for consistency, and a safe, stable environment.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (30%)</li> <li>• Child development (60%)</li> <li>• Effects of separation (10%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	Adoption Forum --Working in Adoption and Supporting Informed Practice
Training Description	This annual forum is an opportunity for social workers to engage in discussions about the intricacies of adoption and highlight the complexity and challenges of working in adoption. Through what will be a rich discussion and a variety of other activities, participants will examine core information that guides and supports the complicated practice of adoption of children and youth living in foster care. Maintaining the best interest of children and youth and balancing the many aspects of adoption case management is challenging work. This forum is designed to inspire people to identify the challenges, solutions and support needed for the everyday demands and complexity of working with and on the behalf of children and youth living in foster care with the goal of adoption.
Admin Function 1	Case Management and Supervision
Admin Function 2	0
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	1 day per training day (5 trainings/year)
Hours	7 hours per day (35 hours per year)
Audience	DCF staff
Cost	\$400.00/day (\$4800 per year) estimated trainer costs
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Title IV-E policies and procedures (10%)</li> <li>• Child development (20%)</li> <li>• Effects of separation (10%)</li> <li>• Permanency planning including using kinship care as a resource for children involved with the child welfare system (30%)</li> <li>• Grief and loss (15%)</li> <li>• Communication skills required to work with children and families (15%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>Commercial Sexual Exploitation of Boys, Adolescent Males, and Trans Youth</b>
<b>Training Description</b>	Training on male related CSEC issues and ways for workers to identify clients at risk for and/or actively being exploited. • Social workers who are interested in discussing case specific questions. • Strategies for intervention and ways to converse with client prior and post disclosure. • Strategies on how to move the case forward once disclosure is made. What do I do next with identified client? These areas and any other related issues for support of the social worker can be explored.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Full	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (40%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (50%)</li> <li>• Child development (10%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Cultural Humility for Supervisors and Managers</b>
<b>Training Description</b>	This interactive in-service is designed to provide case worker supervisors and managers with a working understanding and practical framework for integrating cultural humility in daily practice and case decision-making. Supervisors and managers will have the opportunity to apply concepts to case scenarios and engage in a dialogue around the importance of cultural humility as a best practice management tool.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	No	
<b>If Yes is the Caseload Partial/Full?</b>	No	
<b>FFP Enhanced: 75%</b>	80%	<ul style="list-style-type: none"> <li>• Cultural competency related to children and families (70%)</li> <li>• Communication skills required to work with children and families (10%)</li> </ul>
<b>FFP Standard: 50%</b>	20%	<ul style="list-style-type: none"> <li>• General supervisory skills (20%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Effective Strategies for Managing Child Protection Casework</b>
<b>Training Description</b>	In this interactive workshop will engage in facilitated dialogue and peer learning to identify and share strategies to manage the complex and competing demands of a child welfare professional. Primarily, participants will advance their knowledge of the key tools of engaging and assessing diverse families as an essential part of effective and efficient child welfare social work. Participants will learn about best practices which lead to more consistent and timely outcomes with families. Participants will have a better understanding of how their approach to practice can improve time management. • Further, they will learn how to build a collaborative and supportive relationship with their supervisor and manager and the skills to cope and manage the stress of the child protection work.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated based to the Title IV-E foster care, adoption assistance or guardian assistance program on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	80%	<ul style="list-style-type: none"> <li>• Cultural competency related to children and families (10%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (80%)</li> <li>• Communication skills required to work with children and families (10%)</li> </ul>
<b>FFP Standard: 50%</b>	20%	Job performance enhancement skills (20%)
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Engaging Domestic Violence Offenders as Parents- The Benefits and Risks in Child Protection</b>
<b>Training Description</b>	This training will offer the opportunity for social workers to enhance their skills working with the offending parent in domestic violence cases. Topics will include safe practice in domestic violence cases, identifying high risk factors and protective factors to understand the importance of fatherhood engagement.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	90%	<ul style="list-style-type: none"> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (30%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (50%)</li> <li>• Identifying a child and families' risk for the removal of the child from the home (10%)</li> </ul>
<b>FFP Standard: 50%</b>	10%	<ul style="list-style-type: none"> <li>• Worker retention and worker safety (10%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Engaging Effectively with Families in Difficult Circumstances</b>
<b>Training Description</b>	Families involved with state-agencies can be impacted by a range of mental health and behavioral concerns (e.g., significant trauma, depression, anxiety, substance use disorders, legal challenges) that make it even harder for clinicians and caregivers to connect and be able to help. Issues of defensiveness, distrust, and anger can make development of a positive relationship difficult and can lead us into repetitive misunderstandings and conflict based on miscommunication. In this workshop we will look at intervention strategies designed to forge positive connections with resistant clients and also focus on ways to “maintain our cool” and remain objective in the face of potential challenges and even antagonism. Practical, solution- focused techniques and strength-based and growth-mindset interventions will be considered. Working with children and families in emotional pain can be extremely difficult—having a “toolbox” of effective strategies to reach them can make the process more manageable. We will address challenges of home-based interventions, safety factors and boundary and respect issues. We will also talk about self-care strategies to help avoid burnout out and vicarious traumatization.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	95%	<ul style="list-style-type: none"> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (10%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (50%)</li> <li>• Family Visitation (35%)</li> </ul>
<b>FFP Standard: 50%</b>	5%	<ul style="list-style-type: none"> <li>• Worker retention and worker safety (5%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A



SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Essential Clinical Skills for Working with Adolescents</b>
<b>Training Description</b>	Clinical work with adolescents can present unique challenges. This workshop will explore the underlying issues that contribute to avoidance and acting out behaviors, including unresolved grief and loss. Participants will gain new tools for creating helping relationships with adolescents and improving outcomes.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Independent living and the issues confronting adolescents preparing for independent living (20%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (40%)</li> <li>• Family Visitation (20%)</li> <li>• Cultural competency related to children and families (5%)</li> <li>• Child development (15%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Essential Skills for Social Workers</b>
<b>Training Description</b>	This workshop will focus on the essential skills in child welfare: engagement, assessment of safety, danger and risk, and documentation.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	50%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (25%)</li> <li>• Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services (25%)</li> </ul>
<b>FFP Standard: 50%</b>	50%	<ul style="list-style-type: none"> <li>• Team building and stress management training (20%)</li> <li>• Worker retention and worker safety (15%)</li> <li>• Job performance enhancement skills (15%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	FAAP for Managers
Training Description	This workshop is designed for DCF Managers and will help increase the familiarity with the five Protective Factors. A discussion of each of the four components of the family assessment with an emphasis on how to enhance critical thinking and case formulation skills will be achieved utilizing case vignettes and discussions. Ideas/plans for providing leadership within area offices on implementation of the FAAP will be explored.
Admin Function 1	Case Management and Supervision
Admin Function 2	0
Admin Function 3	Development of the case plan
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	1 day per training day (5 trainings/year)
Hours	7 hours per day (35 hours per year)
Audience	DCF staff
Cost	\$400.00/day (\$4800 per year) estimated trainer costs
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	No	
If Yes is the Caseload Partial/Full?	No	
FFP Enhanced: 75%	35%	<ul style="list-style-type: none"> <li>Title IV-E policies and procedures (5%)</li> <li>Social work practice, such as family centered practice and social work methods including interviewing and assessment (30%)</li> </ul>
FFP Standard: 50%	65%	<ul style="list-style-type: none"> <li>Information technology trainings (25%)</li> <li>Using Management reports (20%)</li> <li>General supervisory skills (15%)</li> <li>Job performance enhancement skills (5%)</li> </ul>
FFP Unclaimable	0%	0

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Integrated Clinical Practice</b>
<b>Training Description</b>	This training presents integrated framework to understand the interaction and co-occurrence of substance abuse, domestic violence and adult mental health disorders within the child welfare caseload. We will be examining on the impact of this interaction on a family's ability to keep children safe. Participants in this course will: be able to articulate how substance use disorders, mental health problems, and trauma/domestic violence impact on families and children. Increase their skills in engaging, assessing and intervening with families impacted by substance use disorders, mental health problems and trauma/domestic violence.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	Development of the case plan
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (75%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (15%)</li> <li>• Communication skills required to work with children and families (10%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Leadership Skills for the 21st Century</b>
<b>Training Description</b>	This interactive learning session covers a range of topics consistent with effective 21st century leadership for Managers at DCF. This practical workshop will focus on effective leadership behaviors, leading change, understanding culture and organizational change; conflict resolution; diversity and cultural competence as well as effective communication.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (5 trainings/year)
<b>Hours</b>	7 hours per day (35 hours per year)
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	No	
<b>If Yes is the Caseload Partial/Full?</b>	No	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	100%	<ul style="list-style-type: none"> <li>• Staff management (75%)</li> <li>• State agency personnel policies and procedures (15%)</li> <li>• Worker retention and worker safety (10%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Managing Challenging Behaviors</b>
<b>Training Description</b>	This training will help participants understand more about behaviors that become challenging to manage. During this half day training you will gain insight into contributing factors and learn effective techniques and communication skills.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1/2 day per training day (5 trainings/year)
<b>Hours</b>	3.5 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	90%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (75%)</li> <li>• Communication skills required to work with children and families (15%)</li> </ul>
<b>FFP Standard: 50%</b>	10%	<ul style="list-style-type: none"> <li>• Worker retention and worker safety (10%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>NASW- Social Work License Test Prep Course</b>
<b>Training Description</b>	This one day course is designed specifically for unlicensed DCF social workers to help them prepare for the social work license exam at the LSWA or LSW level. There is a strong component for ESL staff.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	100%	<ul style="list-style-type: none"> <li>• Job performance enhancement skills (70%)</li> <li>• Worker retention and worker safety (30%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Postpartum Depression</b>
<b>Training Description</b>	The session will include an overview of maternal mental health needs, impact on early childhood mental health and development, and how Massachusetts is addressing these needs.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	40%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li> <li>• Training on referrals to services, not how to perform the service (10%)</li> <li>• Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (10%)</li> </ul>
<b>FFP Standard: 50%</b>	60%	<ul style="list-style-type: none"> <li>• Addressing child or family problems and behaviors as it supports the delivery of services for the family (30%)</li> <li>Identifying Medical Service needs (30%)</li> </ul>
<b>FFP Unclaimable</b>	0%	<ul style="list-style-type: none"> <li>•</li> </ul>



