# CHILD AND FAMILY SERVICES REVIEW FINAL ASSESSMENT

Massachusetts July 2001

U.S. Department of Health and Human Services Administration for Children and Families Region I

#### **EXECUTIVE SUMMARY**

The Child and Family Services Review process examines seven major child welfare outcomes in the areas of safety, permanency, and well-being from a randomly selected sample of cases. It also examines the level of functioning of seven systemic factors, primarily on the basis of interviews with key community and agency stakeholders. The review determined that the Massachusetts child welfare programs were operating in substantial conformity with applicable Federal requirements on one of the seven major outcomes and with six of the seven systemic factors.

The Child and Family Services Review covers a broad array of child welfare programs, including child protective, family preservation, family support, reunification, foster care and adoption services. The review examines state performance on outcomes and systemic factors during a specific time period, which, in the case of Massachusetts, was from April 1, 2000 to July 27, 2001. It is intended to provide insight into the interrelated outcomes and systemic factors under review. With a strong focus on developing program improvement plans that are based on the results of the reviews, the process strives to identify not only areas needing improvement, but also the strengths within programs upon which meaningful plans for improvement can be developed.

The one outcome in which Massachusetts was determined to be in substantial conformity is the second permanency outcome, which evaluates the preservation of family relationships and connections for children in foster care. Massachusetts' strong attention to, and use of, relatives as placement resources for children contributed to the positive findings in this outcome. At the State's request, the sample of cases reviewed was stratified to include relative care placements to gather information on the impact of Massachusetts' kinship care initiative on the safety, permanency and well-being of children. In the cases reviewed, kinship care was found to have resulted in positive outcomes for children in these placements.

Among the systemic factors under review, Massachusetts was determined to be in substantial conformity in the areas of statewide information system, quality assurance system, training, service array, agency responsiveness to the community, and foster and adoptive parent licensing, recruitment, and retention. Several areas in the State's system were noted as having particular strengths, including the development and statewide implementation of family based services, the use of multidisciplinary assessment teams, the design and operation of the six-month foster care case review process, and the enhanced system for recruiting and supporting family resource parents (which includes foster, kinship, guardianship, and adoptive parents).

The review identified needs for improvement in both of the safety outcomes; in providing children with permanency and stability in their living situations (permanency outcome 1); and in all three of the well-being outcomes with regard to enhancing parental capacity to provide for their children's needs, and providing adequate services in the areas of education, physical health, and mental health.

In the area of safety, Massachusetts did not achieve the national standard for the recurrence rate of maltreatment (7.4%, compared to a national standard of 6.1%) or for preventing maltreatment of children in foster care (.94%, compared to a national standard of .57%). While safety is an area needing improvement, in a majority of the cases during the period under review, decision-making on child safety issues was found to be timely, appropriate, and consistent with State policy for the investigation and assessment of reports alleging abuse/neglect of children by a caretaker.

Achieving permanency for children in foster care is an area of particular concern with the State's high rate of foster care re-entries (22.3%, compared to a national standard of 8.6%) and the low rate of achieving adoption for children within 24 months of entering foster care (9.4%, compared to a national standard of 32%). Delays in achieving permanency as a result of legal or other procedural requirements were found in the Department of Social Services, the Courts, and the Interstate Compact on the Placement of Children.

For the first well-being outcome, enhancing parental capacity to provide for their children's needs, it was determined that efforts to involve parents in case planning were inconsistent. In addition, reviewers found barriers to families gaining timely access to appropriate services because of disparities between the assessed need and the services provided, the lack of certain services such as placement options for adolescents and affordable housing and/or extensive waiting lists for particular services such as mental health and substance abuse treatment.

The well-being outcomes related to the education and the physical and mental health of children were also rated as areas needing improvement. In a number of cases, educational and medical needs were not addressed. In addition, serious issues with coordination of and access to mental health services were found.

Among the seven systemic factors, the case review system in Massachusetts was the one factor that was determined not to be in substantial conformity. This factor includes the process for development of the case plan, foster care case reviews, permanency hearings, termination of parental rights, and notice of reviews to out-of-home caregivers. The areas in need of improvements are the involvement of families in developing case plans for their children and the quality of permanency hearings in the Courts.

Presented below is a synopsis of the Review findings.

#### I. SAFETY OUTCOMES

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

• 89.4% of the applicable cases reviewed under this outcome were rated as substantially achieved.

In the majority of applicable cases, the Department responded to reports alleging abuse and/or neglect of children and made face-to-face contact with the child(ren) involved in these reports within the timeframe required by State policy. Stakeholders attributed much of the

positive work done during intake and investigation to the experience and training of investigative staff. While a few cases were not responded to in accord with State requirements, stakeholders expressed the opinion that the Department's improved oversight and closer monitoring of the child protective system have resulted in greater consistency in practice and fuller compliance with State guidelines for investigation and assessment.

• According to the data in the statewide assessment, the 7.4% recurrence rate of maltreatment in Massachusetts approaches but does not meet the national standard of 6.1%.

While the State's data did not meet the national standard, only two of the applicable cases examined during the on-site review had repeat maltreatment during the review period. As reported in the statewide assessment and confirmed by stakeholder interviews, several changes in practice may result in improvements in this area. For example, the Department has implemented a revised case practice protocol that ensures a higher level of scrutiny for all open cases in which a subsequent report of maltreatment is filed. Stakeholders also noted that increased collaboration with other clinicians through the use of Multidisciplinary Assessment Teams (MDATs), Sexual Abuse Intervention Network (SAIN) teams, and Family Based Services team meetings is also adding to the Department's ability to keep children safe.

However, prior to the period under review, maltreatment recurred in a majority of cases. Information from the cases reviewed and stakeholder interviews appears to support the premise in the statewide assessment that the recurrence of maltreatment was more likely to be found in cases involving chronic neglect.

• The State's rate of .94% for preventing maltreatment of children in foster care does not meet the national standard of .57%.

While the national standard was not achieved, maltreatment of children in foster care was not found in any of the 32 out-of-home cases reviewed on-site.

The case review and stakeholder interviews confirmed that several of the Department's policies and practices are contributing to the safety of children in out-of-home placement. These include the strengthening of licensing standards, a focus on safety during the foster care review process, and an increased level of contact and support provided by DSS Workers. In addition, the Department enhanced the supportive services provided to foster and adoptive parents through programs such as KidsNet and Adoption Crossroads.

#### Status for Safety Outcome 1: Not In Substantial Conformity.

Basis: While 89% of the cases reviewed under this outcome were rated as substantially achieved, five (11%) of the 47 applicable cases were rated either partially or not achieved; therefore, the required 90% case performance level was not met. In addition, the State did not achieve the national standards for repeat maltreatment and maltreatment of children in foster care.

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

• 82.5% of the applicable cases reviewed under this outcome were rated substantially achieved.

In the area of services to protect children and to prevent unnecessary out-of-home placements, in the majority of cases, timely and appropriate services were provided to preserve families and to safely maintain children in their homes. Despite these strengths, in some of the applicable cases, reviewers identified problems such as delays in providing the necessary services to families caused by waiting lists and the lack of certain services, particularly substance abuse and mental health treatment, and/or the provision of inadequate or inappropriate services that were not targeted to the identified needs of children or families.

The Department made efforts to reduce the risk of harm in over 82% of the applicable cases reviewed. DSS staff were found to have frequent contact with families to monitor the level of risk to the child(ren) in the home. In addition, DSS workers were utilizing a team approach in assessment and decision-making as well as taking advantage of the consultation available for cases involving domestic violence. However, in a few cases, service needs identified during the assessment were not adequately or appropriately addressed. This failure to follow through resulted in cases remaining open due to continued risk to the child.

Stakeholders expressed the opinion that while improvements still need to be made in this area, several of the State's recent investments and improved practices were factors that may contribute to the Department's ability to reduce the risk of harm to children. Confirming the findings of the statewide assessment, reviewers and stakeholders noted that the Department has strengthened the front-end of the services continuum largely through its Family Based Services initiative and the provision of flexible funding to meet specific needs of families.

Status for Safety Outcome 2: Not In Substantial Conformity.

Basis: Seven (17.5%) of the 40 applicable cases reviewed under this outcome were rated either partially or not achieved; therefore, the required 90% case performance level was not met.

#### II. PERMANENCY OUTCOMES

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

Given the Department's emphasis on placement with kin, the out-of-home case sample being reviewed was stratified to include equal numbers of unrelated and related foster home placement cases.

- 75% of the applicable out-of-home placement cases reviewed under this outcome were rated substantially achieved.
- The State's rate of 22.3% for preventing foster care re-entries did not meet the national standard of 8.6%.

While the national standard was not achieved, only one of the applicable cases reviewed on-site had re-entries into care during the review period. Prior to this period, however, approximately one-third of the applicable cases had multiple entries into care. Although the case review did not conclusively show that re-entries into care were less likely for kinship placement than for unrelated placements, the statewide assessment found that children in kinship care are less likely to move in and out of substitute care than children in other placement settings. Stakeholders expressed the opinion that the aftercare and post-reunification services provided by the Family Based Services and CommonWorks programs have the potential for reducing recidivism.

• The State's rate of 76.95% for achieving placement stability for children in out-of-home care did not reach the national standard of 86.7%.

While the State's data did not meet the national standard, in 91% of the applicable cases reviewed on-site, children in care had no more than two placement changes during the period under review. In addition to the more stable kinship placements, stakeholders identified the sixweek placement review for early identification of placement issues, the level of commitment by the Family Resource Workers, and additional supports to foster families as contributing to increased placement stability.

Despite these strengths, there were a few non-relative cases during the period under review and a number of cases prior to the period under review in which children experienced more than two placement changes during their stay in foster care. The findings in the statewide assessment confirmed that this lack of stability for children in foster care is a real concern of the Department. In addition, a number of stakeholders, including the adolescents that were interviewed, expressed concern about the movement of children in placement.

It is the opinion of stakeholders that remaining challenges in foster care re-entries and placement stability include expanding the Department's ability to provide post-reunification services and achieving more appropriate placement modalities for children with specialized needs, adolescents, and children that need step-down care upon release from hospitals and more restrictive facilities.

• The State's rate of 72.9% of children who are reunified with their parents within 12 months of removal does not meet the national standard of 76.2%.

• In addition, the State's rate of 9.4% of children adopted within 24 months of removal does not meet the national standard of 32%.

In addition to not achieving the national standards in this area, reviewers and stakeholders noted barriers to timely permanency (includes reunification, adoption, guardianship, and permanent foster families) for children in nearly half of the applicable cases reviewed. These delays involved legal or other procedural requirements within the Department, the Courts, and the Interstate Compact on the Placement of Children (ICPC). Examples of delays that were found include: a lack of clarity regarding the goal; lack of or inappropriate service provision needed for finalizing the permanency plan; issues with timely scheduling of TPR trials and/or obtaining decisions on TPR appeals; and, lengthy periods of time required for obtaining the necessary paperwork/home studies through the ICPC. While challenges remain, reviewers noted increased monitoring by the Department of its performance in achieving timely permanency for children, including foster care reviews, progress supervisory reviews and use of the permanency planning conferences.

Although the State did not meet the national standard, timely adoptions were achieved or in progress for the majority of the applicable cases reviewed. Stakeholders also spoke about the Department's efforts to expedite and increase adoptions and guardianships. They noted a number of creative strategies to achieve timely adoption for waiting children, including permanency mediation, concurrent planning, and partnerships with other public and private agencies that recruit and/or provide support for adoptive homes.

According to the statewide assessment, the Department continues to make advancements in reducing the number of children waiting for permanent homes, showing a decrease of over 1,000 since the early 1990's. In December of 2000, while approximately 2,900 children had a goal of adoption, fewer than 500 children were still in need of an identified pre-adoptive placement.

However, reviewers found that improvements are needed in the areas of independent living services and other planned permanent living arrangements. In the applicable cases for independent living services and other planned permanent living arrangements, appropriate services to achieve these goals were not provided. Some stakeholders expressed the opinion that there is an overuse of independent living and long-term foster care goals for youth. While acknowledging the Department's increased efforts to support the well-being of former foster care youth, a few stakeholders still expressed deep concern about youth who continue to age-out of the system with few supports and without any connections.

# Status for Permanency Outcome 1: Not In Substantial Conformity.

Basis: Eight (25%) of the 32 applicable out-of-home placement cases reviewed under this outcome were rated either as partially or not achieved; therefore, the required case performance level of 90% was not met. In addition, the State's rates for (1) foster care reentries, (2) achieving reunification within twelve months of removal, and (3) adoption within twenty-four months of removal did not meet their respective national standards.

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

• 91% of the applicable out-of-home placement cases reviewed under this outcome were rated as substantially achieved.

Reviewers noted that the stratification of the case sample, which included more relative caregivers, may have contributed to higher levels of achievement for some of the following permanency performance indicators.

In all of the applicable cases reviewed, children were generally kept in their communities or within the regional areas. When children were placed outside of their community, it was typically to meet their special needs for additional supports or to facilitate an adoption or placement with a relative. In addition, in all but one case, children with siblings in-care were placed together. Although not seen in the period under review, stakeholders reported that the dearth of foster homes - in some regions more than others - necessitate placements outside of the area and separation of siblings.

Both the cases reviewed and stakeholder comments confirmed that visitation between parents and siblings in foster care generally meets, and in some cases exceeds, state policy requirements. Reviewers found that in the majority of applicable cases, DSS staff and foster care providers promoted parent-child contact. There were cases in which parents were very involved in the every-day life events of their children despite placement, often because of the encouragement and support by Department or provider staff. Workers and foster parents helped children maintain connections with family members by encouraging letters and phone calls when parental visits were not in the best interests of the child. In all but one case, workers and foster parents clearly made strong efforts to help children maintain connections not only with family members but also with schools, counselors, and health care providers.

The stratified sample of 16 relative placement and 16 unrelated placement cases allowed ACF and the Department the opportunity to determine the impact of the relative placement initiative on case practice and, more importantly, on outcomes for children. Reviewers paid particular attention to best practices and areas needing improvement in these kinship placements.