<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>Stress Management, Relaxation, and Meditation Techniques</b>
<b>Training Description</b>	During this half day training you will learn to identify stressors, the 6 components of emotional fitness, the importance of cultivating resiliency. Special attention will be paid to developing self-care plans while practicing relaxation and meditation techniques.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	100%	<ul style="list-style-type: none"> <li>• Worker retention and worker safety (40%)</li> <li>• Team building and stress management training (60%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Supporting LGBTQ Clients</b>
<b>Training Description</b>	As people are becoming more aware of LGBTQ identities, it can feel like the vocabulary can be confusing or overwhelming. This training covers a model that provides a helpful update in concepts and words to understand LGBTQ identities. This training also covers better practices for creating a respectful, supportive environment for working with LGBTQ people.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Cultural competency related to children and families (40%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li> <li>• Communication skills required to work with children and families (40%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>The Opioid Crisis</b>
<b>Training Description</b>	The opioid crisis has had devastating effects on families and unprecedented challenges for systems of care such as DCF. This one-day workshop is a chance to hear from leading state experts about the Opioid Crisis, Medication Assisted Treatment, Naloxone (Narcan), Self Help programming, Child Welfare implications and lived experiences with a former DCF-involved parent speaker.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (20%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (15%)</li> <li>• Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments (10%)</li> <li>• Identifying a child and families' risk for the removal of the child from the home (10%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (40%)</li> <li>• Training on referrals to services, not how to perform the service (5%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Trauma Informed Practice</b>
<b>Training Description</b>	<p>This workshop examines the impact of primary and secondary traumatic stress and trauma impact on children, families and professionals. Ms. Saunders and Ms. Meninno will focus on the skills needed to regulate the complexity of emotional and physical reactions to trauma.</p> <p><b>Participants will increase their understanding of:</b></p> <ul style="list-style-type: none"> <li>• The elements of effective trauma informed social work;</li> <li>• Dis-regulation of affect and behavior in staff children and families experiencing secondary traumatic stress and trauma; and</li> <li>• Strategies to regulate emotions and behavior.</li> </ul>
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Grief and loss (30%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li> <li>• Child development (10%)</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (20%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (15%)</li> <li>• Training on referrals to services, not how to perform the service (5%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Writing and Testifying in the Legal Process</b>
<b>Training Description</b>	Taught by DCF legal staff, this training will help prepare DCF social workers to write affidavits and other documents for court. Workers will also prepare to testify in court proceedings.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	Preparation for and participation in judicial determinations;
<b>Admin Function 4</b>	Placement of the child
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	80%	<ul style="list-style-type: none"> <li>Title IV-E policies and procedures (30%)</li> <li>Communication skills required to work with children and families (40%)</li> <li>Ethics training associated with a title IV-E State plan requirement, such as the confidentiality requirements in section 471(a)(8) of the Act (10%)</li> <li></li> </ul>
<b>FFP Standard: 50%</b>	20%	Job performance enhancement skills (20%)
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>SW License Online Exam Tutoring</b>
<b>Training Description</b>	The department pleased to offer a Web-based license exam tutoring program to help social workers prepare for the Social Work License Exam. Once registered in PACE, you will receive an Email from CWI with specific instructions on how to activate your online subscription.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	0%	• N/A
<b>FFP Standard: 50%</b>	100%	• Information technology trainings (5%) • Job performance enhancement skills (95%)
<b>FFP Unclaimable</b>	0%	N/A

The following highlighted training events represent additions and updates to existing Training Plan:

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Car Seat Safety</b>
<b>Training Description</b>	This half day training will demonstrate proper car seat installation techniques including the common errors and how to correct. The proper car seat requirements for child's age, height and weight, and recall information will be reviewed.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Placement of the child
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1/2 day per training day (5 trainings/year)
<b>Hours</b>	3.5 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	No Cost—trainers are from local police department
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Full	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	100%	• Safe Driving
<b>FFP Unclaimable</b>	0%	N/A



SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Childhood Trauma: Integrating Clinical Thinking Skills</b>
<b>Training Description</b>	An overview of the 12 core concepts of traumatic stress will be explored and applied to case examples through the use of critical thinking lens. A case conceptualization framework will be reviewed to increase participant's capacity to present cases.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1/2 day per training day (5 trainings/year)
<b>Hours</b>	3.5 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	No Cost—trainers are from local police department
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Full	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (40%)</li> <li>• Communication skills required to work with children and families (15%)</li> <li>• Effects of separation (15%)</li> <li>• Grief and loss (15%)</li> <li>• Child development (15%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS		
Training Title	Difficult Conversations Engaging Caregivers	
Training Description	Whether sharing complicated information or talking with caregivers about sensitive issues, difficult conversations are common place in child welfare and facilitating them is an essential skill. Having difficult conversations can be stressful and uncomfortable and can have lasting impact. This highly engaging and interactive training will meet the needs of both new staff as well as seasoned veterans. A review of who the families are receiving services and as foster care providers will add context to the conversation. There will be ample opportunity for participants to practice having difficult conversations, learn from each other, and explore different ways to engage the caregivers they work with and support. Participants will have opportunities to reflect on their skills and comfort with various topics and engage in discussions that highlight promising practices and those practices that are beneficial to developing strong relationships with clients. Everyone is encouraged to bring a current case situation that could guide group discussion.	
Admin Function 1	Case Management and Supervision	
Admin Function 2	Development of the case plan	
Admin Function 3	0	
Admin Function 4	0	
Venue	Agency Training Space	
Duration	Short Term - Part Time	
Provider	CWI Staff/Trainer	
Days	1 day per training day (2 trainings/year)	
Hours	7 hours per day	
Audience	DCF staff	
Cost	\$900.00/day estimated trainer costs	
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.	
TRAINING CRITERIA for Federal Financial Participation		
TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (15%)</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (5%)</li> <li>• Communication skills required to work with children and families (80%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>Discovering Resiliency in ourselves and our clients</b>
<b>Training Description</b>	The documentary “Strong at the Broken Places” will be shown and a model of resiliency will be presented. Participants will use an assessment tool for monitoring their own personal well- being in the workplace and enhance self- care strategies.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$900.00/day estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	100%	<ul style="list-style-type: none"> <li>• Worker retention and worker safety (50%)</li> <li>• Team building and stress management training (50%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Documentation and Effective Writing Skills</b>
<b>Training Description</b>	Regardless of your specific need to write in the workplace, there are specific elements required to make any written communication effective. Prior to writing, you should plan carefully, taking into consideration the two most important aspects of all writing: your purpose and your audience. The agenda for this training includes discussion, review, and practice exercises in the areas of development, structure, grammar, word usage, style, tone, mechanics, and organization, in addition to purpose and audience. This six-hour session will provide an opportunity for you to assess your strengths and weaknesses so you may develop a strategy to improve your writing skills immediately.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (12 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day (\$4800 per year) estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	100%	<ul style="list-style-type: none"> <li>State agency personnel policies and procedures (50%)</li> <li>Job performance enhancement skills (50%)</li> </ul>
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>FAAP 101: Foundations of Family Assessment and Action Planning</b>
<b>Training Description</b>	This half day training will provide a foundational overview of the FAAP process designed for staff that does not typically complete FAAP's. Participants will gain an increased understanding of the FAAP policy and expectations that are required to complete the FAAP. This training will be beneficial to staff who are reading or utilizing FAAP's completed by ongoing staff- i.e. Family Resource, Regional Specialists, Attorneys, Managers, Intake and Response staff. For more in depth information staff should attend the pm session of FAAP and the 51B.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1/2 day per training day (4 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li> <li>• Identifying a child and families' risk for the removal of the child from the home. (40%)</li> <li>• Child development (10%)</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (10%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (10%)</li> <li>• Training on referrals to services, not how to perform the service (10%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>FAAP and the 51B—Moving from the Response to Assessment</b>
<b>Training Description</b>	This half day training is designed for Intake, Response and Hotline staff. You will learn the FAAP policy and how case members are identified, changes in demographics and when and how to use an Interim Action Plan
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	½ day per training day (4 trainings/year)
<b>Hours</b>	3.5 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	0%	N/A
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	100%	1. Conducting child abuse and neglect investigations

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	Fair Hearing
Training Description	This half day session will provide an overview of the fair hearing process. You will walk away with a better understanding of what decisions DCF makes that are subject to a fair hearing, what the pre-hearing process entails (administrative review at the area office level, scheduling, discovery, records production, continuance requests, DA stays, to name a few.) Topics revolve around how to prepare for a fair hearing, what to expect, and time frames will be reviewed.
Admin Function 1	Fair Hearings and appeals
Admin Function 2	Case reviews
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	½ day per training day (4 trainings/year)
Hours	3.5 hours per day
Audience	DCF staff
Cost	No Cost—DCF legal staff trainers
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (100%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	Gangs, drugs, and keeping yourself safe
Training Description	This half day session will engage social workers in a learning experience about the baseline statistics, prevalence, and identification of different gangs in the Commonwealth. Further, this workshop will introduce social workers to the various street drugs that impact families. This interactive workshop is led by an expert from the Massachusetts State Police.
Admin Function 1	Case Management and Supervision
Admin Function 2	Development of the case plan
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	½ day per training day (4 trainings/year)
Hours	3.5 hours per day
Audience	DCF staff
Cost	No cost—State Police Trainers
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	50%	<ul style="list-style-type: none"> <li>• Family Visitation (15%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (5%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (30%)</li> </ul>
FFP Standard: 50%	50%	2. Worker retention and worker safety (50%)
FFP Unclaimable	0%	N/A



SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	Generational transmission of trauma: Working with traumatized parents
Training Description	This workshop is designed for all staff who wish to deepen their knowledge and skills in working with parents who have experienced trauma. Participants will learn three ways generation trauma can impact parenting and learn specific techniques to respond to parents who have experienced trauma.
Admin Function 1	Case Management and Supervision
Admin Function 2	Development of the case plan
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	1 day per training day (4 trainings/year)
Hours	7 hours per day
Audience	DCF staff
Cost	\$900.00/day estimated trainer costs
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Grief and loss (30%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (15%)</li> <li>• Cultural competency related to children and families (20)</li> <li>• Training on referrals to services, not how to perform the service (15%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>Interviewing techniques for successful engagement</b>
<b>Training Description</b>	This training will provide skills necessary to conduct effective interviews by utilizing a variety of concrete skills to enhance successful interactions. The use of open and closed ended questions, goal setting, use of alternative perspectives, and information sharing, and body language will be presented.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1/2 day per training day (4 trainings/year)
<b>Hours</b>	3.5 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	No cost—DCF staff
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (30%)</li> <li>• Communication skills required to work with children and families (50%)</li> <li>• Cultural competency related to children and families (20%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>Making the most of supervised visitation</b>
<b>Training Description</b>	Supervised visitation is one of the most important opportunities for social workers to help maintain connections between children and families, ease the child's experience of separation, engage birth parents and assess parent- child interactions. Staff will learn strategies to make the visitation meaningful for the child and family. This workshop will focus on: Best practice guidelines for developing visitation plans that facilitate permanency for children, Strategies to prepare children and family members and foster parents for visits, and ways to support parents and help them increase their capacity to protect and care for their children and assessing progress to consider planning for unsupervised visits
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1/2 day per training day (4 trainings/year)
<b>Hours</b>	3.5 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>• Grief and loss (10%)</li> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li> <li>• Child development (10%)</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (10%)</li> <li>• Family Visitation (50%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	Methadone, buprenorphine and Vivitrol—considerations for child welfare
Training Description	This workshop with addresses the various medication assisted treatment (MAT) options available to treat opioid addiction. Content will also address MAT and pregnancy. Staff will learn skills to make informed decisions around service recommendations/referrals and decrease personal biases.
Admin Function 1	Case Management and Supervision
Admin Function 2	Development of the case plan
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	1/2 day per training day (4 trainings/year)
Hours	3.5 hours per day
Audience	DCF staff
Cost	No cost—DCF staff
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (10%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (75%)</li> <li>• Training on referrals to services, not how to perform the service (5%)</li> <li>• Child development (10%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

<b>SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS</b>	
<b>Training Title</b>	<b>Navigating health care issues in child welfare</b>
<b>Training Description</b>	During this full day training you will hear from a variety of medical and health professionals on psychotropic medication, and hospital based child protection programs. Information about treatments and what to look for when dealing with Lice, Scabies and Bed Bugs, referrals and documentation of HIV testing, hospital discharges, Special Kids/Special Care program and healthcare issues related to transferring a child out of state will also be presented. Practical case examples will be used throughout the training.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1 day per training day (4 trainings/year)
<b>Hours</b>	7 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	No cost—Community providers
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

<b>TRAINING CRITERIA for Federal Financial Participation</b>		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	45%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (20%)</li> <li>• Training on referrals to services, not how to perform the service (25%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	55%	3. Medical Services (55%)

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	FAAP—understanding and developing observable changes
Training Description	Participants to learn to differentiate observable changes from tasks, services, and supports and will practice writing clear observable change statements. Participants will be able to articulate that action planning is a collaborative and transparent process that is derived from the clinical formulation, which represents the shared understanding of the family’s current functioning, capacities, and needs. They will understand that when continued DCF involvement is necessary, areas of focus are identified and prioritized. They will know how to write observable change statements which articulate behavioral indicators of safety.
Admin Function 1	Case Management and Supervision
Admin Function 2	Development of the case plan
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	1/2 day per training day (4 trainings/year)
Hours	3.5 hours per day
Audience	DCF staff
Cost	\$400.00/day estimated trainer costs
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment (50%)</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations (20%)</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (10%)</li> <li>• Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services. (20%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
Training Title	Parental substance misuse and action planning
Training Description	This training will enhance social worker skills when assessing parental substance use through the lens of the Protective Factors. Developing Action Plans to address parental substance misuse will also be explored.
Admin Function 1	Case Management and Supervision
Admin Function 2	Development of the case plan
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	CWI Staff/Trainer
Days	½ day per training day (4 trainings/year)
Hours	3.5 hours per day
Audience	DCF staff
Cost	No trainer cost—DCF staff
Allocation	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
Does the Trainee Carry a Caseload?	Yes	
If Yes is the Caseload Partial/Full?	Partial	
FFP Enhanced: 75%	100%	<ul style="list-style-type: none"> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services (95%)</li> <li>• Training on referrals to services, not how to perform the service (5%)</li> </ul>
FFP Standard: 50%	0%	N/A
FFP Unclaimable	0%	N/A

SECTION 2: IN-SERVICE, EVIDENCE BASED WORKSHOPS	
<b>Training Title</b>	<b>Partnering for safety—brief case consultation framework for “stuck” cases</b>
<b>Training Description</b>	This is a small group direct-practice learning forum about the Partnering for Safety Case Consultation framework. This learning group will help social workers and supervisors think critically about the challenging or “stuck” cases they are working with. This quick and focused process maps out the necessary steps to generate real and lasting progress toward safety, permanency and well-being for families.
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Development of the case plan
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	½ day per training day (4 trainings/year)
<b>Hours</b>	3.5 hours per day
<b>Audience</b>	DCF staff
<b>Cost</b>	\$400.00/day estimated trainer costs
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully.