The results of the on-site review of kinship placements are as follows:

It is clear that the Department's philosophy and policy regarding placement with relatives are given a high priority in the Area Offices reviewed. There was evidence of efforts to locate kin as placement resources in all of the placement cases reviewed. In addition, documentation reflected realistic assessments of relatives - with a few cases showing relatives appropriately ruled out as placement resources. Reviewers identified a range of relative placement options for children including maternal and paternal relatives such as grandparents, aunts/uncles, and mature siblings.

The reviewers were also able to confirm that during the period under review, these placements provided more stability and maintained more connections for these children while they were separated from their birth parents. However, in a few cases, children experienced several placements in non-relative foster homes before being placed in a more stable kinship home.

When children were not able to return to their parent(s), a number of relatives provided permanent homes for them. It was encouraging to reviewers to see relatives who were able to support changing goals, when appropriate. Contrary to perceptions about these placements, the reviewers also discovered that the Department is having a degree of success in adoption by relatives. Stakeholders firmly believe that the State's commitment to equal financial support for relative foster care, kinship adoption, and kinship guardianship facilitates the achievement of permanency for these children.

Stakeholders noted, however, that there is a need for the Department to pay closer attention to visitation and training issues of relative placements. Some stakeholders expressed the opinion that relatives are not aware of the differences and difficulties involved in raising children who have been subjected to abuse and/or neglect by kin and that they are not knowledgeable about the complexities of the child welfare, legal, and social services systems. Finally, stakeholders stressed the need for the Department to perform a more diligent search for absent fathers and to do so at the time that the family initially becomes involved with DSS.

#### Status for Permanency Outcome 2: In Substantial Conformity.

Basis: Twenty-nine (91%) of the 32 applicable out-of-home placement cases reviewed under this outcome were rated as substantially achieved; therefore, the required 90% case performance level was met.

#### III. CHILD AND FAMILY WELL-BEING OUTCOMES

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

• 76% of the cases reviewed under this outcome were rated as substantially achieved.

In the majority of applicable cases, case plan activities and services to children and families were in place and working well. In addition, providers and DSS workers were actively involved in ensuring that the needs of families were assessed and appropriately addressed. For the most part, workers made diligent efforts to provide services to families in a timely manner, however, the lack of certain services or extensive waiting lists for particular services were found to be barriers to families gaining timely access to needed services. Of particular note was the lack of available/accessible mental health services and alcohol/drug treatment services; a shortage of placement resources for adolescents and for children with mental health needs; and, a lack of affordable housing. A comprehensive list of needed services can be found in Item VIII, Service Array, on pages 43 - 47 of this report.

Among the applicable cases, assessments of child and family service needs were sometimes inadequate or not completed. In addition, some of the services provided were not appropriate for the assessed needs. In some cases, workers failed to follow-up on referrals to providers to ensure that parents were able to access and/or were participating in services.

The cases reviewed showed great variation in workers' practice regarding engaging families in case planning. Reviewers found that in some cases, families were not involved in the development of their case plans while in others, families were actively participating in planning for the safety and well-being of their children. Throughout the State, however, stakeholders talked about the inconsistent identification and/or involvement of fathers in the case planning process. It was clear to reviewers, however, that the Department's emphasis on worker contact with children and parents resulted in a level of visitation that met and sometimes exceeded the State's policy requirements.

# Status for Well-Being Outcome 1: Not In Substantial Conformity.

Basis: Twelve (24%) of the 50 cases reviewed under this outcome were rated as either partially or not achieved; therefore, the required case performance level of 90% was not met.

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

• 86% of the applicable cases reviewed under this outcome were rated as substantially achieved.

Although this area was given an overall rating of needing improvement, the following strengths were identified. In 86% of the applicable cases, workers were having regular contact with schools and advocating strongly for needed educational services for children in substitute care. A number of stakeholders reported that DSS workers – with the help of educational consultants – pay close attention to the educational needs of children in care. Stakeholders expressed the opinion that there are issues in the educational system – such as resistance to admitting special needs children and an unwillingness to share the cost of services - that negatively impact the ability of DSS to ensure that the educational needs of special needs children are addressed.

In six of the applicable cases, however, workers failed to follow-up on issues such as school failures and truancy and/or the Department's efforts to meet children's educational needs were not documented in the case/service plan.

# Status of Well-Being Outcome 2: Not In Substantial Conformity

Basis: While 86% of the 43 cases reviewed under this outcome were rated as substantially achieved, 14% were rated as partially or not achieved; therefore, the State did not meet the required case performance level of 90%.

*Outcome WB3: Children receive adequate services to meet their physical and mental health needs.* 

• 69% of the applicable cases reviewed under this outcome were rated as substantially achieved.

Although this area was given an overall rating of needing improvement, in the majority of cases, workers did attend to children's health and mental health needs.

However, in a number of the applicable cases in the area of physical health, there was no documentation on children's medical needs, the services provided, and the immunizations needed or received. Also, in a few cases, children's health conditions were not treated.

While improvements are also needed in the area of services to meet children's mental health, in the majority of applicable cases, reviewers found high quality evaluations of mental health needs and appropriate services that were initiated quickly after placement. In some cases, however, reviewers noted that mental health services were lacking. Many stakeholders expressed the opinion that there are significant gaps in mental health services and that there are many "turf" issues in the system that impeded the timely delivery of services.

Some stakeholders spoke highly of a collaborative and promising effort between the Department of Mental Health and DSS to better serve the mental health needs of children in care.

## Status of Well-Being Outcome 3: Not In Substantial Conformity

Basis: Fifteen (31%) of the 49 applicable cases were rated as either partially or not achieved; therefore, the required case performance level of 90% was not met.

#### IV. STATEWIDE INFORMATION SYSTEM

Stakeholders reported that FamilyNet allows for more efficient recording, gathering, review and analysis of child welfare data. As such, it provides case level data on the status, demographic characteristics, location, and goals for the placement of every child who is in foster care. According to the statewide assessment, FamilyNet includes functionality for the following child welfare business practices: service, resource, staff, and financial management; legal services; quality assurance; and reporting and interagency interfaces.

Status of the State's Statewide Information System: <u>In Substantial Conformity</u>.

#### V. CASE REVIEW SYSTEM

Reviewers and stakeholders noted three areas of strength and two areas needing improvement in the case review system. Those needing improvement include the requirements for joint development of the case plan with the family and the quality of permanency hearings in the Courts.

While reviewers found that case/service plans existed in all but one of the cases, as noted earlier, families were not consistently involved in the development of these plans. In addition, parents and other stakeholders described the current plan as cumbersome for workers and confusing to families. However, stakeholders reported that the success of a pilot program on engaging families in case planning has had a ripple effect with more and more offices interested in replicating this more effective model. Stakeholders noted that the Department intends to take this initiative statewide.

The case review and stakeholder interviews confirmed the finding in the statewide assessment that in almost all cases, periodic (foster care) reviews are held in a timely fashion. It was also reported that the foster care review panels have significant input in case management decisions and that these reviews are regarded as meaningful events. Both the case review and stakeholder interviews revealed that, for the most part, foster parents and pre-adoptive parents are being invited and encouraged to attend or to submit a written report to foster care reviews and permanency hearings.

However, while reviewers found that permanency hearings were generally occurring in a timely manner, they received very mixed feedback from stakeholders on the quality and effectiveness of these hearings. A number of stakeholders reported that courts often had extremely brief and perfunctory permanency hearings that did not adequately address the ASFA requirements for these hearings.

Despite these issues, stakeholder interviews confirmed that more judges are becoming increasingly knowledgeable of and attentive to child welfare matters, including permanency hearings and TPR requirements. The State was found to have in place a TPR process in accord with ASFA requirements and compelling reason exceptions to TPR were documented in the case files. For the most part, reviewers felt that these exceptions were being appropriately applied. However, some stakeholders reported that TPR and permanency for some older youth and youth in residential treatment programs was not always vigorously pursued.

Status of the State's Case Review System: Not In Substantial Conformity.

#### VI. QUALITY ASSURANCE (QA) SYSTEM

Stakeholders consistently mentioned the strengthened licensing standards for foster homes as the basis for ensuring the health and safety of children in-care. They also spoke about the frequency that DSS Workers visited foster homes to ensure that these standards were being met.

While a number of QA practices effective in evaluating the quality of services were noted, stakeholders clearly emphasized the need for a centralized, independent QA System/Unit to better inform the policy and practice of the Department on a regular basis. It is the opinion of many stakeholders that data need to be readily and systematically available for use in the State's ongoing efforts to improve the quality and effectiveness of services for children and their families.

Status of the State's Quality Assurance System: In Substantial Conformity.

#### VII. TRAINING

The Department was found to have a fairly comprehensive initial training program that supports the goals and objectives in the State's Child and Family Service Plan (CFSP.) Some stakeholders discussed the need for a Child Welfare Training Institute to be developed in partnership with the Schools of Social Work, which would allow for additional time in training and job shadowing prior to full caseload assignment. Stakeholders also felt strongly that new workers need more time to explore their own values and attitudes about working with families from diverse economic, racial and cultural backgrounds. The case review also found that additional, on-going training is needed to enhance the ability of workers and supervisors to better carry out their duties with regard to the services included in the CFSP. The following training needs were identified: making better assessments and engaging families in case planning; family-centered and culturally sensitive services to diverse families; addressing mental health and substance abuse issues; effectively providing services to and working with adolescents with behavioral issues.

The Department provides training for prospective foster and adoptive parents using a training model called, <u>Massachusetts Approach to Partnerships in Parenting (MAPP)</u>. Stakeholders reported that MAPP is a well-tested curriculum that addresses the skills and knowledge base that prospective foster and adoptive parents need to carry out their duties. While reviewers received mixed feedback about the participation of relative foster parents in pre-service training, the need for relative providers to receive training and support on setting boundaries with birth parents and understanding the child welfare and legal processes were clearly noted.

Finally, stakeholders spoke highly of the increased level and variety of ongoing foster and adoptive parent training courses that are offered through KidsNet. However, some stakeholders reported that the State's requirement for all foster parents to engage in ten hours per year of on-going training is largely ignored.

Status of the State's Training System: In Substantial Conformity.

#### VIII. SERVICE ARRAY

The case review and stakeholder interviews confirmed that the Department has developed a comprehensive set of services to assess and address the needs of children and their families and noted that a number of these services can be tailored to meet particular needs. Stakeholders in all three sites noted the MDAT process, the Domestic Violence Consultants, services available through the Family Based Services contracts, and the availability of flexible funding as examples of how the Department has enhanced the array of services.

However, in some cases, reviewers identified needs that were not met and noted delays in service provision due to the lack of available and/or accessible services. Both reviewers and stakeholders particularly noted the need to improve and increase mental health, special education, and alcohol/drug in-patient treatment services. In addition, stakeholders identified a shortage of out-of-home placement resources across the continuum of care. Finally, stakeholders provided a list of services that in their opinion was needed to effectively support children and to preserve and assist in the rehabilitation of families involved with the Department.

Status of the State's System of Services: <u>In Substantial Conformity</u>.

#### IX. AGENCY RESPONSIVENESS TO THE COMMUNITY

Stakeholders generally viewed the Department as becoming more open and willing to engage cooperatively in working with children and families. Confirming information in the statewide assessment, stakeholders spoke of close working relationships between the Department and the courts, schools of social work, law enforcement, mandated reporters, providers, parent networks and a number of coalitions both at the State and local levels. Area Directors were said to be actively pursuing opportunities for collaboration in their respective communities. However, stakeholders both from within and outside of the Department spoke about "turf" and confidentiality issues continuing to hinder coordination between some programs. Stakeholders particularly noted ongoing issues between DSS and the Departments of Mental Health, Mental Retardation, and Education. Despite some promising initiatives between DSS and these other agencies, it was said that these issues continue to be a barrier to more effectively serving the needs of children and their families.

Status of the Agency's Responsiveness to the Community: In Substantial Conformity.

#### X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

Stakeholders confirmed that the standards for foster family homes and child care institutions are comprehensive and in accord with recommended national standards. Also, in compliance with Federal requirements, stakeholders reported that the Department holds all homes to the same standards and that it completes criminal records checks on all potential foster and adoptive homes. In addition, stakeholders expressed the opinion that the Department's high level of scrutiny of these homes is contributing to the safety of children in placement.

The State was found to have a process for ensuring the diligent recruitment of potential families that reflect the ethnic and racial diversity of children for whom foster and adoptive homes are needed. Stakeholders confirmed that overall recruitment efforts for both foster and adoptive parents are creative and extensive.

According to the statewide assessment, the Department employs a variety of techniques as part of its recruitment strategy. Also, monthly regional meetings are conducted to review all children not in pre-adoptive homes and all families awaiting children. In addition, quarterly matching meetings are held around the State so that prospective adoptive families can meet the children who are waiting for an adoptive home.

While acknowledging the successes of the Department in this area, stakeholders spoke about barriers to recruiting potential foster and adoptive parents that included the need for increased day care availability for two parent working foster families and income requirements for foster parents. In addition, some stakeholders made particular note of the need for the Department to increase its efforts in locating foster and adoptive homes for Native American children.

The State also has a process for the effective use of cross-jurisdictional resources. In the cases reviewed, children were placed in adoptive and pre-adoptive homes in a number of other states. In addition, as reported in the statewide assessment, the Department has revised its matching protocols. According to stakeholders, these revised protocols have improved collaboration among private agencies and have facilitated the sharing of information on waiting children and prospective adoptive families. Finally, most stakeholders gave very positive feedback on "matching" events and especially noted those sponsored by a private business (Jordan's Furniture). The consensus was that these events have greatly enhanced the Department's capacity to connect waiting children with prospective parents in other jurisdictions. However, because of issues with visitation, negative experiences in getting home studies completed, and difficulty negotiating subsidies and finalizing adoptions through the ICPC, stakeholders still expressed concerns about these placements.

Finally, several programs were cited for their efforts at retaining foster and adoptive resources. These include programs such as KidsNet and Adoption Crossroads that provide training, support groups, information, referral and some respite services to foster and adoptive parents.

Status of the State's Foster and Adoptive Parenting Licensing, Recruitment and Retention System: In Substantial Conformity.

#### **SUMMARY OF FINDINGS**

#### I. SAFETY

Outcome S1: Children are, first and fo Number of cases reviewed by the team :			•		
	Team 1	Team 2	Team 3	Total Number	Total Percentage
Substantially Achieved:	18	13	11	42	89.4
Partially Achieved:	1		3	4	8.5
Not Achieved or Addressed:	1			1	2.1
Not Applicable:		2	1	3	
Conformity of Statewide data indicator	s with national standa	ırds:		·	
·	National Standard	State's Po	ercentage	Meets Standard	Does Not Meet Standard
Repeat maltreatment	6.1%	7.44			X
Maltreatment of children in foster care	.57%	.94			X

For Outcome S1, children are, first and foremost, protected from abuse and neglect, the State is found: Not in Substantial Conformity because the State did not achieve either the national standards or the required 90% case performance level.

# Item 1. Timeliness of initiating investigations of reports of child maltreatment

XSt	rength	Area Needing	Improvement
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# **Basis: Statewide Assessment**

The Department has a stable child protective services system handling the receipt, investigation, and disposition of reports alleging abuse and/or neglect of children. The rate of substantiation of screened-in reports has been steady over the past decade.

**Basis: On-site Review** 

Timeliness of initiating investigations was rated as a strength in 18 (82%) of the 22 applicable cases. In these cases, staff of the Department initiated the investigation and made face-to-face contact with child(ren) who were the subject(s) of reports alleging abuse or neglect within the time frames required by State policy.

These findings were confirmed by stakeholders who expressed the opinion that investigations are begun and generally completed in accordance with state requirements. They also noted that decision-making on child safety issues during intake and investigation is appropriate and fairly consistent. Stakeholders attributed much of the positive work done during intake and investigation to the experience and training of investigative staff. Stakeholders also cited the Department's approach of teaming law enforcement personnel and therapists in the investigation of reports involving sexual abuse and serious physical abuse as supportive of appropriate decision-making on child safety issues.

Some stakeholders noted that the Department has implemented several enhancements to the investigation process, including: (1) an increase in the time allowed for contacting collaterals; (2) a more careful review of accepted reports, particularly at the closure of the investigation; and (3) a thorough review of screened-out reports by supervisors and/or area office directors.

Despite these positive findings, there were four cases in which the area of timeliness of the investigation was rated as needing improvement. In 3 of these 4 applicable cases, initial face-to-face contact with the child was not made in the time period required by State policy. A few stakeholders expressed the opinion that some of the delays experienced in initiating investigations were the result of the time needed to follow-up with collaterals, the current procedure for routing calls through an after-hours hotline in Boston, and the need for more bilingual staff in some of the investigation units.

# Item 2. Repeat maltreatment

Strength	X	Area Needing	g Improvement
 			)

**Basis: Statewide Assessment** 

# The 7.4% recurrence rate of maltreatment in Massachusetts approaches but does not meet the national standard of 6.1%.

Analysis of these data suggests that chronic neglect may be an important factor in recurring child maltreatment reports. Child neglect, either solely or in combination with abuse, is reported in over 80% of child abuse and/or neglect substantiations.

Recurrence of maltreatment, however, is responded to in important ways. Most significantly, the Department has recently issued a revised case practice protocol, which requires that any new report of child abuse/neglect on an open case be brought directly to management staff. If a third report is filed on an open case, then that case will be brought directly to the attention of the Area Office Director. This protocol assures that the agency is taking a careful look at any case of recurring maltreatment. Twice a year, Regional and Area Directors also receive a listing of open cases in which maltreatment has recurred.

The incidence of child abuse/neglect in foster care was 0.85% in 1997 and 0.94% in 1999.\* In both years, this exceeded the national standard of 0.57%.

The Department addresses the safety needs of children in foster care in a number of ways. First, in 1998, the Department revised its standards for the approval or licensing of all foster homes. The ability of caregivers to provide safe care is a crucial criterion in each approval/licensing study that includes an assessment of physical safety standards and a Background and Records Check. Additionally, in January 1999, the number of children who could be placed in any foster home was reduced. Second, the Department's centralized Special Investigations Unit (SIU) was developed for the sole purpose of investigating reports of maltreatment in foster homes and institutions throughout the State. Third, the July 2000 revised case practice protocol requires that all maltreatment reports on behalf of children in substitute care are brought immediately to the attention of the Area Director. Finally, foster parent training programs are designed to provide prospective and actual foster parents with information and skills that will help them meet the safety needs of the children in their care.

#### **Basis: On-site Review**

The area of repeat maltreatment was rated as a strength in 45 (96%) of the 47 applicable cases because no repeat maltreatment occurred in these cases during the period under review.

A number of stakeholders identified recent initiatives designed to enhance the ability of the Department to keep children safe and prevent repeat maltreatment. These initiatives include a revised case protocol for handling repeat reports of maltreatment (noted in the statewide assessment), the use of Sexual Abuse Intervention Network (SAIN) teams and Multidisciplinary Assessment Teams (MDATs) involving other clinicians in addition to Department staff, and team meetings such as the Family Based Services Team meetings.

However, there were two cases reviewed in which maltreatment recurred during the period under review. In one of these cases, there was early (perhaps, premature) reunification with a family in which substance abuse was the key issue; the other case involved a rereport for medical neglect due to mother's failure to follow-through with child's required medical treatment. In addition, in 33 (70%) of the 47 applicable cases, there was repeat maltreatment prior to the period under review. In 30 of these 33 cases, the multiple incidents of maltreatment involved the same perpetrators and the same general causal factors.

Information from the cases and stakeholder interviews appears to support the premise in the statewide assessment that the recurrence of maltreatment was more likely to be found in cases involving chronic neglect.

Although the State did not meet the national standard for maltreatment in foster care, there was no occurrence of maltreatment in foster care in any of the 32 applicable cases reviewed.

\*Data are provided for FFY 1997 and FFY 1999 only. During FFY 1998, the Department converted its MIS System from the former legacy application - ASSIST - to the new SACWIS system - FamilyNet. Data for the conversion year (FFY 1998) are not available.

A number of stakeholders expressed the opinion that the Department is addressing the issue of the incidence of maltreatment in foster care through its strengthened foster home licensing requirements and the increased support for foster and adoptive parents through programs such as KidsNet and Adoption Crossroads. Also, some stakeholders suggested that the incidence of maltreatment in foster care may be reduced by the Department's Foster Care Review (FCR) process, which includes an objective review of the safety and appropriateness of an out-of-home placement and a built-in alert system if a child's safety is at risk or a placement is inappropriate for a child's permanency needs. Stakeholders noted that while there have been few priority alerts related to safety concerns, an internal study indicated that the responses of managerial staff to these alerts are timely and appropriate.

Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.					
Number of cases reviewed by the tear	n according to deg	ree of outcome a	chievement:		
	Team 1	Team 2	Team 3	Total Number	<b>Total Percentage</b>
Substantially Achieved:	12	10	11	33	82.5
Partially Achieved:	1			1	2.5
Not Achieved or Addressed:	5		1	6	15
Not Applicable:	2	5	3	10	

For Outcome S2, children are safely maintained in their homes whenever possible and appropriate, the State is found: Not in Substantial Conformity because the State did not achieve the required 90% case performance level.

# Item 3. Services to family to protect child(ren) in home and prevent removal

\_\_\_\_ Strength \_\_X\_\_ Area Needing Improvement

#### **Basis: Statewide Assessment**

Despite differences in the total number of reports screened-in for investigation during 1997 and 1999, the percentage of substantiated cases opened for services was stable at 86% - well above the national average 55.8%.\*\*

The Department has made a concerted effort to continue to increase the numbers of children who can safely remain in their families following a report of maltreatment. As the Department's data show, since 1995, more children have been receiving services in their homes while fewer children have been entering foster care. The profile data indicate a slight decrease in the numbers of children found to be abused or neglected who entered foster care - approximately 15% in 1997 versus 13% in 1999. According to cohort data, there has also been a decrease from 77% in 1997 to 64% in 1999 in the rate of first time entrants into foster care for those two years.

\*\*U.S. Department of Health and Human Services, Administration on Children, Youth and Families. <u>Child Maltreatment</u> 1999 (Washington, DC: U.S. Government Printing Office, 2001.

Through the Family Based Services (FBS) initiative, implemented in January 2000, the Department has enhanced its capacity to keep children safely in their homes and to promote timely reunification for children in out-of-home care. In its first six months of operations, FBS received 8,000 service referrals, most of which were for some form of family stabilization service. In addition, placing a high value on the role that neighborhoods play in preventing child abuse and neglect, the Department has continued to utilize the Safe and Stable Families grant (IV-B, part 2) funds to build a continuum of support networks in various communities throughout the Commonwealth.

#### **Basis: On-site Review**

The area of services to protect children and prevent removal was rated as an area needing improvement because during the period under review, in 5 (20%) of the 25 applicable cases the following problems were observed: (1) issues and service needs identified during the assessment were not adequately addressed; (2) services provided were not targeted to the identified needs of children or families; (3) staff did not follow up on service referrals to ensure that the child or family member participated in and/or received the requisite services; and (4) necessary services were delayed because of long waiting lists and the lack of certain services, particularly substance abuse and mental health treatment. Additional information on service gaps and program needs will be discussed under Item 35, Service Array.

Despite these problems, in 20 (80%) of the 25 applicable cases, the Child Protective Services (CPS) assessment unit had completed a comprehensive assessment and the services provided to support and preserve families were based on this assessment. Programs such as Skill Builders, Passages, and Healthy Families were viewed by the parents and social workers involved in these cases as highly effective family preservation and support services.

Many stakeholders noted that the Department has strengthened the front-end of the services continuum largely through its Family Based Services initiative and through the provision of flexible funding to meet specific needs. Stakeholders singled-out several other programs as particularly effective, including the Parent Advocacy Centers, the PATCH program, protective child care services, and the Key Trackers program. Stakeholders also expressed the opinion that the collaboration between the Department and providers of domestic violence-related services in some regions of the State has strengthened efforts to keep children safely in their homes.

Item 4.	Risk of ha	arm to child
_X	Strength	Area Needing Improvemen
Basis: S	Statewide A	Assessment

Multi-disciplinary teams have been established in each of the Department's Area Offices, providing social workers with expert assistance in making critical case decisions for families in which the risk of harm for the children necessitates continued involvement of the Department.

Also, the Department is in the process of developing a safety assessment decision-making tool that will be used to assess the safety of children at all points of case involvement. This effort is being supported by technical assistance from the National Resource Center on Child Maltreatment.

The Safety Protocol that the Department is currently developing will provide an important guide in making the decision whether placement is necessary to assure a child's safety. It will also provide workers with important information about the family to assist in the development of effective safety plans and thus help families avoid unnecessary placements.

#### **Basis: Onsite Review**

The area of risk of harm to children was rated as a strength in 33 (82.5%) of the 40 applicable cases because during the period under review, Department staff had frequent contact with children and families to monitor the level of risk and safety of the child(ren) in the home and/or to appropriately maintain children in foster care. While there were 7 cases in which service provision was lacking, the majority of cases were provided services to lessen the risk of harm to the children involved.

In the 32 out-of-home cases, reviewers judged that the removal of the children from their homes was appropriate given the harm and/or the risk of harm in the home.

In addition, stakeholders expressed the opinion that the risk of harm to children was reduced by the Department's use of a team approach to assessment and decision-making, especially the increased use of MDATs, Sexual Abuse Intervention Network (SAIN) teams, and Family Based Services team meetings. Stakeholders also cited the training and consultation available for cases involving domestic violence and substance abuse as promoting increased safety for children who remain in their homes.

Despite these strengths, 7 (17.5%) of the 40 applicable cases were rated as needing improvement because issues and service needs identified during the assessment period were not adequately addressed, resulting in these cases remaining open due to continued risk to the child. This failure to follow through - particularly evident in family services cases involving chronic neglect - sometimes resulted in: (1) the lack of appropriate interventions to address the underlying issue(s) contributing to the behavior that was putting the child at risk, (2) delays in getting appropriate services to parents, and/or (3) services that were not sufficiently intensive to meet the level of need.

In addition to these problems, a few stakeholders expressed concern about the potential risk involved in the Probate Court's practice of granting non-agency involved custody and guardianship of children to relatives with little or no input from the Department. A number of other stakeholders, however, suggested that there is a lack of consistency in removal decisions and that "in removing children from their homes, the Department is erring too often on the side of caution" in its efforts to keep children safe.

#### II. PERMANENCY

Outcome P1: Children have permanen	cy and stability in tl	neir living situ	ations.			
Number of cases reviewed by the team	according to degree	of outcome ac	chievement:			
	Team 1	Team 2	Team	3	Total Number	<b>Total Percentage</b>
Substantially Achieved:	11	8	5		24	75
Partially Achieved:	2	1	4		7	22
Not Achieved or Addressed:			1		1	3
Not Applicable:	7	6	5		18	
Conformity of Statewide data indicator	s with national stan	dards:				
•	National Standar	d State's Po	ercentage	M	eets Standard	Does Not Meet Standard
Foster care re-entries	8.6%	22.33				X
Length of time to achieve reunification	76.2%	72.94				X
Length of time to achieve adoption	32.0%	9.36				X
Stability of foster care placements	86.7%	76.95				X

For Outcome P1, children have permanency and stability in their living situations, the State is found: Not in Substantial Conformity because the State did not achieve either the national standards or the required 90% case performance level.

Given the Department's emphasis on placement with kin, the case sample being reviewed was stratified to include equal numbers of unrelated and related out-of-home placements. The stratified sample allowed ACF and the Department the opportunity to determine the impact of the relative placement initiative on case practice and more importantly, on outcomes for children. Reviewers paid particular attention to best practices and areas needing improvement in these kinship placements. Reviewers also noted that the stratification of the case sample may have contributed to higher levels of achievement for some of the following permanency performance indicators.

#### Item 5. Foster care re-entries

\_\_\_ Strength \_\_X\_ Area Needing Improvement

**Basis: Statewide Assessment** 

Summary data reflected re-entry rates of 13% in 1997 and 22% in 1999. Both of these figures are well above the national standard of 8.6%.

While it appears that the rate of re-entry is increasing, the Department's analysts believe that the 1997 figure may well be an undercount due to differences in how home removal episodes were captured under the Department's *Assist* system compared to how they are captured in FamilyNet, the Department's new information management system that produced the 1999 data.