TRAINING CRITERIA for Federal Financial Participation		
<b>Does the Trainee Carry a Caseload?</b>	Yes	
<b>If Yes is the Caseload Partial/Full?</b>	Partial	
<b>FFP Enhanced: 75%</b>	100%	<ul style="list-style-type: none"> <li>Identifying a child and families’ risk for the removal of the child from the home. (25%)</li> <li>Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services. (25%)</li> <li>Assessments to determine whether a situation requires a child’s removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments. (25%)</li> <li>Social work practice, such as family centered practice and social work methods including interviewing and assessment (25%)</li> </ul>
<b>FFP Standard: 50%</b>	0%	N/A
<b>FFP Unclaimable</b>	0%	N/A



SECTION 3: SUPERVISOR TRAININGS	
<b>Training Title</b>	<b>New Supervisor Training Series</b>
<b>Training Description</b>	This eight session program is designed for newly hired DCF supervisors as an introduction to effective supervisor practices. Areas to be addressed include: facilitative supervisory practices, leadership, motivation; communication; planning and directing employee performance; performance evaluation; managing conflict; problem solving; supervising in a culturally diverse and changing work environment.
<b>Admin Function 1</b>	Placement of the Child
<b>Admin Function 2</b>	Development of the Case Plan
<b>Admin Function 3</b>	Referral to Services
<b>Admin Function 4</b>	Case Management and Supervision
<b>Venue</b>	DCF Training and Professional Development Center
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	Contracted Trainer
<b>Days</b>	The training series is 8 full days run 3 separate times per year totaling 24 days per year.
<b>Hours</b>	144
<b>Audience</b>	DCF staff
<b>Cost</b>	\$30,000.00
<b>Cost Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 60% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• Cultural competency related to children and families.</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations.</li> <li>• Permanency planning including using kinship care as a resource for children involved with the child welfare system.</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services.</li> <li>• Effects of separation</li> <li>• Grief and loss</li> <li>• Family Visitation</li> </ul> <p>Standard Rate: 40% of this training series covers topics eligible for the Standard FFP, including:</p> <ul style="list-style-type: none"> <li>• State agency personnel policies and procedures</li> <li>• Job performance enhancement skills</li> <li>• General supervisory skills</li> <li>• Team building and stress management training</li> <li>• Worker retention and worker safety</li> <li>• Staff management</li> <li>• Using Management reports</li> </ul>

<b><u>SECTION 3: SUPERVISOR TRAININGS</u></b>	
<b>Training Title</b>	<b>Annual Supervisor Forum (1)</b>
	<p>The CWI organizes and implements an annual conference for supervisors. Approximately 200 supervisors attend a daylong conference focused on improving supervisory skills, consistency of practice, supporting social workers in trauma work, and understanding policy. The Supervisor Forum for 2017 will include:</p> <ul style="list-style-type: none"> <li>• A 2 hour plenary session focused on Facilitative Supervision: Group learning, shared decision making, and bringing practice/policy innovations to scale. This lecture will support consistency of supervisory practice across the agency and advance the on-the-group practice of social workers in the field</li> <li>• A 1 hour plenary session utilizing a panel presentation on the topic of “Communities of Practice as a process to advance supervisory skills and success”.</li> <li>• Breakout workshops covering 6 major topics: 1. The Tools of effective supervision 2. Collaborative Performance Review 3. Supervisor as Educator: 4. Supervising for Social Worker Wellness: the impact of trauma, grief and loss on staff. 5. Supervisor as a Practice Leader: Modeling family centered, safety organized practices for social workers to improve the quality of home visits 6. Managing Up—Supervisor/Management relationship</li> </ul>
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	Contracted Trainer
<b>Days</b>	1
<b>Hours</b>	6
<b>Audience</b>	DCF staff
<b>Cost</b>	\$5,000.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 20% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• Grief and loss</li> <li>• Family Visitation.</li> </ul> <p>Standard Rate: 80% of this training series covers topics eligible for the Standard FFP, including:</p> <ul style="list-style-type: none"> <li>• State agency personnel policies and procedures</li> <li>• Job performance enhancement skills</li> </ul>

<b>SECTION 4: MANAGER TRAININGS</b>	
<b>Training Title</b>	<b>New APM Series (2)</b>
<b>Training Description</b>	This training series is designed for newly promoted DCF managers. The 8 days of training help support new managers in making the transition into the job as a leader in the area office. The training prepares managers through an in-depth focus on effective child welfare practices, DCF policy and procedures, community resources to support families, and using data to assess and guide practice innovations. The training pays particular attention to collaborative decision making processes to facilitate the placement and permanency of children in DCF care, the cooperative planning approach, and enhancing the skills of supervisors.
<b>Admin Function 1</b>	Placement of the Child
<b>Admin Function 2</b>	Development of the Case Plan
<b>Admin Function 3</b>	Preparation for and Participation in Judicial Determinations
<b>Admin Function 4</b>	Case Management and Supervision
<b>Venue</b>	DCF Training and Professional Development Center
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	Contracted Trainer
<b>Days</b>	8
<b>Hours</b>	96
<b>Audience</b>	DCF staff
<b>Cost</b>	\$23,000.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 30% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• Title IV-E policies and procedures.</li> <li>• Permanency planning including using kinship care as a resource for children involved with the child welfare system.</li> <li>• Identifying a child and families' risk for the removal of the child from the home.</li> </ul> <p>Standard Rate: 70% of this training series covers topics eligible for the Standard FFP, including:</p> <ul style="list-style-type: none"> <li>• State agency personnel policies and procedures</li> <li>• Job performance enhancement skills</li> <li>• Staff management</li> <li>• Using Management reports</li> <li>• Information technology trainings</li> </ul>

<u>SECTION 5: POLICY AND PRACTICE TRAININGS</u>	
<b>Training Title</b>	<b>Policy &amp; Practice Training</b>
<b>Training Description</b>	This one day training is a training of trainers for the four Family Assessment and Action Planning Policy Training Modules. The primary focus will be promoting critical thinking, assessing parental capacities, interviewing children and clinical formulations
<b>Admin Function 1</b>	Placement of the Child
<b>Admin Function 2</b>	Development of the Case Plan
<b>Admin Function 3</b>	Preparation for and Participation in Judicial Determinations;
<b>Admin Function 4</b>	Case Management and Supervision
<b>Venue</b>	DCF Training and Professional Development Center
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	Contracted Trainer
<b>Days</b>	This is a 1 day workshop that will be run 2 times this fiscal year.
<b>Hours</b>	12
<b>Audience</b>	DCF staff
<b>Cost</b>	\$5,000.00

<p>Allocation</p>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 80% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations.</li> <li>• Permanency planning including using kinship care as a resource for children involved with the child welfare system.</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services.</li> <li>• Effects of separation</li> <li>• Grief and loss</li> <li>• Child development</li> <li>• Family Visitation.</li> <li>• Communication skills required to work with children and families.</li> <li>• Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services.</li> <li>• Assessments to determine whether a situation requires a child's removal from the home, if the training is not related directly to conducting a child abuse and neglect investigation. This topic does not include trainings on how to perform medical, educational or psychological assessments.</li> </ul> <p>Standard Rate: 20% of this training series covers topics eligible for the Standard FFP, including:</p> <ul style="list-style-type: none"> <li>• State agency personnel policies and procedures</li> </ul>
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**SECTION 6: INVESTIGATIONS HOTLINE SERIES TRAININGS**

<b>Training Title</b>	<b>Protective Intake Training Series (24)</b>
<b>Training Description</b>	This 24 session training series is for newly appointed response workers and hotline workers. The focus of the sessions is on aspects of the protective intake response: legal foundation of the DCF, interviewing, assessing danger, risk and safety, trauma and formulating the conclusion.
<b>Admin Function 1</b>	0
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	DCF Training and Professional Development Center
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	Contracted Trainer
<b>Days</b>	24
<b>Hours</b>	144
<b>Audience</b>	DCF staff
<b>Cost</b>	\$55,000.00
<b>Allocation</b>	Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF does not seek FFP to defray the state costs for this training program as the training topic is not eligible for federal reimbursement.

**SECTION 7: PROFESSIONAL CONFERENCES AND FORUMS**

<b>Training Title</b>	<b>DCF 2-Day Intern Orientation (2) Sessions</b>
<b>Training Description</b>	This daylong event is to build shared understanding and agreement among all stakeholders on the roles of interns in area offices and to orient the interns to DCF processes and practices.
<b>Admin Function 1</b>	Placement of the Child
<b>Admin Function 2</b>	Development of the Case Plan
<b>Admin Function 3</b>	Case Management and Supervision
<b>Admin Function 4</b>	Referral to Services
<b>Venue</b>	Agency Training Facility
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	CWI Staff/Trainer
<b>Days</b>	1
<b>Hours</b>	7
<b>Audience</b>	DCF staff
<b>Cost</b>	\$5,000.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Standard Rate: 100% of this training series covers topics eligible for the Standard FFP, including:</p> <ul style="list-style-type: none"> <li>• State agency personnel policies and procedures</li> </ul>

SECTION 9: PROFESSIONAL CONFERENCES AND FORUMS	
Training Title	Statewide Legal Conference (1)
Training Description	DCF convenes an annual conference for agency lawyers. This is a professional development opportunity for all legal staff and they attend workshops on current issues in child welfare law, policy and practice. This legal conference specifically advances the work of DCF lawyers handling cases concerning child removal, child reunification, and termination of parental rights, adoption finalizations, permanency reviews, and measuring progress of parental change.
Admin Function 1	Placement of the Child
Admin Function 2	Development of the Case Plan
Admin Function 3	0
Admin Function 4	0
Venue	Agency Training Space
Duration	Short Term - Part Time
Provider	Contracted Trainer
Days	1
Hours	6
Audience	DCF staff
Cost	\$5,000.00