Concern over these re-entry rates has generated much discussion and planning at the Department's policy and practice levels and has focused the Department on the need to provide greater supports to families and children at the time of reunification. Targeting Family Based Services and other community services to support reunification is seen as an important strategy to address this problem. In addition, an analysis of the re-entry data indicated that adolescents are more likely to re-enter foster care than younger children. Consequently, the Department has determined that specialized services must be developed to address the unique needs of adolescents and their families. Finally, the Department's efforts to place children with kin may have an important impact on re-entry rates. Research has indicated that while children placed with kin may remain in-care longer, they are less likely to re-enter foster care when they are reunified with their parents.

**Basis: On-Site Review** 

The area of foster care re-entries was rated as a strength in 31 of the 32 applicable cases. During the period under review, re-entries into care were found in only one of the applicable cases. However, prior to the period under review, reviewers found re-entries in 10 (31%) of the 32 applicable cases. These re-entries appeared to be driven to a large extent by the inability of the service system to meet the complex needs of adolescents in need of services (CHINS) and cases of chronic neglect. Although the data did not conclusively show that re-entries into care were less likely for kinship placements, in the statewide assessment the Department noted that children in kinship care are less likely to move in and out of substitute care than children in other placement settings.

Also, stakeholders believe that the aftercare services provided by the CommonWorks program and (while expansion is needed) continued services to families after reunification through the Family Based Services system may help to decrease the rate of foster care re-entries in the future.

Item 6. Stability of foster care placement
StrengthX Area Needing Improvement
<b>Basis: Statewide Assessment</b>

In 1999, 77% of children who had been in care for less than 12 months had no more than two placements. This number is slightly lower than in 1997 (81%). In both years, however, Massachusetts was lower than the national standard of 86.7%.

The Department has identified this area as an important priority and thus has conducted analyses to provide insight into the issues involved in placement stability. One important insight gained was that adolescents tend to be the most likely age group to experience placement instability.

Data from CY95 through CY99 indicate that 43% of children who experienced 3 or more placements during that time period were ages 12 - 18 at the time of entry. Also, a recent detailed analysis of all children placed in the State during a two-week period in the summer of 2000, showed that 16% of the total children placed had two placements within that two-week period. Seventy-three percent of those children were ages 12 - 17.

Massachusetts is attempting to address these issues in a number of ways. The Department is working to improve access and increase supportive services to preserve placements for older children. The Department also believes that expanding the capacity to engage kin as caregivers for these youth will provide for more stable and appropriate placements. Finally, Area Offices are being encouraged to continue the development of placement "triage" teams that draw effectively upon the strong clinical decision-making of the group to make initial placement decisions.

The Department's case practice guidelines direct staff to place children in the least restrictive and most family-like settings that can assure their safety. Six-week Placement and six-month Foster Care Reviews include a review of the necessity of placement as well as the appropriateness of the placement setting. The Foster Care Review Unit completed 11,972 case reviews in FFY'99. Of the 23,110 children reviewed, only 3% were determined not to be in appropriate placements.

# **Basis: On-Site Review**

The area of placement stability was rated as a strength in 29 (91%) of the 32 cases in which this indicator applied because in these cases, the children's placements were stable during the period under review. In a number of these cases, there were high quality assessments of children's needs that resulted in appropriate placements. Also, child-specific and therapeutic placements as well as extensive follow-up and home visits by Case Workers and Family Resource Workers added to the stability of these placements.

In addition to kinship placements, stakeholders identified the Bridge Home program model, the six-week placement review for early identification of placement issues, the level of commitment by the Family Resource Workers, and the additional supports to foster families as strategies used by the Department in its effort to increase placement stability.

Despite these strengths, there were 3 cases – identified as non-relative placements – that had more than 2 placements during the period under review. In addition, in 17 (53%) of the 32 applicable cases, children changed placement settings prior to the period under review. In the statewide assessment, the Department noted issues with placement stability and identified it as a priority area. These

findings also reflect the concerns expressed by a number of stakeholders, including the youth interviewed. In fact, stakeholders reported that in some areas of the State, children – especially older children – often are caught up in a night-to-night approach to placement because of the lack of resources. This resource issue will be addressed under Item VIII.

Item 7. Permanency goal for child

Strength	X	Area Needing	Improvement
 ~ *** ****		1 11 000 1 100 011115	

**Basis: Statewide Assessment** 

The summary data reflect that of all children reunified in FY 1999, 73% were reunified within 12 months or less from the time of removal. This performance level does not meet the national standard of 76.2%. However, in 1997, this percentage was 54, suggesting a movement toward achieving the national standard. An analysis of point-in-time data and cohort data for FFYs 1997 and 1999, however, show inconsistent "trends" in the percentage of children with the goal of reunification. While cohort data for those years indicate a slight increase in the percentage of children with the goal of reunification (from 74% in 1997 to 79% in 1999), point-in-time data indicate that from 1997 to 1999, the percentage of children having the goal of reunification dropped from 46% to 38%. As noted earlier, differences in the population being assessed and in the data sources used in those two years make it impossible to determine with great confidence the extent to which apparent differences in the data for those years can be understood as a real trend as opposed to a data issue.

For children being reunified with their parents or placed with relatives, the data for the length of time that children remain in-care prior to the accomplishment of these permanency goals indicate a decrease in the median length of stay from 11 months in 1997 to 4 months in 1999. In addition, other Department analyses confirm that the length of stay in placement for children in-care in Massachusetts has dropped and is currently relatively low.

The decrease in the length of stay in-care may be partially explained by the Department's emphasis on helping children attain permanence in timely ways as well as the increased use of Area Office Family Based Services to support reunification efforts. In addition, the Courts in Massachusetts have recognized the need to address issues that delay permanency for children. In 1998, the Supreme Judicial Court established a committee to look at delays in child welfare cases. Representatives from the various courts (Probate, Juvenile, Appeals and SJC), the administrative office of the trial courts, the Department, the Attorney General's office and the Committee for Public Counsel Services (CPCS) meet regularly to address any barriers to the timely completion of court-involved child welfare cases.

In 1998-1999 several rule changes were made to help expedite child abuse/neglect cases in the Appellate Court. Finally, in 1995, the Commonwealth began to utilize permanency mediation as an alternative method to resolve child welfare cases. This process can be utilized in cases where the goal is either reunification or adoption. Piloted in two locations, the state legislature recently provided funding to expand this program statewide in FY 2001. This is another initiative where the courts, the Department and the CPCS have worked jointly to achieve permanency for children.

#### **Basis: On-Site Review**

The area of permanency goal for children was rated as needing improvement in 15 (47%) of the 32 applicable cases because there were delays in achieving permanency as a result of legal or other procedural requirements within the Department, the Courts, and the Interstate Compact on the Placement of Children (ICPC.)

Specifically, in the 15 cases in which this area was rated as needing improvement, the following delays were found: (1) a lack of clarity regarding the goal and/or a lengthy period before the goal was changed, (2) inappropriate services to reach permanency, (3) incomplete paperwork, (4) voluntary placement cases kept open for no apparent reason, (5) changes in judges or attorneys, and (6) lengthy periods of time required for obtaining the necessary paperwork/home studies through the ICPC.

Stakeholders noted that there were Departmental delays in carrying out various activities that promote permanency for children including delays in obtaining children's birth certificates; identifying and searching for absent parents; submitting reports to the Court; and initiating efforts to finalize the new plan. Stakeholders also identified legal system-related delays in achieving permanency including lengthy timeframes for adjudication, too many continuances, not enough attorneys to represent children or indigent parents, and attorneys not visiting the children whom they represent. According to some stakeholders, there are still differences of opinion among the Department, the providers, and the Courts concerning how much time to allow parents to successfully complete their rehabilitation before making the decision to file a TPR petition. This is a particularly difficult question when substance abuse is the primary issue in the case. Finally, many stakeholders also spoke about delays in what is viewed as a cumbersome ICPC process.

In the sample of foster care cases, reviewers also found that staff are adhering to ASFA requirements and State policies regarding filing a TPR petition or in the identification and documentation of appropriate exceptions to TPR.

Despite the existence of the problems noted above, 17 (53%) of the applicable cases were rated as a strength because of the permanency goal was appropriate and achieved in a timely manner.

Stakeholders noted a fuller use of a number of mechanisms to monitor the progress of the case, including the six-month (Foster Care) reviews, progress supervisory reviews and use of the permanency planning conferences (PPCs). In addition, stakeholders reported that a committee of the State Supreme Court has been working diligently over the years to address delays in the court systems responsible for child protective cases. With the implementation of some of the recommendations of this committee, as well as the establishment of a statewide Juvenile Court system, there has been greater recognition by the judiciary of a child's need for permanency. Finally, stakeholders cited the Permanency Mediation Program implemented in a number of the courts as an important tool for expediting permanency and attaining positive outcomes for children.

# Item 8. Independent living services

Strength	_X_	Area Needing Improvement
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**Basis: Statewide Assessment** 

The Department uses a curriculum called <u>Preparing Adolescents for Young Adulthood</u> (PAYA) to teach life skills to youth in foster care. This curriculum employs an individualized approach to the assessment and training of youth and accommodates a variety of clinical issues and cognitive functions. Youth are taught skills in job search and maintenance, money management, personal care, decision-making, health care, housing search, educational planning and support in accessing community services.

The Department also has a mentoring program that is provided as a community-based service intended to foster a supportive relationship between a caring adult and an adolescent who is without a significant role model in his/her life. Agency youth participated in the design of the mentoring program and are active in an ongoing review of this program. Agency youth also are involved in youth leadership activities such as the Peer Support Groups, Teen Conference, Youth Advisory Board, and Teen Peer Line Programs. In addition, with the flexibility now afforded States under the Chafee Foster Care Independence Program. The Department also will provide independent living support services to former foster care youth through the Adolescent Outreach Program and will use 30% of the State's Chafee grant funding to develop housing services for current or former foster youth ages 18-21.

#### **Basis: On-Site Review**

The area of independent living was rated as needing improvement in 4 (44%) of the 9 applicable cases under review. The following problems were observed in the case records: (1) delayed and weak assessments of youths' independent living skills, (2) no follow-up on identified issues, (3) needed services not provided, (4) IL goals not articulated in case planning, and (5) a lack of residential/placement options in the area.

Stakeholders reported that they are aware of youth who have not been provided needed independent living services. Some were not fully aware of how to access the resources available under the Independent Living Program. These and other stakeholders noted gaps in services and particularly noted that there is a lack of appropriate housing for youth aging-out of the system.

Despite these problems, 5 of the 9 (56%) applicable cases were rated a strength in this area because reviewers found that services were being provided in accord with the youth's independent living plan. In addition, stakeholders expressed the opinion that IL Outreach Workers are highly regarded by youth and committed to locating and accessing services for youth. Many stakeholders also provided very positive feedback on the IL program and PAYA. Youth reported that the PAYA life skills curriculum helped them to develop

independent living skills, particularly when a hands-on rather than a workbook approach is used. Finally, stakeholders reported that the State has become more attentive to the needs of youth aging-out of the system, citing the tuition waivers at state colleges and the provision of up to \$6000 in financial aid to youth enrolled in training or educational programs.

Item 9. Adoption

Strength	Y	Area Needing	Improvement
 Suchgui		Arca Necumg	Improvement

**Basis: Statewide Assessment** 

Only 9% of children adopted in Massachusetts in 1999 were in care for less than 24 months from the time of the latest removal from home. This is well below the national standard of 32%.

According to Department data, in FY87, 33% of the children who were adopted spent less than 24 months in care, compared to FY94 when only 9% of the children adopted spent less than 24 months in care. A review of the data of children who have been adopted to date in FY2001, shows that 23% have spent 24 months or less in care and 47% have spent under 36 months in care.

It is difficult to fully explain the decrease in the percentage of children leaving care to adoption in less than 24 months. Part of the explanation may be that moving children in the adoption track towards finalization may require more clinical and legal work than was necessary for the first cohorts who benefited from earlier initiatives.

In 1991 the Department conducted a study of all children in out-of-home placement awaiting adoption. It was discovered that the number of children whose goal changed to adoption in any given fiscal year was almost three times the number of children who were being adopted in that year, thereby creating a backlog of children awaiting adoption. Combined with a steady increase of the foster care population between 1988 and 1995, the number of children awaiting adoption climbed to 4,522 by July 1994.

Through the concerted efforts of the Department's staff and a change in the State law, the Department was able to double the number of children adopted since 1993. Prior to 1993, the Department had averaged 500 adoptions per year, but from FY 94 through FY99 the Department averaged over 900 - 1,000 adoptions each year and expects to reach this number again in fiscal year 2000.

In response to the legislative requirements of the Adoption and Safe Families Act, the Department has initiated a number of casework and legal practices designed to achieve timely permanence for children in substitute care. Beginning with FY2000, the Department has again increased its efforts to find adoptive homes for children whose goal is adoption. Monthly regional meetings are conducted to review all the children who are not in pre-adoptive homes and all the families awaiting children. Quarterly matching meetings are held around the State so that prospective adoptive families can meet the children who are awaiting an adoptive home.

In addition, in November 2000, the Department initiated an aggressive matching protocol to ensure that those children with a goal of adoption are matched with an appropriate family as soon as possible. With the goal of providing more supports to waiting families, the

protocol speaks to the need for the Department's regional staff to engage these families with regular contact and information. It also provides area and regional staff with opportunities to make connections with families known to the Massachusetts Adoption Resource Exchange to further encourage placement matches.

The protocol also requires regional staff to maintain responsibility for families during and after placement to provide support until legalization. Those responsibilities include bi-monthly visits, ongoing support, providing information on available training, monitoring and supervision, annual reassessment and/or bi-annual license renewal.

The Department continues to make significant progress in reducing the number of children waiting for permanent homes. The number of children waiting to be adopted has decreased by over 1,000 since the early 1990's. While point-in-time data indicate that from 1997 to 1999, adoption and guardianship goals among children in-care increased, in December of 2000, less than 500 children were still in need of an identified pre-adoptive placement.

Legal reform has also positively affected the Department's ability to move children more expeditiously toward adoption. In 1993, the legislature amended M.G.L. c. 119 to permit trial judges in the juvenile courts that hear the custody, care and protection cases to also terminate parental rights. This was a significant change in Massachusetts, because under the prior law, the proceeding to terminate parental rights had to occur in the Probate and Family Court under a new petition. With the implementation of this law the Department saw the median length of time a child spent in foster care decreased from 3.9 years in FY93 to 3.5 years in FY97.

#### **Basis: On-Site Review**

The area of adoption was rated as a strength in 8 (73%) of the 11 applicable cases under review. In those cases, adoptions were progressing or completed in a timely manner. When a youth expressed a preference for adoption, case plans and agency efforts reflected this. Also, reviewers noted that some of these cases involved relative and sibling adoptions.

In addition to the case findings, many stakeholders expressed the opinion that the Department had made and was continuing to make concerted efforts to increase and expedite adoptions, even prior to ASFA. They cited a number of creative strategies the Department has implemented to achieve adoption for waiting children including the use of concurrent planning, permanency mediation, and public/private partnerships. Stakeholders also reported that there has been increased monitoring of area offices' performance in the areas of adoption and guardianship at both the State and local levels.

Despite these strengths, in 3 of the 11 (27%) applicable cases, there were lengthy delays in finalizing the permanency plan, scheduling TPR trials and/or obtaining decisions on TPR appeals. Stakeholders also noted delays in pursuing TPR because some personnel in the Department and the Courts question the efficacy of adoption for older youth and for some special needs children, especially those needing residential treatment for periods of time. This perspective may impede the achievement of permanency for these youth.

# Item 10. Permanency goal of other planned permanent living arrangement

\_\_\_\_ Strength \_\_X\_ Area Needing Improvement

#### **Basis: Statewide Assessment**

The Department believes that the goal of long-term substitute care needs to be redefined and reengineered. The Foster Care Review Unit staff completed an analysis of the children who had this goal and found that these children were in many different stages of permanency. It was difficult to identify where they were on the continuum of permanency without reading the individual case record. The Foster Care Review Unit has proposed a change in this goal, and this proposal is currently being reviewed in draft form.

The point-in-time data indicate that from 1997 to 1999, the percentage of children with the goal of "emancipation" increased from 8% to 13%.

#### **Basis: On-Site Review**

The area of permanency goal of other planned living arrangement was rated as needing improvement in 5 (56%) of the 9 applicable cases under review because appropriate services to achieve the permanency plan were not provided. Although "compelling reasons" not to TPR were documented and supported in the case records, reviewers noted that this area might warrant additional scrutiny. In two of these cases, more appropriate permanency goals were not thoroughly explored before planned permanent living arrangement was set as the goal. In addition to the information from the case records, some stakeholders expressed the opinion that there is an overuse of long-term foster care or independent living goals for youth. They believe that the Department needs to continue to expand its efforts at finding a permanent home for all children exiting the child welfare system.

Despite these problems, 4 (44%) of the 9 applicable cases were rated as strengths because the goal of other planned permanent living arrangement was judged by reviewers to be appropriate and services to achieve this goal were being provided.

Outcome P2: The continuity of family relationships and connections is preserved for children.					
Number of cases reviewed by the team	according to deg	ree of outcome a	chievement:		
	Team 1	Team 2	Team 3	Total Number	Total Percentage
Substantially Achieved:	11	8	10	29	91
Partially Achieved:	2	1		3	9
Not Achieved or Addressed:					
Not Applicable:	7	6	5	18	

For Outcome P2, the continuity of family relationships and connections is preserved for children, the State is found: In Substantial Conformity because the State achieved the required 90% case performance level.

Substantial Conformity because the State achieved the required 90% case performance level.
Item 11. Proximity of foster care placement
X_ Strength Area Needing Improvement
Basis: Information on this item was not specifically requested nor addressed in the Statewide Assessment.
Basis: On-Site Review
The area of proximity of foster care placement was rated as a strength in 31 of the 31 applicable cases. In many of the applicable cases reviewed, children were in out-of-home placements that were either in their former communities or within the region. In those cases in which children were placed outside of their communities, reviewers judged that the placement was necessary to meet the children's needs for additional supports or to facilitate an adoption or placement with a relative.
The case review findings with respect to proximity of placements may be, at least in part, a result of the decision to include an equal number of relative and non-relative foster care placements in the sample of foster care cases. There were a number of stakeholders who expressed the opinion that a scarcity of foster families, particularly in some regions, has resulted in children being placed outside of their communities or regions.
Item 12. Placement with siblings
X Strength Area Needing Improvement

#### **Basis: Statewide Assessment**

Information on this item was not specifically requested nor addressed in the Statewide Assessment.

#### **Basis: On-Site Review**

The area of placement with siblings was rated as a strength in 20 (95%) of the 21 applicable cases. In these cases, either children were placed with their siblings or when separated from siblings, the case information documented that the separation was necessary to support the unique needs of one or more of the siblings.

Despite these strengths, a number of stakeholders noted that in some areas of the State, siblings are not being placed together as frequently as in other areas. These stakeholders suggested the Department still needs to do more to ensure that siblings are kept together in placement. Some stakeholders noted that there is a program, called "SibLink," that targets the Boston area and is designed to increase the number of foster homes willing to parent sibling groups and to provide support to those families.

# Item 13. Visiting with parents and siblings in foster care

X	Strength	Area Needing Improvement

#### **Basis: Statewide Assessment**

It is the policy of the Department that the social worker arranges and enters in the family's service plan a child-family visitation schedule for all cases with children in placement.

# **Basis: On-Site Review**

The area of visiting with parents and siblings in foster care was rated as a strength in 25 (89%) of the 28 applicable cases because in most of the applicable cases, children visited with their parents and their siblings on a regular basis. For those cases in which parental visits were not in the best interests of the child, workers helped children maintain connections with family members by encouraging letters and phone calls. In addition, foster parents reported that they frequently facilitate visitation between children in care and their parents.

# Item 14. Preserving connections \_X\_ Strength \_\_\_\_ Area Needing Improvement

**Basis: Statewide Assessment** 

Information on this item was not specifically requested nor addressed in the Statewide Assessment.

#### **Basis: On-Site Review**

The area of preserving connections was rated as a strength in 30 (97%) of the 31 applicable cases because workers clearly made and documented diligent efforts to locate kin or to identify foster parents who would help children in care remain connected with their family and community. Reviewers noted, for example, cases in which workers and/or foster parents helped children maintain connections with schools, counselors, and health care providers.

The only issue of concern with respect to this area was the opinion of a few stakeholders that the Department needs to do more to help children with their transition when they return home or are placed in a pre-adoptive home, including maintaining connections between the children and their former foster parents, when appropriate.

#### Item 15. Relative placement

X	Strength	Area Needing Improvement
∠x	Suchgui	Mica Needing improvement

#### **Basis: Statewide Assessment**

Placement with kin - when the child's safety is ensured - was identified by the Department as the preferred placement for children in need of out-of-home care. The percentages of children in-care with relatives rose from 12.3% in 1997 to 15.4% in 1999. Also, the percentage of the first-time entrants cohort whose most recent placement was with relatives rose from 12.3% in 1997 to 14.7% in 1999. The Department's efforts to enhance its practice in the area of kinship placements include the development of a number of kinship service delivery models in several Area Offices across the State.

Based on the experiences of these Offices, the Department is in the process of implementing a "kinship initiative" that will expand those efforts to include every Area Office in the State.

## **Basis: On-Site Review**

The area of relative placement was rated as a strength in 31 (97%) of the 32 applicable cases. Case documentation showed that the Department was making concerted efforts to locate and assess kin to serve as placement resources in all of the 32 placement cases under review. Workers sought and used a range of family placement options for children including maternal and paternal relatives such as grandparents, aunts/uncles, and mature siblings. In addition, workers placed children with both in and out-of-state relatives.

Stakeholders and reviewers, however, noted a few areas warranting additional attention. While acknowledging that the Department has made some significant advances in this area, some stakeholders feel that more could be done to identify and engage relatives earlier in the life of a case. Both the case reviewers and stakeholders observed that an early, diligent search for absent fathers is not often pursued. In addition, reviewers heard about the need for additional supports for relative care providers, including respite care, support groups, training on setting boundaries/limits with parents, how to advocate for services, and how to function well within the system.

#### Item 16. Relationship of child in care with parents

X	Strength		Area Needing Improvement
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#### **Basis: Statewide assessment**

Information on this item was not specifically requested nor addressed in the Statewide Assessment.

# **Basis: On-Site Review**

The area of the child's relationship with parents was rated as a strength in 23 (88%) of the 26 applicable cases because reviewers found that the Department staff and foster care providers promoted parent-child contact. Some parents reported that they were very involved in the every-day life events of their children, often because of encouragement and support by Department or providers. Some parents were actively participating in the medical care of their children and serving as their children's educational advocate. In addition, some foster parents reported that they maintain ties with children who return home and support continuing ties to biological families for children whom they adopt.

Despite these supportive examples, in 3 (12%) of 26 applicable cases, the Department made little or no effort to support the parent-child relationship. In addition, some stakeholders expressed the opinion that not enough attention is given to ensuring that visitation is used therapeutically to strengthen the bond between the parent and child(ren) and to improve parenting skills. Stakeholders also noted that additional resources, such as case aides, may be needed to accomplish this.

#### III. CHILD AND FAMILY WELL-BEING

Outcome WB1: Families have enhanced capacity to provide for their children's needs.									
Number of cases reviewed by the team according to degree of outcome achievement:									
	Team 1	Team 2	Team 3	<b>Total Number</b>	Total Percentage				
Substantially Achieved:	17	13	8	38	76				
Partially Achieved:	3	2	5	10	20				
Not Achieved or Addressed:			2	2	4				
Not Applicable:									

For Outcome WB1, families have enhanced capacity to provide for their children's needs, the State is found: Not in Substantial Conformity because the State did not achieve the required 90% case performance level.

# Item 17. Needs and services of child, parents, foster parents

\_\_\_\_ Strength \_\_X\_\_ Area Needing Improvement (applied to all 50 cases)

#### **Basis: Statewide Assessment**

The Department has a broad array of services to assist families in enhancing their capacity to provide for their children's needs. In addition, the Department provides or coordinates with other Federal and State programs to meet the needs of children and their families. The key services available are presented and described in Item 3, Section I; Items 21, 22, and 23, Section III; and Item 35, Section VIII. Also, Item 44, Section X in the Systemic Factors section of this report describes services and supports available to Foster Parents.

#### **Basis: On-Site Review**

The area of meeting service needs was rated as needing improvement in 16 (32%) of the 50 applicable cases. Key findings from case record reviews were the following: (1) assessments of the child's and family's service needs were either not completed or poorly completed; (2) adequate service assessments were completed, but the services provided were not appropriate for the assessed needs, e.g. cases in which domestic violence or substance abuse needs were assessed, but services for these problems were not provided; (3) follow-up on referrals to providers to ensure that parents were able to access and/or were participating in services was not done; (4)

some providers did not submit reports on the progress or outcomes of their service provision to DSS; and (5) the service needs of fathers were not addressed in case plans.

Despite these problems, there were 34 (68%) cases in which: (1) the case plan activities and services were in place and working well; (2) providers and DSS workers were actively involved in assessing and addressing families needs and there was a good match between needs and services; and, (3) workers made diligent efforts to get services to families in a timely manner.

Many stakeholders noted that through the Family Based Services network, the Department has increased its capacity and capability to design services to better fit the needs of families.

#### Item 18. Child and family involvement in case planning

\_\_\_\_ Strength \_\_X\_\_ Area Needing Improvement

#### **Basis: Statewide Assessment**

State policy notes that, to the greatest extent possible, the service plan is developed jointly with the family and written in the family's preferred language in a manner that is clearly and easily understood by the involved parties. The service plan specifies the expectations negotiated with the family regarding participation in services and completion of tasks that support the family member's ability to effect these changes, achieve the service plan goal and eventually close the case. The service plan also includes tasks for the Department, substitute care providers and other service providers.

Parents are encouraged to continue to make educational decisions for their child (ren) whenever possible and appropriate. In delegating responsibility for health care, the social worker also encourages parents to assume as much responsibility as possible, especially if the Service Plan goal is family reunification. If it is not appropriate or possible for the parents to assume all of the responsibilities, the social worker may seek to delegate routine health care responsibilities to the substitute care provider.

Data from the Foster Care Review Unit findings on FamilyNet indicate that 87% of the service plans reviewed during FFY'99 had parent/child participation. In FFY'00, 84% of the service plans had parent/child involvement in service planning for placement cases. This decline in participation is one of the concerns that prompted the changes in the service plan policy and process discussed in Item 25, Section V in the Systemic Factors section of this report.

#### **Basis: On-Site Review**

The area of child and family involvement in case planning was rated as needing improvement in 16 (34%) of the 47 applicable cases. Key findings with respect to this area included the case record observation that completed service plans were sometimes

simply presented to a parent for signature, with little or no discussion with the family about their sense of what was needed to keep their children safe. In some of the case-specific interviews, parents expressed the opinion that there was a lack of respect for them in the planning process. Other stakeholders noted this and reported that consistent identification and/or involvement of fathers in the case planning process was lacking as well.

Despite these findings, in 31 (66%) of the applicable cases, workers engaged families in case planning. Also, there were stakeholders who expressed the opinion that it is the Department's policy to engage families in a collegial fashion during the planning process.

Item 1	9. Worker	visits with child
_X_	Strength	Area Needing Improvement
Basis:	Statewide	Assessment

It is the policy of the Department that the social worker arranges and enters into the family's service plan a schedule of social worker-client contacts and of child-family visitation for all cases with children in placement. The social worker, in discussion with the family and in consultation with the supervisor determines the frequency, location and method of his/her contacts with children in placement and their parents. The actual schedule of contacts will vary from case to case and may, in many cases, be more frequent than the minimum standard required. The minimum standard for frequency of contacts and visitation requires at least monthly visits by a social worker with the children and the children's parents.