<p><b>Allocation</b></p>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate: 75% of this training covers topics eligible for the Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Title IV-E policies and procedures.</li> <li>• Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issues involved in child abuse and neglect investigations.</li> <li>• Permanency planning including using kinship care as a resource for children involved with the child welfare system.</li> <li>• Activities designed to preserve, strengthen, and reunify the family, if the training is not related to providing treatment or services.</li> <li>• Identifying a child and families' risk for the removal of the child from the home.</li> </ul> <p>Standard Rate: 25% of this training series covers topics eligible for the Standard FFP, including:</p> <ul style="list-style-type: none"> <li>• State agency personnel policies and procedures</li> <li>• Staff management</li> <li>• Using Management reports</li> </ul>
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**SECTION 9: PROFESSIONAL CONFERENCES AND FORUMS**

<b>Training Title</b>	<b>Statewide ACM Training (1)</b>
<b>Training Description</b>	<p>DCF convenes a statewide meeting for Area Clinical Managers as a professional development event in October 2017. ACMs come together to discuss advances in practice, change management, quality improvement and policy implementation. This is a 6 hour conference that includes 3 hours of plenary session with an address from the DCF Commissioner and Deputy Commissioner appreciating the work of ACMs in agency improvement efforts. Additionally, the ACMs will engage in a large group dialogue to share their successes in advancing practice in their area offices and discuss the needs that they have in helping staff improve their work with families. The final 3 hours of the conference involves small group facilitated dialogues using management scenarios to elicit best practices, problem solving skills, managing with data, and professional development and succession planning with staff.</p>
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	Contracted Trainer
<b>Days</b>	1
<b>Hours</b>	6
<b>Audience</b>	DCF staff
<b>Cost</b>	\$500.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Standard Rate: 100% of this training series covers topics eligible for the Standard FFP, including:</p> <ul style="list-style-type: none"> <li>• Staff management</li> <li>• Using Management reports</li> <li>• Information technology trainings</li> </ul>

**SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS**

<b>Training Title</b>	<b>Bridgewater MSW Fellowship Program - ISA</b>
<b>Training Description</b>	<p>It is a priority of the Child Welfare Institute to help DCF increase the number of staff members who hold formal degrees in social work. The CWI's flagship academic program is the MSW Fellowship offered through the School of Social Work at Salem State University, Bridgewater State University, Springfield College and Simmons College Urban Leadership Program. CWI Fellows receive a scholarship as they earn their Master's degree in social work. The CWI will fund fellowships for 35 DCF staff in the Salem State MSW program, 5 at Bridgewater State and 5 at Simmons College this fiscal year. These Fellowships offer generalist practice curriculum with a strong focus on public social work. The program serves child welfare professionals in the public sphere and prepares students to be effective DCF social workers and supervisors through a broad range of practice, policy and research coursework.</p>
<b>Admin Function 1</b>	Communication Skills Required to Work with Children and Families
<b>Admin Function 2</b>	General Substance Abuse, Domestic Violence, and Mental Health Issues Related to Children and Families in the Child Welfare
<b>Admin Function 3</b>	Social Work Practice, such as Family Centered Practice and Social Work Methods including Interviewing and Assessment
<b>Admin Function 4</b>	0
<b>Venue</b>	College/University
<b>Duration</b>	Long Term - Part Time
<b>Provider</b>	Graduate Degree
<b>Days</b>	This is the DCF MSW fellowship program partnering with the state university to help DCF staff earn an MSW degree.
<b>Hours</b>	Master's Degree Program—4 years part-time
<b>Audience</b>	DCF staff
<b>Cost</b>	\$125,961.00

<p><b>Allocation</b></p>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services.</li> <li>• Effects of separation</li> <li>• Grief and loss</li> <li>• Child development</li> <li>• Family Visitation.</li> <li>• Communication skills required to work with children and families.</li> <li>• Cultural competency related to children and families.</li> </ul>
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**SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS**

<b>Training Title</b>	<b>Westfield MSW Fellowship Program - ISA</b>
<b>Training Description</b>	It is a priority of the Child Welfare Institute to help DCF increase the number of staff members who hold formal degrees in social work. The CWI's flagship academic program is the MSW Fellowship offered through the School of Social Work at Salem State University, Westfield University, Bridgewater State University, Springfield College and Simmons College Urban Leadership Program. CWI Fellows receive a scholarship as they earn their Master's degree in social work. The CWI will fund fellowships for 35 DCF staff in the Salem State MSW program, 5 at Bridgewater State and 5 at Simmons College this fiscal year. These Fellowships offer generalist practice curriculum with a strong focus on public social work. The program serves child welfare professionals in the public sphere and prepares students to be effective DCF social workers and supervisors through a broad range of practice, policy and research coursework.
<b>Admin Function 1</b>	Communication Skills Required to Work with Children and Families
<b>Admin Function 2</b>	General Substance Abuse, Domestic Violence, and Mental Health Issues Related to Children and Families in the Child Welfare
<b>Admin Function 3</b>	Social Work Practice, such as Family Centered Practice and Social Work Methods including Interviewing and Assessment
<b>Admin Function 4</b>	0
<b>Venue</b>	College/University
<b>Duration</b>	Long Term - Part Time
<b>Provider</b>	Graduate Degree
<b>Days</b>	This is the DCF MSW fellowship program partnering with the state university to help DCF staff earn an MSW degree.
<b>Hours</b>	Master's Degree Program—4 years part-time
<b>Audience</b>	DCF staff
<b>Cost</b>	\$62,900.00

<p>Allocation</p>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services.</li> <li>• Effects of separation</li> <li>• Grief and loss</li> <li>• Child development</li> <li>• Family Visitation.</li> <li>• Communication skills required to work with children and families.</li> <li>• Cultural competency related to children and families.</li> </ul>
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**SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS**

<b>Training Title</b>	<b>Salem State College ISA</b>
<b>Training Description</b>	It is a priority of the Child Welfare Institute to help DCF increase the number of staff members who hold formal degrees in social work. The CWI's flagship academic program is the MSW Fellowship offered through the School of Social Work at Salem State University, Westfield University, Bridgewater State University, Springfield College and Simmons College Urban Leadership Program. CWI Fellows receive a scholarship as they earn their Master's degree in social work. The CWI will fund fellowships for 35 DCF staff in the Salem State MSW program, 5 at Bridgewater State and 5 at Simmons College this fiscal year. These Fellowships offer generalist practice curriculum with a strong focus on public social work. The program serves child welfare professionals in the public sphere and prepares students to be effective DCF social workers and supervisors through a broad range of practice, policy and research coursework.
<b>Admin Function 1</b>	Communication Skills Required to Work with Children and Families
<b>Admin Function 2</b>	General Substance Abuse, Domestic Violence, and Mental Health Issues Related to Children and Families in the Child Welfare
<b>Admin Function 3</b>	Social Work Practice, such as Family Centered Practice and Social Work Methods including Interviewing and Assessment
<b>Admin Function 4</b>	0
<b>Venue</b>	College/University
<b>Duration</b>	Long Term - Part Time
<b>Provider</b>	Graduate Degree
<b>Days</b>	This is the DCF MSW fellowship program partnering with the state university to help DCF staff earn an MSW degree.
<b>Hours</b>	Master's Degree Program—4 years part-time
<b>Audience</b>	DCF staff
<b>Cost</b>	\$183,126.65
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> </ul>

**SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS**

<b>Training Title</b>	<b>Simmons ULP MSW Fellowship Program</b>
<b>Training Description</b>	It is a priority of the Child Welfare Institute to help DCF increase the number of staff members who hold formal degrees in social work. The CWI's flagship academic program is the MSW Fellowship offered through the School of Social Work at Salem State University, Bridgewater State University, Springfield College and Simmons College Urban Leadership Program. CWI Fellows receive a scholarship as they earn their Master's degree in social work. The CWI will fund fellowships for 35 DCF staff in the Salem State MSW program, 5 at Bridgewater State and 5 at Simmons College this fiscal year. These Fellowships offer generalist practice curriculum with a strong focus on public social work. The program serves child welfare professionals in the public sphere and prepares students to be effective DCF social workers and supervisors through a broad range of practice, policy and research coursework.
<b>Admin Function 1</b>	General Substance Abuse, Domestic Violence, and Mental Health Issues Related to Children and Families in the Child Welfare
<b>Admin Function 2</b>	Communication Skills Required to Work with Children and Families
<b>Admin Function 3</b>	Social work practice, such as family centered practice and social work methods including interviewing and assessment
<b>Admin Function 4</b>	0
<b>Venue</b>	College/University
<b>Duration</b>	Long Term - Part Time
<b>Provider</b>	Graduate Degree
<b>Days</b>	0 This is the DCF MSW fellowship program partnering with the university to help DCF staff earn an MSW degree.
<b>Hours</b>	Master's Degree Program—4 years part-time
<b>Audience</b>	DCF staff
<b>Cost</b>	\$23,000.00



<p>Allocation</p>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services.</li> <li>• Effects of separation</li> <li>• Grief and loss</li> <li>• Child development</li> <li>• Family Visitation.</li> <li>• Communication skills required to work with children and families.</li> <li>• Cultural competency related to children and families.</li> </ul>
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**SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS**

<b>Training Title</b>	<b>Springfield MSW Fellowship Program</b>
<b>Training Description</b>	It is a priority of the Child Welfare Institute to help DCF increase the number of staff members who hold formal degrees in social work. The CWI's flagship academic program is the MSW Fellowship offered through the School of Social Work at Salem State University, Bridgewater State University, Springfield College and Simmons College Urban Leadership Program. CWI Fellows receive a scholarship as they earn their Master's degree in social work. The CWI will fund fellowships for 35 DCF staff in the Salem State MSW program, 5 at Bridgewater State and 5 at Simmons College this fiscal year. These Fellowships offer generalist practice curriculum with a strong focus on public social work. The program serves child welfare professionals in the public sphere and prepares students to be effective DCF social workers and supervisors through a broad range of practice, policy and research coursework.
<b>Admin Function 1</b>	Communication Skills Required to Work with Children and Families
<b>Admin Function 2</b>	General Substance Abuse, Domestic Violence, and Mental Health Issues Related to Children and Families in the Child Welfare
<b>Admin Function 3</b>	Social Work Practice, such as Family Centered Practice and Social Work Methods including Interviewing and Assessment
<b>Admin Function 4</b>	0
<b>Venue</b>	College/University
<b>Duration</b>	Long Term - Part Time
<b>Provider</b>	Graduate Degree
<b>Days</b>	This is the DCF MSW fellowship program partnering with the university to help DCF staff earn an MSW degree.
<b>Hours</b>	Master's Degree Program—4 years part-time
<b>Audience</b>	DCF staff
<b>Cost</b>	\$32,000.00

<p><b>Allocation</b></p>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• General substance abuse, domestic violence, and mental health issues related to children and families in the child welfare system, if the training is not related to providing treatment or services.</li> <li>• Effects of separation</li> <li>• Grief and loss</li> <li>• Child development</li> <li>• Family Visitation.</li> <li>• Communication skills required to work with children and families.</li> <li>• Cultural competency related to children and families.</li> </ul>
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**SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS**

<b>Training Title</b>	<b>Simmons Post-Masters Trauma Certificate Program</b>
<b>Training Description</b>	The CWI has supported the development and implementation of a yearlong intensive education program for DCF staff that have masters' degrees. Through Simmons College School of Social Work, 15 DCF staff members will attend this certificate program focused on trauma in child welfare. This Post Certificate program offers an ongoing forum for those who completed the program to continue the learning and dialogue about best practices. These dialogues reinforce the learning from the Certificate program and help to continuously improve the content of the program.
<b>Admin Function 1</b>	Social Work Practice, such as Family Centered Practice and Social Work Methods including Interviewing and Assessment
<b>Admin Function 2</b>	Grief and Loss
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	College/University
<b>Duration</b>	Short Term-Part Time
<b>Provider</b>	College/University Instructors
<b>Days</b>	This is a 2 semester long post-master's program for DCF child protection workers.
<b>Hours</b>	The certification program meets for approximately 72 hours in the classroom
<b>Audience</b>	DCF staff
<b>Cost</b>	\$42,000.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment.</li> <li>• Effects of separation</li> <li>• Grief and loss</li> </ul>

**SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS**

<b>Training Title</b>	<b>Simmons Trauma Certificate Graduate Forum</b>
<b>Training Description</b>	The CWI has supported the development and implementation of a yearlong intensive education program for DCF staff that have master's degrees. Through Simmons College School of Social Work, 15 DCF staff members will attend this certificate program focused on trauma in child welfare.
<b>Admin Function 1</b>	Child abuse and neglect issues, such as the impact of child abuse and neglect on a child, and general overviews of the issue
<b>Admin Function 2</b>	Effects of Separation
<b>Admin Function 3</b>	Grief and Loss
<b>Admin Function 4</b>	Social Work Practice, such as Family Centered Practice and Social Work Methods including Interviewing and Assessment
<b>Venue</b>	College/University
<b>Duration</b>	Short Term-Part Time
<b>Provider</b>	College/University Instructors
<b>Days</b>	This is a 2 semester long post-master's program for DCF child protection workers.
<b>Hours</b>	The certification program meets for approximately 72 hours in the classroom
<b>Audience</b>	DCF staff
<b>Cost</b>	\$12,000.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. . DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment</li> <li>• Effects of separation</li> <li>• Grief and loss</li> </ul>

**SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS**

<b>Training Title</b>	<b>Springfield College Post-Masters Certificate in Advanced Practice with Children and Families</b>
<b>Training Description</b>	The CWI has supported the development and implementation of a yearlong intensive education program for DCF staff that have master's degrees. Through Springfield College School of Social Work, 15 DCF staff members will attend this certificate program focused on trauma in child welfare. This Post Certificate program offers an ongoing forum for those who completed the program to continue the learning and dialogue about best practices. These dialogues reinforce the learning from the Certificate program and help to continuously improve the content of the program.
<b>Admin Function 1</b>	Social Work Practice, such as Family Centered Practice and Social Work Methods including Interviewing and Assessment
<b>Admin Function 2</b>	Grief and Loss
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	College/University
<b>Duration</b>	Short Term-Part Time
<b>Provider</b>	College/University Instructors
<b>Days</b>	This is a 2 semester long post-master's program for DCF child protection workers.
<b>Hours</b>	The certification program meets for approximately 72 hours in the classroom
<b>Audience</b>	DCF staff
<b>Cost</b>	\$20,000.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Social work practice, such as family centered practice and social work methods including interviewing and assessment</li> <li>• Effects of separation</li> <li>• Grief and loss</li> </ul>

SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS	
<b>Training Title</b>	<b>Academic Tuition Reimbursement Program</b>
<b>Training Description</b>	The Department provides financial assistance for DCF staff attending graduate level degree coursework. This program will assist approximately 125 DCF staff to attend graduate Academic Tuition Reimbursement will be made for a maximum of two courses per semester, as follows: • 50 % of tuition costs up to a maximum of \$750 each for the Fall and Spring semesters only. Maximum reimbursement per state fiscal year is \$1500. • Reimbursement is available only for tuition charges. Fees, books, travel and any other incidental costs will not be reimbursed under this program. Reimbursement is also based on the availability of funds. Eligibility In addition to the general eligibility requirements, the applicant must meet one of the priorities listed below • Priority 1: A social worker pursuing a graduate degree related to child welfare. • Priority 2: Employees in management, administrative and clerical positions pursuing an undergraduate or graduate degree related to their job functions. • Priority 3: A small percentage of funding (if funding allows) will be made available for employees pursuing a degree not related to their current job function. • Priority 4: A small percentage of funding (if funding allows) will be made available for employees with a current undergraduate or graduate degree who wish to pursue a subsequent degree at the same level. If an employee is eligible for tuition remission and is attending a Massachusetts public community college or state university, the employee must apply for tuition remission. Such employees are not eligible for academic tuition reimbursement.
<b>Admin Function 1</b>	Social Work Practice, such as Family Centered Practice and Social Work Methods including Interviewing and Assessment
<b>Admin Function 2</b>	0
<b>Admin Function 3</b>	0
<b>Admin Function 4</b>	0
<b>Venue</b>	College/University
<b>Duration</b>	Long Term-Part Time
<b>Provider</b>	Graduate Degree
<b>Days</b>	0
<b>Hours</b>	0
<b>Audience</b>	DCF Staff
<b>Cost</b>	\$75,000.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF is not currently seeking FFP for the cost associated with this training program. The cost allocation plan will be determined following a more detailed analysis of the extent to which funds expended are used to promote educational and degree advancement aligned with job functions eligible under Title IV-E. DCF will conduct this analysis and amend the plan to reflect accurate cost distributions.</p> <p>Standard Rate : TBD</p> <ul style="list-style-type: none"> <li>• Job performance enhancement skills</li> </ul>

<b><u>SECTION 10: PROFESSIONAL EDUCATION/ CERTIFICATE PROGRAMS</u></b>	
<b>Training Title</b>	<b>Implementation Coaching</b>
<b>Training Description</b>	<p>DCF will continue to provide practice coaching to support the utilization of safety organized practices and evidence based case management skills, critical thinking processes, and sound decision making in high stakes situations. Area Offices identify their specific needs and work with practice coaches to create a plan for their work together.</p> <p>The inclusion of this activity in the Training Plan is dependent upon the further definition of the specific functions of the Implementation Coaches as trainers of eligible topics in the area offices. When the role of these coaches is clarified, the decision to remove or include their activities in the plan will be made.</p>
<b>Admin Function 1</b>	Case Management and Supervision
<b>Admin Function 2</b>	Placement of the Child
<b>Admin Function 3</b>	Development of the Case Plan
<b>Admin Function 4</b>	0
<b>Venue</b>	Agency Training Space
<b>Duration</b>	Short Term - Part Time
<b>Provider</b>	Contracted Trainer
<b>Days</b>	100
<b>Hours</b>	600
<b>Audience</b>	DCF staff
<b>Cost</b>	\$38,000.00
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <ul style="list-style-type: none"> <li>Costs associated with this activity are TBD and are not currently being included for FFP.</li> </ul>



**SECTION 11: Foster and Adoptive Parents and Guardians**

<b>Training Title</b>	<b>MAAP Training</b>
<b>Training Description</b>	DCF has developed and implemented a statewide training program for foster and adoptive parents and guardians. This training program is required for non-relative placements and is part of the licensing program for foster/adoptive parents. The trainings occur within the area offices and are facilitated by area office staff. The MAPP facilitators are all trained in the curriculum and the learning modules in order to lead the full MAPP series for prospective resource families
<b>Admin Function 1</b>	Communication Skills Required to Work with Children and Families
<b>Admin Function 2</b>	Placement of the Child
<b>Admin Function 3</b>	
<b>Admin Function 4</b>	
<b>Venue</b>	Agency space
<b>Duration</b>	Long Term - Part Time
<b>Provider</b>	DCF staff
<b>Days</b>	12 days of training for 3 hours per day
<b>Hours</b>	Approximately 36 hours
<b>Audience</b>	Foster and adoptive parents and guardians
<b>Cost</b>	\$15,000
<b>Allocation</b>	<p>Costs associated with trainee salaries and trainer expenses (as appropriate and allowable) are allocated to the Title IV-E foster care, adoption assistance or guardian assistance program based on the identification of the percentage of the overall training time spent on topics allowable for 75% FFP, 50% FFP, and 0% FFP respectfully. DCF seeks FFP for the cost associated with this training series using the following rationale:</p> <p>Enhanced Rate : 100% of this training series covers topics eligible for Enhanced FFP, including:</p> <ul style="list-style-type: none"> <li>• Title IV-E policies and procedures</li> <li>• Effects of separation</li> <li>• Grief and loss</li> <li>• Child development</li> </ul>

## **G. STATISTICAL AND SUPPORTING INFORMATION**

### **1. CAPTA Annual State Data Report Items**

#### *Information on Child Protective Service Workforce*

##### *Education, Qualifications, and Training Requirements of Child Protective Personnel*

Below we provide the job descriptions for the Department's social workers (Social Worker I & II) and Supervisors (Social Worker III):

##### *Social Worker I, Bargaining Unit 8, Job Grade 19*

Applicants must have (A) a Bachelor's degree or higher in social work, psychology, sociology, counseling, counseling education or criminal justice or a relevant human services degree and (B) a current and valid Licensures as a Licensed Social Work Associate, Licensed Social Worker, Licensed Certified Social Worker or Licensed Independent Clinical Social Worker issued by the Massachusetts Board of Registration (applicants at the Department of Children and Families must obtain the required license in Social Work within the first nine (9) months of employment.)

The classification may require possession of a current and valid Motor Vehicle Driver's License at a class level specific to assignment.

Incumbents are required to have the following at the time of hire:

- Knowledge of family dynamics and human behavior.
- Ability to use a computer to type and perform basic computer tasks.
- Ability to communicate effectively, both verbally and in writing, to appropriately document case activities and represent the agency in a professional manner.
- Ability to multi-task and prioritize responsibilities.
- Ability to interact effectively with and establish rapport with diverse teams and groups of people.
- Ability to gather information through questioning and observing individuals and by examining records and documents.
- Ability to maintain accurate and up to date records.
- Ability to exercise discretion in handling confidential information.
- Ability to maintain a calm manner and interact appropriately with others in stressful and emergency situations.
- Ability to maintain appropriate professional boundaries with clients.
- Ability to exercise sound judgment to ensure safety of self and others.
- Ability to convey the above through acceptable means of documentation, written, typed, verbal.

##### *Social Worker II, Bargaining Unit 8, Job Grade 20*

Applicants must have (A) a Bachelor's degree or higher in social work, psychology, sociology, counseling, counseling education or criminal justice or a relevant human services degree and (B) a current and valid Licensures as a Licensed Social Work Associate, Licensed Social Worker, Licensed Certified Social Worker or Licensed Independent Clinical Social Worker issued by the Massachusetts Board of Registration, and (C) and two (2) years of full-time or equivalent part-time experience in social work, or (D) or any equivalent combination of the required experience and the substitutions below.

The classification may require possession of a current and valid Motor Vehicle Driver's License at a class level specific to assignment.

Substitutions:

- I. A Master's degree in social work, psychology, sociology, counseling, counseling education or criminal justice, or a relevant human services degree may be substituted for one (1) year of the required (C) experience.

Incumbents are required to have the following at the time of hire:

- Ability to act as a mentor and provide guidance to others.
- Ability to prioritize cases and identify true emergencies.
- Knowledge of agency policies and procedures.
- Knowledge of community resources and services for clients and families.

*Social Worker III (Supervisor), Bargaining Unit 8, Job Grade 23*

Applicants must have (A) a Master's degree in social work, psychology, sociology, counseling, counseling education or criminal justice or a relevant human services degree and (B) a current and valid Licensures as a Licensed Social Work Associate, Licensed Social Worker, Licensed Certified Social Worker or Licensed Independent Clinical Social Worker issued by the Massachusetts Board of Registration, and (C) and three (3) years of full-time or equivalent part-time experience in social work, or (D) or any equivalent combination of the required experience and the substitutions below.

The classification may require possession of a current and valid Motor Vehicle Driver's License at a class level specific to assignment.

Substitutions:

- I. A Doctorate degree in a related field may be substituted for two (2) years of the required (C) experience.

Incumbents are required to have the following at the time of hire:

- Knowledge of State Agencies and family systems.
- Ability to lead others and organize work.

*Data on the Education and Qualifications of Personnel*

The chart below provides data on the higher education of social workers and the levels of licensure held (data as of January 2018)

Requirement		Data	Agency Comments
Higher Education of Social Workers			
	1. number of social workers and supervisors who have a bachelors' degree in social work	3,192	Count of Social Worker Technician (A/B), Social Worker (D)/(G), and Social Worker Is, IIs, IIIs, and IVs FTEs who have a bachelor's degree or higher. DCF does not have data on specific scope of study.
	2. number of social workers and supervisors who have a masters' degree in social work	769	Count of Social Worker Technician (A/B), Social Worker (D)/(G), and Social Worker Is, IIs, IIIs, and IVs FTEs who have a master's degree or higher. DCF does not have data on specific scope of study.
Licensure of Social Workers			
	1. total number of social workers	3,345	Count of Social Worker Technician (A/B), Social Worker (D)/(G), and Social Worker Is, IIs, IIIs, and IVs FTEs.
	2. total number of social workers holding licensure by level		207 staff members were within the probationary period from hire within which they can obtain their license.