### **Basis: On-Site Review**

The area of worker visits with children was rated as a strength in 49 (98%) of the 50 applicable cases. In these cases, workers visited with children at least once per month (as required by State policy). It was also noted that the frequency of visits was increased when circumstances indicated that more contact was needed. In addition, most stakeholders reported that worker's visits with children are a priority for the Department and that Area Directors and Supervisors receive detailed reports on workers' compliance with visitation requirements.

Item 20. Worker visits with parents						
X Strength Area Needing Improvemen						
Basis: Statewide Assessment						
See Item 19						

#### **Basis: Onsite Review**

The area of worker visits with parents was rated as a strength in 38 (88%) of the 43 applicable cases because workers visited with parents at least once per month. There were 5 cases, however, that were rated as needing improvement. In a few cases, workers relied on telephone contacts instead of in-person visits.

Outcome WB2: Children receive appropriate services to meet their educational needs.							
Number of cases reviewed by the team according to degree of outcome achievement:							
Team 1 Team 2 Team 3 Total Number Total Percentage							
Substantially Achieved:	14	14	9	37	86		
Partially Achieved:	1		1	2	5		
Not Achieved or Addressed:	2		2	4	9		
Not Applicable:	3	1	3	7			

For Outcome WB2, children receive appropriate services to meet their educational needs, the State is found: Not in Substantial Conformity because the State did not achieve the required 90% case performance level.

#### Item 21. Educational needs of the child

Strength	X	Area Needing	Improvement
Strength	X	Area Needing	ımprovement

#### **Basis: Statewide Assessment**

Every school-aged child who is in DSS care or custody must have a designated Educational Decision-Maker, empowered to make educational decisions on her/his behalf. Whenever possible and appropriate, the Department encourages the parent to continue to make such decisions.

DSS makes every effort to locate an out-of-home placement that will enable each child to continue in his/her own program or a comparable education program. Whenever possible, the Department's policy is to time any necessary moves to coordinate with the child's school schedule

Most children in DSS care or custody are educated in regular education programs in local public schools. When indicated, the Department coordinates with the parent or other designated educational decision-maker to request a special education team evaluation by the school district. If the child is found to have a disability as defined by statute, an Individualized Education Program (IEP) is written and special education services, as well as services related to the disability, are provided in accordance with this Plan.

In 1996, the Departments of Social Services and Education developed operational protocols to clarify roles and responsibilities in the coordination and delivery of education and social service programs to foster children. The Protocols are undergoing revisions to reflect recent changes in the Massachusetts special education laws and regulations.

To assist DSS staff with the many educational issues that arise for children in the Department's care or custody, the Department has an Educational Coordinator in the Central Office who is responsible for training new social workers on education-related issues, responding to case specific inquiries from the field, and serving as the liaison to the Department of Education (DOE). As part of the Core Training for new staff, the Education Coordinator distributes a comprehensive "Educational Policy and Procedures" handbook covering such topics as accessing student records, student discipline, suspension and expulsion, and special education. A number of Regional and Area Offices also have hired educational consultants who are available to DSS social work staff for case consultation.

In the development of the Department's data management system, FamilyNet, education screens were designed to collect and track data specific to the school location, grade and special education status of children in the Department's care or custody. New initiatives for this fiscal year will focus on more consistent completion of these fields to better monitor the educational needs of children.

#### **Basis: Onsite Review**

In 37 (86%) of the 43 applicable cases, the area of meeting children's educational needs was rated as a strength. However, in 6 (14%) of these applicable cases, this area was rated as needing improvement. The key problems identified from the case record reviews were: (1) workers failed to follow-up on issues such as school failures and truancy; (2) lack of documentation in the case/service plan regarding the Department's efforts to meet children's educational needs; and (3) inconsistent provision of school records to foster parents.

Despite the identified problems, case-specific interview revealed that workers were: (1) generally having regular contact with schools and attending school meetings, often with the parent; (2) DSS staff and foster parents advocated strongly for needed educational services for children in substitute care, particularly for the early identification of developmental delays and for the provision of early intervention services; and, (3) DSS workers generally made good efforts to keep children in their same school when placed in out-of-home care.

Stakeholders also had positive perceptions of the issue of meeting the educational needs of children. A number of stakeholders reported that DSS workers —with the help of educational consultants — pay close attention to the educational needs of children in-care. In addition, stakeholders described a pilot advocacy program to minimize school disruptions for children in out-of-home care. These stakeholders expressed the opinion that this program has resulted in a close working relationship between DSS and the schools. Stakeholders, however, also noted that there are issues in the educational system — such as resistance to admitting special needs foster children and an unwillingness to share the cost of services - that negatively impact the ability of DSS to ensure that the educational needs of special needs children are addressed.

Outcome WB3: Children receive adequate services to meet their physical and mental health needs.							
Number of cases reviewed by the team	n according to degr	ee of outcome achi	evement:				
	Team 1	Team 2	Team 3	<b>Total Number</b>	<b>Total Percentage</b>		
Substantially Achieved:	11	15	8	34	69.4		
Partially Achieved:	4		5	9	18.4		
Not Achieved or Addressed:	4		2	6	12.2		
Not Applicable:	1			1			

For Outcome WB3, children receive adequate services to meet their physical and mental health needs, the State is found: Not in Substantial Conformity because the State did not achieve the required 90% case performance level.

## Item 22. Physical health of the child

Strength	X	Area Needing	Improvement

#### **Basis: Statewide Assessment**

State policy requires that in preparation for placement, the social worker obtains information regarding the child's current health care status and obtains MassHealth (the Commonwealth's Medicaid program) coverage for the child. This coverage is used, in conjunction with any private insurance available from the parents, to obtain the needed medical and dental care for the child while in placement.

Based on recommendations from the American Academy of Pediatrics and the Child Welfare League, the Department has implemented a new schedule of initial health care visits for children in substitute care. All children who enter the care or custody of the Department must have a health care screening within seven calendar days of placement. This screening is a brief medical examination to check for life-threatening conditions, communicable diseases and serious injuries or indications of physical or sexual abuse. In addition, all foster children must have a complete comprehensive medical exam within thirty calendar days of placement. This exam should include the following: a complete physical exam, a nutritional, developmental and immunization assessment as well as needed immunizations; and, if necessary; lab test and lead screens, and a behavioral health assessment. Finally, all foster children are expected to have a dental visit within the first six months of placement and regular dental exams thereafter.

DSS employs 9.9 FTE nurses who are based in the DSS Regional Offices. The nurses are responsible for providing consultation to the DSS field staff, legal staff and DSS foster parents on medical issues pertaining to foster children.

The DSS Social Worker is responsible for developing a plan for the provision of continuous health care services for each child in placement. The Medical Passport - a FamilyNet screen used to track the health care needs and appointments of foster children – is completed for each child in-care. The Passport is reviewed during the regularly scheduled Foster Care Review meetings to ensure that children are receiving adequate health care services. While it is clear from the discussions held at Foster Care Review meetings that children in placement are receiving routine medical and dental care, these visits are not documented on the assigned FamilyNet screens. The Department is working on plans to improve documentation on the FamilyNet system.

It is the policy of the Department that EPSDT health care services or the equivalent be provided to children at the time of placement and throughout their stay in placement. Comprehensive health exams are also completed annually for children in care over the age of two. Upon request, the Department is able to obtain EPSDT examination data from the Massachusetts Division of Medical Assistance (DMA), the State Medicaid agency. Children who have medical conditions that require skilled nursing care and constant medical monitoring over a prolonged period of time are enrolled in the Special Kids • Special Care program, cosponsored by DSS and DMA, and which provides a nurse practitioner to manage the medical care for these children.

#### **Basis: Onsite Review**

Meeting children's physical health needs was rated as an area needing improvement in 14 (29%) of the 49 applicable cases. Key findings with respect to this area obtained from case record reviews and case-specific interviews include the following:

- Children's medical needs, the services provided, and the immunizations needed or received were not documented in many of the case records.
- In a majority of the applicable cases, children received initial health screenings according to State policy. However, in cases involving adolescents with frequent placement changes, the required screenings were not received.
- There was a lack of follow-through with health care providers.
- Children's health conditions were not treated in a few cases.
- Stakeholders reported that there was a general lack of available dental services.
- Children's health records were not consistently provided to foster parents at the time of placement even though the Department frequently relies on foster parents to ensure the provision of health services to children in their care.

Despite these problems, in 35 (71%) of the 49 applicable cases, workers did attend to children's health needs. In some of these cases,

the workers ensured that the children received specialized services for conditions such as fetal alcohol syndrome, "lazy eye," and speech problems.

Item	23	Menta	l health	of the	child
ILCIII	4.).	VICILIA	i iicaitii	OI LIIC	

	Strength	_X_	Area Needing	Improvement
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#### **Basis: Statewide Assessment**

According to State policies and procedures, when mental health service needs are identified for a child, the DSS social worker arranges for the required service by contacting a provider approved by MassHealth's mental health vendor, the Massachusetts Behavioral Health Partnership (MBHP). Outpatient services available through the "Partnership" include: psychological testing, individual, family and group counseling, medication, and ancillary services. The Partnership also provides in-patient mental health and substance abuse services, diversionary services, emergency services and outpatient day programs.

The Department has taken a collaborative approach to the development and delivery of mental health services to foster children. A number of new collaborative program models have resulted in a reduction in the number of days a child is "stuck" in the hospital awaiting an appropriate placement and an increase in the number of children released from hospitals into DSS care. The Department is in the process of hiring six Clinical Mental Health Specialists to provide consultation regarding hospitalized children. In further collaborative efforts, the DSS Assistant Commissioner for Quality Case Practice chairs a weekly clinical team meeting to discuss complex cases with psychiatrists from the Department of Mental Health (DMH) and the MBHP. The Department also holds monthly meetings with DMA and the Partnership; topics include discharge planning, data sharing and medication issues.

## **Basis: Onsite Review**

The area of meeting the mental health needs of children was rated as needing improvement in 9 (22%) of the 41 applicable cases. Key findings from the case record reviews and case-specific interviews were the following: In a number of cases, reviewers noted that mental health services were lacking, including: (1) Required initial screenings were either not provided or not documented; (2) Providers were either non-responsive or they failed to develop a working relationship with the child; (3) Providers failed to submit reports on the progress of children/youth; and (4)In one case in which sexual abuse was assessed and services recommended, there was no evidence in the case record that these services were ever provided.

Many stakeholders expressed the opinion that there are significant gaps in mental health services and that there are many turf issues in the system that impeded the timely delivery of services.

Although this area was given an overall rating of "needing improvement," the following strengths were identified in 32 (78%) the 41 applicable cases reviewed: high quality evaluations of mental health needs; mental health services that were initiated quickly after placement; and creative and flexible provision of services, such as specialized child care, Commonworks, and therapeutic foster homes.

#### IV. STATEWIDE INFORMATION SYSTEM

Rating of Review Team Regarding Substantial Conformity						
Not in Substantial Conformity Substantial Conformity						
Rating	1	2	3	4 - X		

Item 24.	State is operating a statewide information system that, at a minimum, 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.

_X_ S	trength		Area	Needin	g Im	iprove	ement
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#### **Basis: Statewide Assessment**

Over the last three years, the Department has developed and matured its automated information system, FamilyNet. This system averages 2,000 active users per day and is available in all office locations across the Commonwealth, as well as at some contracted provider locations. It is also accessible to remote users through a dial-in process.

FamilyNet is a comprehensive application offering over 700 modules to record abundant case and consumer information plus another 310 windows/screens representing a combination of online queries, documents and reports providing case, consumer, provider, legal and financial information to the user community. Finally, it supports a reporting database, accessed by management, planning and analysis staff for some limited ad hoc querying.

FamilyNet includes functionality for the following child welfare business practices: service, resource, staff, and financial management; legal services; quality assurance; and reporting and interagency interfaces. As such, it effectively supports the State Plan requirements for determining the status, demographics, location, and goals for all children in foster care in the State.

The continuing challenge is not only how to improve the software, but how to keep users aware of the many features that FamilyNet provides. Based on responses from recent user proficiency surveys specific to different job functions in the regional and area offices, e.g. Adoption, Intake/Investigation, etc., training plans specific to each particular office will be developed. In addition, the Department has a network of Regional and Area-based personnel readily available to assist end-users and to act as liaisons between the users and the project designers.

#### **Basis: Onsite Review**

The area of statewide information system was rated as a strength. Most stakeholders reported that FamilyNet allows for more efficient recording, gathering, review and analysis of child welfare data. As such, it provides case level data on the status, demographic characteristics, location, and placement goals for every child who is in foster care. The system also captures progress information for critical incident reports and quarterly treatment plans. Finally, it has the capability of scheduling reviews and providing notice to parties of review dates.

However, stakeholders pointed out some problems with the current system including a poorly designed service plan, which does not facilitate participation by parents in plan development. Reviewers and stakeholders noted that certain modules/sections are not set-up to adequately capture essential information, such as information on the education and health/mental health of children in placement. Another reported system deficiency was that the foster care placement module only records point-in-time information and does not provide information on the location of separated siblings and number of active/inactive foster homes. Also, lacking is the ability to track the progress of a case in the court system. For example, the system does not allow an assessment of a child's status with respect to TPR.

In addition, stakeholders noted that it is an on-going challenge to keep the information system up-to-date on available resources and on the shifts in case practice. An example of these challenges is the modification that will be needed to accommodate the new case plan/service planning model in FamilyNet.

Some stakeholders expressed the opinion that FamilyNet has the capacity to be an even more valuable case management and research tool than it already is. In fact, a few stakeholders indicated that the Department has been working with a consultant in strategic planning for the IT system. The goal of this planning effort is to develop ways to better use the information available to achieve improved outcomes for children and families.

With respect to the court systems, some stakeholders indicated that although the Juvenile Court has automated case management, the system is very outdated. It is capable of tracking cases, but it cannot interface with systems in other courts or with DSS. The courts are in the process of developing and implementing a statewide automation project and a priority for the project is to ensure that there is interface with other systems, particularly with DSS.

#### V. CASE REVIEW SYSTEM

Rating of Review Team Regarding Substantial Conformity						
Not in Substantial Conformity  Substantial Conformity						
Rating	1	2 – X	3	4		

Item 25. Provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions.