## Demographic Information of Personnel

### Workforce Summary Report for DSS, 2018 Q 4

EEO Job Category Description	Summary Total Workforce	Male	Male %	Female	Female %	Minorities	Minorities %	Veterans	Veterans %	Disabled	Disabled %
Officials and Administrators	312	71	22.6	241	77.4	71	22.8	1	0.3	10	3.3
Professionals	3668	663	18.1	2998	81.7	1287	35.1	18	0.5	86	2.3
Technicians	44	9	20.4	35	79.6	14	30.6	0	0.0	4	9.1
Protective Service:Non-Sworn	1	0	0.0	1	100.0	0	0.0	0	0.0	0	0.0
Office/Clerical	213	22	10.4	190	89.2	98	46.0	1	0.5	9	4.1
<b>Grand Total</b>	<b>4238</b>	<b>765</b>	<b>18.0</b>	<b>3465</b>	<b>81.8</b>	<b>1469</b>	<b>34.7</b>	<b>20</b>	<b>0.5</b>	<b>109</b>	<b>2.6</b>

## Caseload/Workload Requirements of Personnel

With the addition of staff and improvements in case decision-making, the Department has been able to significantly reduce its weighted average caseload (the average caseload carried by staff adjusted for the type of work being performed). In March 2016, the weighted average caseload for staff was 22.4. As of April 2018, it has dropped to 19.03 with an average family count of 15.6 for ongoing social workers.

## Juvenile Justice Transfers

*Report the number of children under the care of the state child protection system who were transferred into the custody of the state juvenile justice system in FY 2017 (specify if another time period is used). Describe the source of this information, how the state defines the reporting population, and any other relevant contextual information about the data:*

DCF, the state child protection agency, does not transfer custody to the Department of Youth Services (DYS), the state juvenile justice agency. The juvenile court commits youth to DYS. In May 2018, DCF matched its records with children committed to DYS during calendar year 2017. DCF had custody of 77 (72 distinct) youth on the same day that they were committed by the courts to DYS. For 14 of these youth, DCF custody ended on the same day DYS was granted custody. The remaining 63 were in joint DCF/DYS custody for some period of time. The Department does not track discharge dates for DYS youth on its FamilyNet system, so is unable to determine how long joint custody continued.

## 2. Sources of Data on Child Maltreatment Deaths:

*Describe all sources of information relating to child maltreatment fatalities that the state agency currently uses to report data to NCANDS:*

Massachusetts relies on reports of alleged child abuse and neglect to identify child fatalities. Data compiled DCF's Case Investigation Unit, state and regional child fatality review teams convened pursuant to Massachusetts law, and from the Registry of Vital Records and Statistics (RVRS) are used to determine if the fatality was due to abuse or neglect. As these data are not available until after the NCANDS Child File must be transmitted, Massachusetts reports counts of child fatalities due to maltreatment in the NCANDS Agency file.

*If the State does not use information from the State's vital statistics department, child review teams, law enforcement agencies and medical examiners' offices when reporting child maltreatment fatality data to NCANDS, explain why any of these sources are excluded:*

Massachusetts uses information from the Massachusetts RVRs, child fatality review teams, reports filed by law enforcement agencies and information from the medical examiner when reporting child maltreatment fatality data to NCANDS.

*If not currently using all sources of child maltreatment fatality data listed in the previous bullet, describe the steps the agency will take to expand the sources of information used to compile this information:*

This is not applicable to DCF.

### **3. Education and Training Vouchers:**

*Identify the number of youth (unduplicated count) who received ETV awards from July 1, 2016 through June 30, 2017 (the 2016-2017 school year) and July 1, 2017 through June 30, 2018 (the 2017-2018 school year). States may estimate a total if they do not have the total number for the 2017-2018 school year. Report the number of youth who were new voucher recipients in each of the school years. To facilitate more consistent reporting, please use Attachment E for a format to report information on the ETVs awarded:*

#### **Annual Reporting of State Education and Training Vouchers Awarded**

Name of State: Massachusetts

<u>Final Number:</u>	<b>Total ETVs Awarded</b>	<b>Number of New ETVs</b>
<b>2016-2017 School Year</b> (July 2016 to June 2017)	484	221
<b>2017-2018 School Year</b>	481*	226

\*Number of vouchers awarded as of May 2018.

### **4. Inter-Country Adoptions:**

*Report the number of children who were adopted from other countries and who entered into state custody in FY 2017 as a result of the disruption of a placement for adoption or the dissolution of an adoption, the agencies who handled the placement or the adoption, the plans for the child, and the reasons for the disruption or dissolution:*

The Department reviewed the cases of children who entered care during federal fiscal year 2017 and who were previously adopted. The Department is not able to identify children who meet the criteria for entering as a result of a disruption of an intended international adoption and found no children who experienced dissolution of an international adoption.

### **5. Monthly Caseworker Visit Data:**

States are required to collect and report data on monthly caseworker visits with children in foster care (section 424(f) of the Act). Data for FY 2017 is to be reported separately from the 2019 APSR and will be due for submission to CB by December 17, 2018:

The Department will submit the Monthly Caseworker Visit Data by December 17, 2018.

## **H. FINANCIAL INFORMATION**

In this section, the Department provides responses/assurances regarding certain payment limitations denoted with the APSR program instructions. We also provide our CFS-101 submission.

### **1. Payment Limitations – Title IV-B, Subpart 1**

*Include information on the amount of FY 2005 title IV-B, subpart 1, funds that the state expended for child care, foster care maintenance, and adoption assistance payments for comparison purposes*

The Department has never used, nor does it plan to use, IV-B, subpart 1 funds to support child care, foster care maintenance, or adoption assistance payments.

*Include information on the amount of non-federal funds that were expended by the state for foster care maintenance payments and used as part of the title IV-B, subpart 1 state match for FY 2005.*

In FY2005, non-federal foster care maintenance funds used as a match totaled \$227,427.

*States may spend no more than ten percent of title IV-B, subpart 1 federal funds for administrative costs (section 424(e) of the Act).*

The Department adheres to the ten percent limitation on administrative costs for IV-B, subpart 1, as shown in our CFS-101 submission.

### **2. Payment Limitations – Title IV-B, Subpart 2**

*For each service category with a percentage of funds that does not approximate 20 percent of the grant total, the state must provide in the narrative portion of the APSR a rationale for the disproportion.*

The Department provides a rationale for FY2019 service categories that do not receive the minimum 20% funding level in section C.4 of our APSR response.

*States may spend no more than ten percent of federal funds under title IV-B, subpart 2 for administrative costs (section 434(d) of the Act). This limitation applies to both the PSSF program and the Monthly Caseworker Visit grant.*

The Department adheres to the ten percent limitation on administrative costs for IV-B, subpart 2, and the Monthly Caseworker Visit Grant as shown in our CFS-101 submission.

*States must provide the FY 2016 state and local share expenditure amounts for the purposes of title IV-B, subpart 2 for comparison with the state's 1992 base year amount, as required to meet the non-supplantation requirements in section 432(a)(7)(A) of the Act.*

The FY2016 state and local share expenditure amounts for the purposes of IV-B, subpart 2 were \$59M. This is in comparison to the 1992 base year amount of \$41.7M.

### **3. FY2018 Funding – Revised CFS-101 Budget Request**

N/A

#### **4. FY2019 Budget Request (CFS-101, Parts I and II)**

At the end of this section, we provide part I and part II our CFS-101 submission.

#### **5. FY2016 Title IV-B Expenditure Report (CFS-101, Part III)**

*Complete Part III of the CFS-101 workbook to report the actual amount of FY 2016 funds expended in each program area of title IV-B funding by source*

At the end of this section, we provide part III of our CFS-101 submission which shows our projected and actual expenditures on the PSSF grant service categories in FY2016. In its Rationale for Requested FFY16 Funds, DCF projected spending approximately 35% of its total available FFY 16 PSSF grant funds in Family Support Services, followed by 24% in Family Preservation Services 14% in Adoption Promotion and Support, 8% in Time Limited Family Reunification Services, 9% in Administration, and 10% in Planning/Other Service Related Activities. However as Massachusetts, along with the rest of the country, continued to grapple with the ongoing opioid crisis, we saw a corresponding increase in the need for adoption and reunification activities resulting in additional spending in those areas, resulting in a slight shift in the overall spending percentages - approximately 33% was spent in Family Support Services, 19% in Family Preservation, 14% in Adoption Promotion, 14% in Time Limited Family Reunification, 9% in Administration, and 10% in Planning/Other Services.

*If the state's expenditure of FY 2016 IV-B, subpart 2 PSSF grant did not approximate 20 percent of the grant total for any of the four PSSF service categories, provide information in the narrative of the APSR on 1) whether the disproportion was requested when the state submitted its estimated expenditures for FY 2015; and 2) the rationale for the disproportion in the actual expenditure of FY 2016 grant funds.*

The Department did not achieve the minimum 20% spending levels for all four PSSF grant service categories in FY2016. The disproportion was requested when the state submitted our estimated expenditures for FY2016. As explained in our FY2016 APSR (and current APSR), when originally awarded PSSF grant funds, Massachusetts was explicit in its intent to build a strong community infrastructure that would result in a fundamental shift in how the child welfare system related to families and communities.

Given the ongoing integration of the work of the Coalitions with that of DCF, the vast majority of the \$3.1 million in PSSF funds provided to the Coalitions is used to fund services and activities that cross one or more service categories. However, DCF still relies on PSSF grant funds as support for preventive Family Support programs due to a relatively small pool of state Purchase of Service (POS) dollars dedicated for this purpose. In SFY16, the State had annual expenditures in excess of \$47 million in POS dollars for Family Networks Support and Stabilization Services (FNSS) which is inclusive of Family Preservation and Adoption Support Services, but does not include any direct service personnel costs in these programmatic areas. In addition, for SFY16, the State targeted over \$1.9 million in State funds for time-limited reunification services and over \$16 million of State funds for crisis intervention services. Given the high level of State funds used to support various types of reunification services over the past several years, DCF has found that it is able to meet the demand for time-limited reunification services with the level of Title IV-B funds proposed.

We are of the understanding that the maintenance of effort level of \$41.7M dollars was established in 1993 using reports submitted by DCF to the Regional Office, for all non-placement services expenditures in 1992.

#### **6. Standard Form 425 (SF-425) Federal Financial Report (FFR)**

The Department is in compliance with the submission of required 425 reports.