Strength	X	Area Needing	Improvement
Ducingui	2 <b>1</b>	I II ou I toouili	

#### **Basis: Statewide Assessment**

State policy requires that for each child in foster care, a written case plan/ service plan with all the Federally required elements is developed at the end of the assessment period. The plan is to be written in the family's preferred language and in a manner that is clearly and easily understood by the involved parties. The case plan/ service plan is to be renewed every six months and rewritten once a year - or more often if there is a significant change in the casework direction in a case.

To the greatest extent possible, service planning is intended to be a dynamic, interactive process in which the Department, family members, substitute care and other service providers jointly developed the plan. During the conversion from ASSIST to the new FamilyNet system, the Service Plan document was put online; and, over time, the Department has recognized that there has been difficulty in developing and using the service plan document as it was intended. A Statewide Task Force worked to clarify service plan formatting on FamilyNet for the field. The Task Force also improved the Service Plan document so that it incorporates information consistent with the Department's progression to a strengths/needs model of service planning. In this model, parents will be expected to identify their own goals (which become part of the service plan) while the Department will continue to determine permanency goals and outcomes based on assessment results and ongoing casework with the family. This model is currently being piloted in two area offices.

Data for FFY '99 indicate that 87 percent of the service plans reviewed at the Foster Care Review had parent/child participation. In FFY '00, this rate declined to 84 percent. This decline in participation is one of the concerns that prompted changes in the service plan policy and process.

#### **Basis: On-Site Review**

The area of case plans was rated as needing improvement based on the following observations and information:

- Although case plans were found in 49 of the 50 applicable cases, in many of these cases, the families were not involved in development of the plan.
- The case/service plan in the FamilyNet system does not facilitate parental involvement in the planning process.
- Parents and other stakeholders described the current plan as cumbersome for workers and confusing to families.
- Stakeholders also noted that the plan is not always written in the language of the family for whom it is developed.

Despite these problems, a number of stakeholders reported that there has been a successful pilot program in one Area Office on engaging families in case planning. Several other Area Offices have expressed an interest in replicating this model. Stakeholders reported that the Department intends to expand this approach statewide.

## Item 26. Provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review.

X Strength	Area Needing Improvement
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## **Basis: Statewide Assessment**

The Foster Care Reviewer is a member of an independent unit within DSS. This unit is charged with scheduling and documenting the results of the review meeting. Cases are selected for review through Family Net using the criteria that one child in a family is in out-of-home placement and the case has been open six months. Since the entire family is reviewed, many first reviews are done in cases where the child has been in placement for less than six months. Subsequent reviews are conducted every six months from the date of the first review.

One of the unique features of the Massachusetts Foster Care Review is the three-member review panel. The DSS Foster Care Reviewer leads the discussion and writes a report that documents the findings of the panel. The second member of the panel is a volunteer from the community in which the review is being conducted. The volunteer brings a fresh unbiased perspective to the review meeting. The third member of the panel is a manager from the area office in which this review is being conducted. The manager brings the knowledge of the local area office practices and resources to the review process. The review determinations, made

by equal vote of the panel members, are binding. There are systems in place that allow for a "check and balance" of these decisions.

The Foster Care Review Unit has completed between 90% and 95% of the cases due in a given month on time. Cases that are not completed in the month in which they are due are completed in the following two months. There have been some reviews that have been conducted three months after they were due but these are rare and the result of circumstances beyond the control of the Foster Care Review Unit.

**Basis: On-Site Review** 

The area of periodic status reviews for children in foster care was rated as a strength. Most stakeholders reported foster care reviews were held in a timely fashion. They also reported that the Foster Care Review panels have significant input into case management decisions and that these reviews are regarded as meaningful events. Stakeholders expressed the opinion that having a community volunteer involved in this process ensures an independent review of the status of the cases. They added that these volunteers also gain a fuller understanding of the system which benefits the agency as well as the children and families involved with the Department.

Item 27. Provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

Strength	X	Area Needing	Improvement

## **Basis: Statewide Assessment**

The passage of ASFA and Chapters 3 and 6 of the State's legislation enacted on March 31, 1999 raised the visibility of permanency hearings in the Commonwealth and reopened the discussion of the role that permanency hearings play in promoting the timely and appropriate achievement of permanency goals for children. The Courts, the Department and the Committee for Public Council Services (CPCS) came together and began a dialogue about the hearings (as well as other ASFA-related provisions), their scheduling, their content, and their conduct. In particular, the Courts, with input from the Department and CPCS, revised its Uniform Rules for Permanency Hearings. All three groups conducted training on the ASFA requirements, including the purpose and focus of the Permanency Hearings. The Courts, the Department and CPCS continue to meet periodically to discuss all of the ASFA requirements, including the timeliness and quality of permanency hearings.

The main barrier to achieving timely permanency hearings appears related to the timeframes for the Court's notification to the Department of the hearing date and the Department's ability to file its permanency hearing report with the court with copies to the CPCS lawyers.

To facilitate better coordination and communication, the Department, the Courts and CPCS have instituted a new process with revised timeframes at each stage, agreed on a uniform tickler from the Juvenile Court to the Department four months in advance of the permanency hearing due-date, and revised the notification mechanisms at each stage. In addition, many of the juvenile courts now schedule the permanency hearing date at the time the petition is filed, and/or at the time of the annual review date at subsequent permanency hearings.

In addition, programming problems in a new FamilyNet report resulted in an understatement of the timeliness of permanency hearings. However, even with the programming problems, timeliness statewide for the year under review was no less than 72%.

Major data review and clean-up were undertaken to assure that FamilyNet and the report accurately reflect the date that the last permanency hearing was held as well as any future permanency hearings scheduled. In addition, the Department totally revised the tracking reports to be more effective and the reports are now successfully run routinely.

It is difficult to evaluate the effectiveness of permanency hearings in achieving timely permanency for children because their effectiveness may depend on how often the case has been before the court in the normal course of the litigation; at what point in the litigation the permanency hearing occurs; whether the court case is proceeding expeditiously under the time standards established by the trial courts (Juvenile and Probate); and whether the permanency hearing is the first, second, or subsequent hearing.

## **Basis: On-Site Review**

Rated as an area needing improvement, reviewers found that permanency hearings were occurring in a timely manner, but received very mixed feedback from stakeholders on the quality and effectiveness of these hearings.

A number of stakeholders reported that courts often had extremely brief and perfunctory permanency hearings – citing examples of hearings lasting only 10 minutes – that did not adequately address the ASFA requirements for these hearings. The most frequently cited barriers to substantive and effective hearings were (1) the length of time that it takes to reach adjudication in Massachusetts' Courts, (2) the extent to which judges viewed the permanency hearing as a meaningful event, and (3) the fact that parties do not always receive the permanency planning report in sufficient time before the hearing.

Other stakeholders, however, expressed the opinion that more judges are becoming increasingly knowledgeable of and attentive to child welfare matters, including permanency hearings and TPR requirements under ASFA. They believe that this increased knowledge is resulting in more consistent practices by the Courts and that it also has had a positive impact on the handling of child maltreatment cases. For example, a few stakeholders described Courts that use permanency hearings to expedite permanency and to explore permanency options such as open adoption. However, stakeholders indicated that this is a more accurate reflection of the Juvenile rather than the Probate Court.

<b>Item 28.</b>	Provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption
	and Safe Families Act.

\_\_X\_ Strength \_\_\_\_ Area Needing Improvement

#### **Basis: Statewide Assessment**

In 1994, DSS initiated efforts to reduce the number of waiting children with the passing of MGL Chapter 303. This legislation predated similar federal regulations enacted as the Adoption and Safe Families Act (ASFA) in 1997. Chapter 303 set specific timelines under which the Department and the Courts must act to achieve permanence for children in foster care. It also defined specific circumstances in which the Department must seek termination of parental rights, or provide justification to the court as to why such action was not appropriate. The adoption process was simplified by allowing the termination of parental rights in the District and Juvenile Courts. The number of adoptions rose from 700 in 1993 to over 1,000 in 1994 - 1996. The passage of ASFA in 1997 did require the Department to alter some of the timeframes created by Chapter 303, but the impact of the new Federal legislation in Massachusetts was significantly less than in many other states.

The Point-in-Time Data Element VI indicate that there has been an increase in the percentage of children in-care for 17 of the most recent 22 months from 49% in 1997 to 53% in 1999. The data element does not identify the percentage of those cases in which there had been a Termination of Parental Rights (TPR) during that time period. In January 1999, the Department implemented a process for meeting ASFA's requirement regarding TPR by providing field staff with guidelines on what constitutes an exception to the TPR provision and with listings of children who had been in placement at least 12 months. The Department continues to issue a monthly listing of such children. Regional and central office staff monitor the listings. In addition, the General Counsel meets regularly with the legal managers to address any barriers to initiating the TPR case once the determination that a TPR should be initiated is made. The most common issue that has arisen in these discussions concerns the children who, because of behavior or emotional problems, are currently in residential facilities and will not be ready for a permanent home for a while. When to change the goal and when to initiate the TPR for these children continues to pose challenges.

**Basis: On-Site Review** 

This item was rated as a strength based on the case review and stakeholder comments that confirmed the state has a TPR process in accord with ASFA requirements. Stakeholders reported that this process is facilitated by FamilyNet, which generates a list of cases

subject to the ASFA TPR provisions in advance of the due date. They noted that this information is used to schedule a Permanency Planning Conference with clinical and legal staff to determine whether a case should be referred for TPR or an exception should be granted. Also, in the applicable cases, there was documentation of "compelling reason" exceptions to TPR. For the most part, reviewers felt that these exceptions were being appropriately applied. However, some stakeholders voiced concern that TPR and permanency for some older youth and youth in residential treatment programs was not always vigorously pursued.

Item 29.	Provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be
	notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child.

X	Strength	Area	Needing Improv	ement
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#### **Basis: Statewide Assessment**

Foster parents, pre-adoptive parents and relative caregivers are notified by mail at least 14 days or more in advance of the meeting date for the Foster Care Review. In FFY '99, 2,248 foster/pre-adoptive parents and 315 relative caregivers attended Foster Care Reviews. The Foster Care Reviewers organize the meeting to ensure that foster parents and relative caregivers are included in the discussion of the case. Many foster parents and relative caregivers send a report on the child's progress if they are not able to attend a review.

With the implementation of ASFA, the Department, through its six regional legal offices, also provides written notice to foster parents (including relative caregivers) and pre-adoptive parents of permanency hearings and trials. Following the changes to the State law in 1999 (in response to ASFA) the Department, in conjunction with KidsNet (a Department-funded initiative to provide a support network and services to foster parents) provided training to foster parents on the "notice and opportunity to be heard" provision.

Foster parents were provided with information about the court process, including what was likely to occur in court, the different mechanisms that were available to provide information to the court, and tips if they were called as witnesses. Since then, KidsNet has also utilized its newsletter to further inform foster/pre-adoptive parents about this provision. In addition, Departmental attorneys explain the provision to prospective foster and adoptive parents in MAPP training.

#### **Basis: On-Site Review**

This item was rated as a strength primarily because in case-specific interviews, the majority of foster parents reported that they were invited to Foster Care Reviews and Permanency Hearings. Also, most stakeholders confirmed that foster parents were invited, and often encouraged, to attend these reviews or to submit a written report to the Case Reviewer or the Court.

However, some stakeholders noted that the participation rate of biological parents, children, and foster parents at reviews was low.

Some of the reasons given for this were: inconsistency in notification, the lack of encouragement by some Area Offices and Courts, the scheduling of reviews only during working hours, and judges who limited the calling of witnesses.

## VI. QUALITY ASSURANCE SYSTEM

Rating of Review Team Regarding Substantial Conformity				
	Not in Substantial Confo	rmity	<b>Substantial Conformity</b>	
Rating	1	2	3 -X	4

<b>Item 30.</b>	The State has develop	ped and impleme	ented standards to ensure that	children in foster	care are provided
	quality services that	protect the safety	y and health of the children.		

X	Strength		Area Needing Improvement
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#### **Basis: Statewide Assessment**

Since September 1998, the Department of Social Services has had a well-defined set of Standards to ensure quality out-of-home care services that protect the health and safety of foster children. Prior to this time, the Office for Child Care Services set these Standards. Current Licensing Standards also include "Standards for Eligibility to Apply" which are utilized at point of interest. The purpose of these Standards is to determine whether prospective families meet certain basic requirements, such as no member of the household is currently, or during the 12 months prior to completion of the Registration of Interest, involved in an open case with DSS; the family has a stable housing history and current housing which meets the Department's physical requirements, etc. before the completion of an application and the Family Resource Assessment.

## **Basis: On-Site Review**

This item was rated as a strength based on consistent reports from stakeholders that: (1) the Department's strengthened licensing standards for foster homes enhanced the health and safety of children in foster care; (2) Family Resource Workers frequently visited foster homes to ensure that these standards were being met; (3) the Department's attention to workers' compliance with contact and visitation standards contributed to the health and safety of children in placement; and, (4) the assessment of any report of maltreatment

in foster homes or residential/child care institutions by the independent investigation unit was generally viewed as ensuring an objective evaluation of the safety of the children in placement.

Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the CFSP are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented.

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Strength	v	Area Needing Improvement
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Duongui	2 <b>L</b>	Thea i tecaning improvement

**Basis: Statewide Assessment** 

The Department employs an array of quality assurance (QA) practices in an effort to measure and improve the quality of services provided to the children and families it serves.

The following are examples of QA activities within the Department:

In the central office of DSS:

- The Foster Care Review Unit, an independent unit within DSS, is responsible for conducting case reviews every six months for all families who have at least one child living away from home and in the care or custody of the Department. The purpose of the review is to ensure that all family members are receiving the services they need and that children are not in a temporary setting for any longer than is necessary. The case findings of these reviews are also used in the aggregate to inform case practice and policy.
- The Central Office Case Investigation Unit conducts an investigation of the death or near death of any child who dies/nearly dies while in DSS care or custody. Along with enhancing the ability to provide high-level investigations, this unit is able to identify trends and issues related to the safety of children in foster homes and institutions throughout the State. These trends and issues are expeditiously communicated to agency administrators so that measures can be taken to effectively address them. The findings of these reports are shared with the Regional Directors and also inform the case practice protocols;
- The Ombudsman's Office receives and responds to hundreds of complaints and comments from client families, people in the community and others. The Office monitors the content of these contacts for patterns indicating systemic problems or issues and compiles this information along with suggested policy or programmatic changes;
- When a multi-level review of case practice reveals a need for change, protocols are immediately issued to the field. For
  example, a protocol was recently issued to insure that protective concerns in certain cases are immediately addressed and that
  managers are involved in key case decisions for those cases where there are 51As filed on open cases or foster or pre-adoptive
  homes.