**CFS-101, Part I: Annual Budget Request for Title IV-B, Subpart 1 & 2 Funds, CAPTA, CFCIP, and ETV and  
Reallotment for Current Federal Fiscal Year Funding**

For Federal Fiscal Year 2019: October 1, 2018 through September 30, 2019

<b>1. Name of State or Indian Tribal Organization:</b> Massachusetts		<b>2. EIN</b>	
<b>3. Address:</b> (insert mailing address for grant award notices in the two rows below) Massachusetts Department of Children and Families 600 Washington Street - 6th Floor, Boston, MA 02111		<b>4. Submission Type:</b> <input checked="" type="checkbox"/> NEW <input type="checkbox"/> REALLOTMENT <input type="checkbox"/> REVISION	
a) Email address for grant award notices: David.O'Callaghan@state.ma.us			
<b>REQUEST FOR FUNDING for FFY 2019:</b> Hardcode all numbers; no formulas or linked cells.			
<b>5. Requested title IV-B Subpart 1, Child Welfare Services (CWS) funds:</b>		\$3,713,364	
a) Total administrative costs (not to exceed 10% of the CWS request)		\$0	
<b>6. Requested title IV-B Subpart 2, Promoting Safe and Stable Families (PSSF) funds and estimated expenditures:</b>		<b>% of Total</b>	
a) Family Preservation Services		19% \$824,048	
b) Family Support Services		33% \$1,433,499	
c) Time-Limited Family Reunification Services		14% \$605,160	
d) Adoption Promotion and Support Services		14% \$600,868	
e) Other Service Related Activities (e.g. planning)		10% \$440,000	
f) Administrative costs (APPLICABLE TO STATES ONLY: not to exceed 10% of the PSSF request)		9.0% \$388,339	
g) Total itemized request for title IV-B Subpart 2 funds: <i>NO ENTRY: Displays the sum of lines 6a-6f.</i>		100% \$4,291,914	
<b>7. Requested Monthly Caseworker Visit (MCV) funds: (For STATES ONLY)</b>		\$270,452	
a) Total administrative costs (FOR STATES ONLY: not to exceed 10% of MCV request)		\$0	
<b>8. Requested Child Abuse Prevention and Treatment Act (CAPTA) State Grant: (STATES ONLY)</b>		\$467,576	
<b>9. Requested Chafee Foster Care Independence Program (CFCIP) funds:</b>		\$3,125,354	
a) Indicate the amount to be spent on room and board for eligible youth (not to exceed 30% of CFCIP request).		\$0	
<b>10. Requested Education and Training Voucher (ETV) funds:</b>		\$1,020,813	
<b>REALLOTMENT:</b>			
Complete this section for adjustments to current year (FFY 2018) awarded funding levels.			
<b>11. Identification of Surplus for Reallotment:</b>			
a) Indicate the amount of the State's/Tribe's FFY18 allotment that will not be utilized for the following programs:			
CWS	PSSF	MCV (States only)	CFCIP Program
\$0	\$0	\$0	\$0
<b>12. Request for additional funds in the current fiscal year, should they become available for re-allotment:</b>			
CWS	PSSF	MCV (States only)	CFCIP Program
\$0	\$0	\$0	\$0
<b>13. Certification by State Agency and/or Indian Tribal Organization:</b> The State agency or Indian Tribal Organization submits the above estimates and request for funds under title IV-B, subpart 1 and/or 2, of the Social Security Act, CAPTA State Grant, CFCIP and ETV programs, and agrees that expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with, and approved by, the Children's Bureau.			
<b>Signature of State/Tribal Agency Official</b> 		<b>Signature of Federal Children's Bureau Official</b>	
<b>Title</b> CFO		<b>Title</b>	
<b>Date</b> 8/30/2018		<b>Date</b>	

2019 APSR

**CFS-101 Part II: Annual Estimated Expenditure Summary of Child and Family Services**

Name of State or Indian Tribal Organization: Massachusetts

For FFY 2019: OCTOBER 1, 2018 TO SEPTEMBER 30, 2019

SERVICES/ACTIVITIES	(A) IV-B Subpart I- CWS	(B) IV-B Subpart II- PSSF	(C) IV-B Subpart II- MCV	(D) CAPTA	(E) CFCIP	(F) ETV	(G) TITLE IV-E *	(H) STATE, LOCAL & DONATED FUNDS	(I) Number Individuals To Be Served	(J) Number Families To Be Served	(K) Population To Be Served	(L) Geog. Area To Be Served
1.) PROTECTIVE SERVICES	\$ 2,785,023			\$ -			\$ -	\$ 106,672,767	50000		all children	statewide
2.) CRISIS INTERVENTION (FAMILY PRESERVATION)	\$ 557,005	\$ 824,048		\$ -			\$ -	\$ 65,647,471	5414		children not in placement served by the PSSF grant	statewide
3.) PREVENTION & SUPPORT SERVICES (FAMILY SUPPORT)	\$ -	\$ 1,433,499		\$ 467,576			\$ -	\$ 77,879,951	17260	-	Abused and Neglected Children served by the PSSF grant	statewide
4.) TIME-LIMITED FAMILY REUNIFICATION SERVICES	\$ -	\$ 605,160		\$ -			\$ -	\$ 24,445,896	10176		Children in Placement	statewide
5.) ADOPTION PROMOTION AND SUPPORT SERVICES	\$ -	\$ 600,868					\$ -	\$ 35,948,225	668	-	Children in Placement with goal of adoption who are legally free and restricted to a family	statewide
6.) OTHER SERVICE RELATED ACTIVITIES (e.g. planning)	\$ 371,336	\$ 440,000					\$ -	\$ 69,524,943	-	-	-	statewide
7.) FOSTER CARE MAINTENANCE:												
(a) FOSTER FAMILY & RELATIVE FOSTER CARE	\$ -						\$ 59,527,892	\$ 109,361,895	9379	-	children in foster care	statewide
(b) GROUP/INST CARE	\$ -						\$ 16,657,931	\$ 267,709,134	2250	-	children in congregate care	statewide
8.) ADOPTION SUBSIDY PYMTS.	\$ -						\$ 31,267,297	\$ 40,619,841	7574	-	adoption subsidies	statewide
9.) GUARDIANSHIP ASSISTANCE PAYMENTS	\$ -						\$ 1,240,195	\$ 24,017,448	2753	-	guardianship subsidies	statewide
10.) INDEPENDENT LIVING SERVICES	\$ -				\$ 3,125,354		\$ -	\$ 16,568,320	1455		adolescents	statewide
11.) EDUCATION AND TRAINING VOUCHERS	\$ -				\$ -	\$ 1,020,813	\$ -	\$ -	481	-	adolescents	statewide
12.) ADMINISTRATIVE COSTS	\$ -	\$ 388,339	\$ -				\$ 23,152,907	\$ 23,152,907				
13.) FOSTER PARENT RECRUITMENT & TRAINING	\$ -	\$ -		\$ -			\$ -	\$ 350,000				
14.) ADOPTIVE PARENT RECRUITMENT & TRAINING	\$ -	\$ -		\$ -			\$ -	\$ 100,000				
15.) CHILD CARE RELATED TO EMPLOYMENT/TRAINING	\$ -						\$ -	\$ -	-	-	-	-
16.) STAFF & EXTERNAL PARTNERS TRAINING	\$ -	\$ -		\$ -	\$ -	\$ -	\$ -	\$ 2,233,111				
17.) CASEWORKER RETENTION, RECRUITMENT & TRAINING	\$ -	\$ -	\$ 270,452				\$ -	\$ 248,123				
18.) TOTAL	\$ 3,713,364	\$ 4,291,914	\$ 270,452	\$ 467,576	\$ 3,125,354	\$ 1,020,813	\$ 131,846,222	\$ 854,481,032				

**19.) TOTALS FROM PART I**

\$3,713,364 \$4,291,914 \$270,452 \$467,576 \$3,125,354 \$1,020,813

**20.) Difference (Part I - Part II)**


\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

(If there is an amount other than \$0.00 in Row 20, adjust amounts on either Part I or Part II. A red value means Part II exceeds request)

21.) Population data are included in the APSR/CFSP narrative, rather than above in columns I - L.

\* Only states or tribes operating an approved title IV-E waiver demonstration may enter information for rows 1-6 in column (g), indicating planned use of title IV-E funds for these purposes.

**CFS-101, PART III: Annual Expenditures for Title IV-B, Subparts 1 and 2, Chafee Foster Care Independence and Education And Training Voucher  
Reporting For Federal Fiscal Year 2016 Grants: October 1, 2015 through September 30, 2017**

<b>1. Name of State or Indian Tribal Organization:</b> Massachusetts		<b>2. EIN:</b>	<b>3. Address:</b> Massachusetts Department of Children and Families 600 Washington Street - 6th Floor, Boston, MA 02111			
<b>4. Submission Type:</b>						
Description of Funds	(A) Estimated Expenditures for FFY 16 Grants	(B) Actual Expenditures for FFY 16 Grants	(C) Number Individuals served	(D) Number Families served	(E) Population served	(F) Geographic area served
<b>5. Total title IV-B, subpart 1 (CWS) funds</b>	\$ 3,732,463	\$ 3,732,443	1912	-	open cases	statewide
a) Administrative Costs (not to exceed 10% of CWS allotment)	\$ -	\$ -				
<b>6. Total title IV-B, subpart 2 (PSSF) funds</b> Tribes enter amounts for Estimated and Actuals, or complete 6a-f.	\$ 4,518,775	\$ 4,518,766	-	10202	families with concrete needs	statewide
a) Family Preservation Services	\$ 1,084,506	\$ 865,582				
b) Family Support Services	\$ 1,581,571	\$ 1,508,224				
c) Time-Limited Family Reunification Services	\$ 361,502	\$ 636,091				
d) Adoption Promotion and Support Services	\$ 632,628	\$ 633,783				
e) Other Service Related Activities (e.g. planning)	\$ 451,878	\$ 451,876				
f) Administrative Costs (FOR STATES: not to exceed 10% of PSSF allotment)	\$ 406,690	\$ 423,210				
g) Total title IV-B, subpart 2 funds NO ENTRY: This line displays the sum of lines a-f.	\$ 4,518,775	\$ 4,518,766				
<b>7. Total Monthly Caseworker Visit funds (STATES ONLY)</b>	\$ 284,639	\$ 284,639				
a) Administrative Costs (not to exceed 10% of MCV allotment)	\$ -	\$ -				
<b>8. Total Chafee Foster Care Independence Program (CFCIP) funds</b>	\$ 3,143,968	\$ 3,143,959				
a) Indicate the amount of allotment spent on room and board for eligible youth (not to exceed 30% of CFCIP allotment)	\$ -	\$ 65,550	65	-	adolescents	statewide
<b>9. Total Education and Training Voucher (ETV) funds</b>	\$ 1,020,225	\$ 1,020,029	487	-	adolescents	statewide
<b>10. Certification by State Agency or Indian Tribal Organization:</b> The State agency or Indian Tribal Organization agrees that expenditures were made in accordance with the Child and Family Services Plan, which was jointly developed with, and approved by, the Children's Bureau.						
<b>Signature of State/Tribal Agency Official</b> 			<b>Signature of Federal Children's Bureau Official</b>			
<b>Title</b> CFO	<b>Date</b> 8/30/2018	<b>Title</b>		<b>Date</b>		

**APPENDIX:**

**DEPARTMENT OF CHILDREN AND FAMILIES TAXONOMY**

Category	Program	Model	Activity Code	Index Number
<b>Foster Care</b> Temporary substitute care placement for child(ren)/adolescents in the care or custody of DCF in a safe and nurturing community based family setting, approved/licensed and managed by DCF or provided through a purchase of service agreement with a DEEC licensed foster care agency and monitored by DCF.	<b>Department Foster Care</b> Temporary substitute care placement for child(ren)/adolescent(s) in the care or custody of DCF in a safe and nurturing community based family setting, approved/licensed and managed by DCF.	<b>Tier I Unrestricted</b> Temporary placement of children/adolescents who need a basic quality level of daily care in a family setting in an unrestricted DCF foster home, approved/licensed to provide Tier I foster care.	FOS0	11
		<b>Tier I Kinship</b> Temporary placement of children/adolescents who need a basic quality level of daily care in a family setting with a member of the family's kinship network who has been approved/licensed to provide Tier I foster care restricted for specific children who are kin.	FOS0	11
		<b>Tier I Pre-Adoptive</b> Placement of child(ren)/ adolescent(s) with the goal of adoption needing a basic quality level of care in a permanent family setting approved by DCF as a Tier I pre-adoptive family.	FOS0	11
		<b>Tier I Independent Living</b> Payment made to an older adolescent who is in the Department's care, but who lives on their own in a structured setting.	FOS0	11

Category	Program	Model	Activity Code	Index Number
<b>Family Networks - Network</b> Integrated Service system for children and families serviced by the Massachusetts child welfare system.	<b>Support and Stabilization</b> Support and stabilization services encompass services currently known as family-based services; the service providers will 'unbundle' from their placement programs; and portable diagnostic and assessment services. These services are intended to be flexible, rooted in the community, and have the capacity to be shaped in a manner that will address the specific needs of each family.	<b>Comprehensive</b> Comprehensive program models are those that use teams whose staffing, interventions, and funding are blended in a manner that allows for varying levels of intensity, duration, and capacity for building strengths and managing risk with complex families.	FNSS	13
		<b>Parent Support</b> Designed to provide assistance and support to parents and caretakers in building skills relative to safety, supervision, and nurturing.	FNSS	13
		<b>Youth Support</b> Designed to provide assistance and support to youth in order to improve relationships with families, schools and other community systems.	FNSS	13
		<b>Family Stabilization</b> Designed to provide assistance and support to families in keeping their children safely at home and in the community.	FNSS	13
		<b>Placement Diversion</b> Designed to provide assistance and support to families whose children are at imminent risk of out-of-home placement in foster care, residential, or inpatient hospitals.	FNSS	13
		<b>Reunification</b> Designed to provide assistance and support to families whose children are returning from out-of-home placement settings.	FNSS	13
		<b>Assessment</b> Encompass evaluations, clinical assessments, and diagnostic services.	FNSS	13
		<b>Support and Stabilization - Other</b> Services which do not readily fall into previous model definitions.	FNSS	13

Category	Program	Model	Activity Code	Index Number
<b>Contracted Support Services</b>	<b>Protective</b>	<b>Comprehensive Emergency Services</b>	CSSE	22
Services that may closely resemble internal Department mission or activities that are performed through purchase of services contracts.	Services or activities designed to avoid or prevent incidence or continuation of child abuse or neglect.	A coordinated system for providing immediate and effective supportive response on a 24 hour basis to individuals, families or children. Although these are crisis situations, they are not protective in nature.		
		<b>Investigations (Conflict of Interest)</b>	CSSI	22
		The provider conducts investigations of reports of child abuse and neglect that involve DCF employees and their immediate relatives.		

Category	Program	Model	Activity Code	Index Number
Caring Together	Residential School	<b>Residential school</b> Residential placement services with an on-site school approved by the Department of Elementary and Secondary Education. Also includes services to help students and family transition to home and community.	CTRE	24
	STARR	<b>STARR</b> Short-term placement services for participants in the waiver.	CTST	24
	The Continuum	<b>Community Wrap/Sub Contracted Wrap</b> Wide range of comprehensive community based services for youth and their family to support them in learning the skills needed to transition to or remain at home and live safely in their community. Non Placement service. Includes subcontracted services.	CTC0	24
	The Continuum	<b>Adjusted GH 1:3/Sub Contracted Adjusted 1:3</b> This part of the Continuum array of services. Out of home residential placement with a 1 to 3 ratio. Youth are able to attend school off grounds. Includes subcontracted services.	CTC0	24
	The Continuum	<b>Adjusted GH 1:4/Sub Contracted Adjusted 1:4</b> This part of the Continuum array of services. Out of home residential placement with a 1 to 4 ratio. Youth are able to attend school off grounds. Includes subcontracted services.	CTC0	24
	Group Home	<b>Intensive 1:3</b> Out of home residential placement with a 1 to 3 ratio. Youth are able to attend school off grounds.	CTGH	24
	Group Home	<b>Group Home 1:4</b> Out of home residential placement with a 1 to 4 ratio. Youth are able to attend school off grounds.	CTGH	24
	Respite	<b>Respite</b> A brief or short-term service for a youth provided by adults other than the birth parents, foster parents, adoptive parents or legal guardian with whom the child/ youth normally resides, typically used to give the parents/ caregiver and youth time away from each other in order to decrease stress and support the family system.	CTRS	24



		Services which assist with successful transitions from Group Home to home and community. Includes family treatment beginning while youth is still in the Group Home and continuing after return to home/ community.		
	<b>Group Home</b>	<b>Stepping Out Group Home</b>	CTGH	24
		Community based services which assist with successful transition from Pre-Independent Living, Independent Living and Teen Parent Enhanced placement services to home/ community		
	<b>Group Home</b>	<b>Pre-Independent Living</b>	CTGH	24
		Out of Home Residential Placement with a 1 to 5 ratio. Focus is on Independent Living Skills for youth ages 16 and up, youth is typically enrolled in school or GED program or has completed and is involved with vocational training.		
	<b>Group Home</b>	<b>Independent Living</b>	CTGH	24
		Supported apartment living (scattered site or centralized). Staff provide outreach and care coordination, but are not on-site 24 hours per day. Youth are 17.5 and older		
	<b>Group Home</b>	<b>Stepping Out -- Independent Living</b>	CTGH	24
		Provides continuation of care coordination services by the same provider after the child leaves the program in order to assist youth with a successful transition to the community.		
	<b>Placement Add-On</b>	<b>Transition to IFC Add-On</b>	CTAD	24
		Provides short term services that assist youths in successfully transitioning to Intensive Foster Care within 3 to 6 months of admission to this program.		
	<b>Group Home</b>	<b>Intensive Group Home with Expanded Nursing (specialty)</b>	CTGH	24
		Services are the same as those provided in Intensive Group Home with a ratio of 1:3 with additional nursing positions to support the medical needs of referred youth.		
	<b>Group Home</b>	<b>Intensive 1:2 Group Home (specialty)</b>	CTGH	24
		Out of Home Residential Placement with a 1 to 2 ratio, designed for youth who have intellectual and developmental disabilities and/or autism with concurrent behavioral/emotional challenges.		
	<b>Group Home</b>	<b>Intensive 1:1 Supported Living (specialty)</b>	CTGH	24
		Out of Home Residential Placement with a 1 to 1 ratio, designed for young adults (18 to 22) with a range of significant disabilities.		
	<b>Group Home</b>	<b>Medically Complex Needs Group Home (specialty)</b>	CTGH	24
		provides services to youth with complex medical needs that require intensive out-of-home nursing, family driven, individualized and sensitive to medical and other forms of trauma and the resulting effects on families and caregivers; maximizes youth's functioning		

		provides services to youth with complex medical needs that require intensive out-of-home nursing, family driven, individualized and sensitive to medical and other forms of trauma and the resulting effects on families and caregivers; maximizes youth's functioning		
	<b>Group Home</b>	<b>State College Preparatory Program (specialty)</b>		24
		Provides young adults with the opportunity to attend a state operated university or college while receiving clinical, social, academic and daily living supports with tuition, room and board		
	<b>Group Home</b>	<b>Outreach Independent Living (specialty)</b>		24
		An apartment living program for agency identified youth of the same sex with opportunities for education, assistance with employment and a support structure as youth transition from DCF foster care system to living in the community		
	<b>Teen Parenting</b>	<b>Enhanced Teen Parenting</b>	CTTP	24
		Out of Home Residential Placement with a 1 to 4 ratio for pregnant or parenting teens. Provides a higher level of supervision than other Teen Parenting services.		
	<b>Teen Parenting</b>	<b>Stepping Out -- Teen Parenting</b>	CTTP	24
		Provides continuation of care coordination services by the same provider after the teen parent leaves the Enhanced Teen Parent program in order to assist with a successful transition to the community.		
	<b>Placement Add-On</b>	<b>Behavioral Psychologist</b>	CTAD	24
		Additional services from a behavioral psychologist over and above services provided through the contract.		
	<b>Placement Add-On</b>	<b>Canine Therapy</b>	CTAD	24
		Therapy dog.		
	<b>Placement Add-On</b>	<b>Direct Care III</b>	CTAD	24
		Additional staffing hours provided by a DCIII staff person, usually to support 1:1 services for a specified period of time over and above the staffing provided through the contract.		

		Additional staffing hours provided by a DCII staff person, usually to support 1:1 services for a specified period of time over and above the staffing provided through the contract.		
	<b>Placement Add-On</b>	<b>Direct Care I</b> Additional staffing hours provided by a DCI staff person, usually to support 1:1 services for a specified period of time over and above the staffing provided through the contract.	CTAD	24
	<b>Placement Add-On</b>	<b>Forensic Psychiatrist (DMH-designated, CJCC qualified)</b> Additional services from a forensic psychiatrist over and above services provided through the contract.	CTAD	24
	<b>Placement Add-On</b>	<b>Medical Consultation</b> Additional Medical Consultation services provided over and above services provided through the contract.	CTAD	24
	<b>Placement Add-On</b>	<b>Nurse</b> Additional Nursing services provided over and above services provided through the contract.	CTAD	24
	<b>Placement Add-On</b>	<b>Psychiatrist</b> Additional Psychiatry services provided over and above services provided through the contract.	CTAD	24
	<b>Placement Add-On</b>	<b>Psychologist</b> Additional services from a psychologist over and above services provided through the contract.	CTAD	24
	<b>Placement Add-On</b>	<b>Forensic Psychologist</b> Additional services from a forensic psychologist over and above services provided through the contract.	CTAD	24
	<b>Teen Parenting</b>	<b>TLP 1:5</b> Services to help teens develop support systems including contact with baby's father, teen's parents, father's parents and other community supports. Facilities staffed 24 hours and are provided in group home and scattered apartment settings.		24
	<b>Teen Parenting</b>	<b>House Parent</b> Same as TLP 1:5 but are provided in an apartment building or multi family home. Teens reside in shared apartments and the houseparent has separate living quarters on site.		24

		To provide support for full family engagement in all aspects of a youth's care and treatment during the course of residential service and strengthen the parent/caregiver's capacity to care for their youth at home and in the community		
	<b>Teen Parenting</b>	<b>STEP (DTA Only)</b>		24
		Target is 18 to 19 year olds who have completed treatment plans and are focused on job training and transitional housing services to assist in becoming self sufficient. Apartment setting with staff available 24 hours a day.		
				24
	<b>Teen Parenting</b>	<b>Emergency Bed Add-On</b>		
	<b>Teen Parenting</b>	<b>Teen Pregnancy/Parenting</b>	CTT0	16
		Structured residential living programs with 24 hour supervision for pregnant and parenting teen/families; assessed as unable to live with their family of origin or other appropriate adult caretaker; with a focus on acquiring and strengthening skills of basic parenting and independent living, ensure the healthy growth and development of their children and with a goal of completing a high school education or G.E.D. The settings may vary but must provide 24 hour skilled staffing and supervision, access to licensed childcare. Teen living programs must provide living arrangements for up to 36 months. Services may also include counseling, case management or topically-oriented programs.		
	<b>Teen Parenting</b>	<b>Transitional Living</b>	CTT0	16
		Small staffed apartment setting. Intervention intended to stabilize		
<b>Family Resource Center</b>	<b>Family Resource Center</b>	<b>Family Resource Center - Full</b>	FRCF	
	Community-based, culturally competent program that provides evidence-based parent education groups, information and referral, mentoring, educational support and other opportunities for children and families; provide services specific to Children Requiring Assistance who are having serious problems at home and at school, including runaways, truants, and sexually exploited children, as required by Chapter 240 of the Acts of 2012.	One location; provides all required Basic and Network Services; completion of no more than 1,000 assessments per year		
	<b>Family Resource Center</b>	<b>Family Resource Center - Micro</b>	FRCM	
		(also known as a "Satellite" FRC) one location; provides all required Basic and Network Services at a reduced staffing and caseload level; based o completion of no more than 200 assessments per year.		
	260			

Category	Program	Model	Activity Code	Index Number
<b>Residential (non-Family Networks)</b>	<b>Shelter</b>	<b>Alternative Lock-up Program</b>	RESS	26
<b>Networks)</b>	Generally for emergency or immediate placement situations, shelters are short-term residential facilities for children and adolescents on a 24 hour per day basis.	This service provides an emergency or short-term alternative placement to incarceration or lock-up for juvenile offenders until they can be brought to court for arraignment on their charges.		