## In the Regions:

Other quality assurance practices occur within each of the DSS regions. As an example, one region requests that a random sample of 20 screening decisions from Area Offices be sent monthly to the Regional Director for review. In another region, there is a monthly monitoring of cases reviewed by the Area Program Managers.

## In the Provider Community:

A number of DSS contracted service providers maintain Quality Assurance procedures for the services they provide. For example, a variety of infrastructures have been developed to support the management and monitoring of clinical, programmatic, utilization and financial outcomes in the Commonworks Program, which provides residential and aftercare services to adolescents in the care or custody of the Department. Outcomes are reported at the client, network and statewide levels. All key stakeholders review all Commonworks profiling and outcome data within a quality improvement framework and utilize the information to make necessary changes within the program.

## **Basis: Onsite Review**

This item was rated as an area needing improvement primarily because stakeholders clearly emphasized the need for a centralized, independent Quality Assurance System/Unit to better inform the policies and practices of the Department. A number of stakeholders reported that a QA Unit used to exist in the Department but that it was eliminated a few years ago. While a number of QA practices are in place, reviewers and stakeholders noted that many of the current QA activities are focused on out-of-home cases and that there are fewer checks and balances for in-home cases.

Some stakeholders argued that much more could and should be done. It is the opinion of many stakeholders that data need to be readily and systematically available for use in the State's ongoing efforts to improve the quality and effectiveness of services for children and their families. Stakeholders stated that both the Department and academia should be encouraged to further partner on QA and research activities.

Despite stakeholders' perceptions of the Department's QA problems, they did identify a number of effective QA practices, including the following:

- The FBS network's utilization review of the quality of services and outcomes;
- Residential Observer Program's qualitative analysis of treatment services and the interaction between staff and children;
- CommonWorks outcome related reviews and data analyses that measure length of stay in care and recidivism;
- Use of Foster Care Reviews to record and analyze trends, gaps in policy and/or concerns about practice issues;
- Use of FamilyNet data to monitor timeliness of reviews, hearings, contacts, and investigations, etc. Stakeholders in one office also spoke about monthly monitoring of targeted indicator reports by DSS Regional and Area Directors.

#### VII. TRAINING

Rating of Review Team Regarding Substantial Conformity				
	Not in Substantial Confo	ormity	<b>Substantial Conformity</b>	
Rating	1	2	3 - X	4

<b>Item 32.</b>	The State is operating a staff development and training program that supports the goals and objectives in the CFSP,
	addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these
	services.

X	Strength	Area Needing Improvement

#### **Basis: Statewide Assessment**

In FY 2000, 460 new workers completed the Core Pre-service Program, a competency-based curriculum developed for the Department in conjunction with the Child Welfare League of America (CWLA). The curriculum is designed to prepare staff to meet basic competencies required for their job or specialized function within the Department. It includes sixteen days of classroom and four days of "on-the-job" training in the worker's office location. Following this month of training, and prior to receiving cases, workers are provided with two weeks of a "shadowing" experience in the office. The curriculum is taught primarily by experienced Department staff and is consistently reviewed and updated to address the changing needs of families and evolving child welfare practice. In September, a training site was opened in Springfield, which has allowed the Department to offer pre-service training in Eastern and Western Massachusetts concurrently. An extensive evaluation is currently being conducted with all workers who completed the Core Pre-service Program over the last two years. It is hoped that this retrospective look at how pre-service training prepared them for their job tasks will be helpful in shaping the ongoing development of this important program.

In the past two years, staff at all levels received training related to the implementation of the Adoption and Safe Families Act (ASFA). Along with specific training provided by the National Resource Center on Permanency Planning, important content related to the implementation of ASFA has been incorporated throughout the training plan.

#### **Basis: On-Site Reviews**

The area of staff training was rated as a strength based on the general finding that the Department has a fairly comprehensive initial training program that supports the goals and objectives identified in the CFSP. Stakeholders reported that initial training is conducted by a centralized unit and is arranged so staff have some on- the-job experience prior to returning to the classroom. Stakeholders also noted that new workers are paired with experienced workers and are initially assigned smaller caseloads. The curricula for training new workers includes a focus on the permanency needs of children and an emphasis on safety, including the importance of conducting risk and safety assessments over the life of the case.

Given the complex nature of many child welfare cases, it was noted by a number of stakeholders that it would be beneficial for new staff to have more time in training and job shadowing prior to a full caseload assignment. Some stakeholders also feel strongly that new workers need more time to explore their own values and attitudes about working with families from diverse economic, racial and cultural backgrounds.

Some stakeholders discussed the need for a Child Welfare Training Institute to be developed in partnership with the Schools of Social Work. They also spoke of the advantages that increased collaboration with the Schools of Social Work would bring to Department staff and to students preparing to work in public agencies.

It is important to note that most stakeholders described turnover of new staff as a significant issue. A few stakeholders reported that the current Administration and the Legislature have become more attentive to this problem and have been seeking ways to improve retention. The most recent effort included a significant salary upgrade. Stakeholders viewed additional, initial in-service training with strengthened supervision as another means of improving retention.

# Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP.

StrengthX Area Needing Improve	ement
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#### **Basis: Statewide Assessment**

The training unit provides staff with a wide range of in-service workshops and special trainings. It also offers staff at all levels opportunities for professional development and enhanced knowledge and skill development. Staff in provider agencies are invited to attend any relevant Department training and significant numbers of provider staff do attend. Some of the Department's current

training efforts focus on supporting agency initiatives to enhance the ongoing development of effective partnerships between the agency and key constituencies. These trainings focus on supporting partnerships between parents and social workers and between foster parents and social workers.

In FY 2000, 60 new supervisors attended a five-day training series; 189 staff attended an eleven-day "Investigation Series" that is designed to prepare experienced field staff to become investigators; 89 adoption staff attended four days of specialized adoption training focused on child and family assessment and the transition of children into pre-adoptive families; 30 staff who work in "adolescent units" attended a four-day pilot of a new core competency training; and, 20 workers, supervisors, and managers attended a pilot of a four-day competency-based training for staff who work in specialized "assessment units."

This curriculum was developed as part of a Child Welfare Partnership Grant with the Boston University Graduate School of Social Work. Trainee feedback on the effectiveness of these important "core" programs has been positive. Each of these programs is continuing in the current fiscal year with the goal of having ongoing training available for workers in all specialty units.

Training Unit staff work closely with workshop presenters and staff at regional and area offices to identify relevant topics, develop appropriate learning objectives, and assure that the training is clearly targeted to the jobs of DSS staff. In FY 2000, more than 1600 participants benefited from 45 in-service workshops offered across the state. Trainee evaluations are completed after each day of training. Evaluations are based primarily upon the degree to which the trainings met specific learning objectives focused on worker job tasks and competencies. Feedback is reviewed consistently and content and training approaches are revised to address areas identified for improvement. The majority of training days receive high ratings.

Financial support is also provided for staff to attend relevant outside workshops and conferences or to pursue appropriate advanced degrees. Over 1650 staff received support to attend outside workshops or conferences in the broader child welfare community while over 351 received tuition reimbursement or remission to attend degree programs in colleges and universities, and 39 employees received paid educational leave to pursue graduate degrees.

#### **Basis: On-Site Review**

Ongoing training was rated as an area needing improvement primarily because stakeholders observed that additional, on-going training is needed to enhance the ability of workers and supervisors to better carry out their duties with regard to the services included in the CFSP. The following training needs were identified: making better assessments and engaging families in case planning; family-centered and culturally sensitive services to diverse families; addressing mental health and substance abuse issues; and effectively working with and providing services to adolescents with behavioral issues. In addition, stakeholders reported a need for developing additional training and support for managers, particularly supervisors. Finally, some stakeholders reported that in recent years additional staff have been hired to reduce caseloads, yet workers and supervisors noted that workload pressures continue to make it difficult to take time to attend needed/wanted training.

Although the item was rated as an area needing improvement, most stakeholders expressed the opinion that the Department offered a variety of training courses and provided funds for workers to attend conferences and to pursue further education. Stakeholders spoke highly of the opportunities for joint-training and cross-disciplinary training available to providers and staff. They also noted the benefits of cross-training and expressed an interest in the opportunity to attend additional training seminars with the legal and judicial communities involved in child protective matters.

Item 34. The State provides training 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.

X	Strength	Area	Needing	Improvement
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#### **Basis: Statewide Assessment**

Pre-service training for foster and adoptive parents is provided through the agency's <u>Massachusetts Approach to Partnerships in Parenting</u> (MAPP) program, which has been updated and revised to address the changing needs and realities of children and families and evolving child welfare practice. A team comprised of an agency staff person and a foster/adoptive parent delivers MAPP training at Area and Regional Offices. Over the last year, more than 75 staff, foster, and adoptive parents received 48 hours of training to prepare them to be MAPP co-leaders.

In-service training for foster and adoptive parents is provided through a contract with the *KidsNet Program*. In FY 2000, approximately 2,400 foster and adoptive parents attended 314 in-service workshops across the state. The in-service workshops are generally organized around five broad themes: strengthening foster and adoptive parenting skills; understanding normal development and the problems of foster children; understanding systems issues related to foster, adoptive, and kinship parenting; understanding health and safety issues; and managing the impact and stress of foster, adoptive, or kinship parenting.

Participant evaluations from both the MAPP program and *KidsNet* in-service training program reflect high rates of satisfaction. In fact, 93 percent of nearly 1800 participants who completed and returned a training evaluation form rated the training that they attended as *excellent* or *very good*. Ratings were high both for the skill of the trainers and the relevance of the training content. Eighty-six percent reported that they gained knowledge from the trainings that was relevant to their roles as foster/adoptive/kinship parents. Sixty-one percent reported that they acquired practical techniques. Fifty-seven percent reported feeling more positive about foster parenting as a result of the training.

#### **Basis: On-Site Review**

The area of foster and adoptive parent training was rated as a strength. In case-specific interviews, foster parents reported that for the most part, the MAPP training curriculum addressed the skills and knowledge that they needed to carry out their duties to foster and adoptive children. Also, other stakeholders noted that MAPP is a well-tested curriculum and group process that is highly regarded by foster parents and staff. However, most foster parents agree with the recent consolidation of some of the MAPP modules, which allows pre-service training to be completed in 8 weeks instead of 10 to 12 weeks.

Some stakeholders, however, talked about the need to include additional information on addressing diversity issues as part of the initial MAPP training. Also, while stakeholders gave mixed reviews regarding the participation of relative foster parents in pre-service training, the need for relative foster parents to receive training and support on setting boundaries with birth parents and understanding the child welfare and legal processes was clearly noted.

Stakeholders spoke highly of the increased level and variety of ongoing foster parent training that is offered through KidsNet. They noted, however, that foster parents would benefit from additional training on handling difficult behaviors, preventing false allegations of abuse/neglect, and on resources/services available not only through DSS but also through other systems. Finally, some stakeholders reported that the requirement for all foster parents to engage in ten hours per year of on-going training is largely ignored.

#### VIII. SERVICE ARRAY

Rating of Review Team Regarding Substantial Conformity						
Not in Substantial Conformity Substantial Conformity						
Rating	1	2	3 - X	4		

Item 35.	em 35. The State has in place an array of services that assess the strengths and needs of children and families and deter- other service needs, address the needs of families in addition to individual children in order to create a safe hom- environment, enable children to remain safely with their parents when reasonable, and help children in foster ar- adoptive placements achieve permanency.	
_X	Strength	Area Needing Improvement

#### **Basis: Statewide Assessment**

To prevent placement and to support reunification, the Department either contracts with providers or utilizes private insurance or MassHealth to provide an array of services for children and their families. The following programs/initiatives are examples of the types of services provided by the Department.

As of January 2001, the Family Based Services (FBS) system has been in place for one year. Family based services are defined as those services that prevent placement, strengthen families and promote/support reunification. Lead agencies and their Networks are responsible for providing a collaborative, community-based approach to service delivery utilizing DSS financial resources and knowledge in coordination with other funding sources, systems and services to address family needs in a comprehensive and efficient manner.

Family based services may be delivered either in-home or out-of-home or in alternative settings in order to achieve desired outcomes as articulated in the family's Service Plan. There are many very positive things going on in FBS - from an increase in direct and real family participation in their own service planning to creative service approaches, which clearly are shaped by the family's strengths/needs and the identified outcomes, sought.

Multidisciplinary Assessment Teams (MDATs) have been established in each Area Office to provide a comprehensive clinical assessment of a family's needs leading to the appropriate level and type of service provision. Family involvement in the MDAT meetings is encouraged. Services funded by the MDATs include mental health/trauma, domestic violence, and substance abuse evaluations; counseling; parent education and support; and summer camp memberships.

Since Spring 1999 DSS has worked with the DMA and the MBHP to develop several new residential service models to permit children in acute psychiatric settings who are ready for discharge but for whom no appropriate setting is available to leave the hospital. In addition, two new programs have been developed jointly with the Department of Mental Health for children with assaultive behavior. Mental health and substance abuse professionals provide evaluation, diagnostic and treatment services for children and their parents. Safe Recovery, the first of three programs funded by DSS, prioritizes admittance into their six to twelve month residential treatment program to mothers who have lost custody of their children or who are at risk of losing their children. At the end of FY 2000, Safe Recovery completed its third year of operation with encouraging results: while only 35% of women entered the program with custody of their children, 60% of children were reunified (a total of 17 children) with their mothers after participation.

In more than half of the Department's open cases, domestic violence is identified as a factor placing children at risk of out-of-home placement. Domestic Violence Specialists work alongside field staff to reduce these risks through safety planning and referrals to community-based domestic violence programs. They also work with law enforcement agencies and batterer's intervention programs to hold offenders accountable and provide appropriate services.

Parenting aides, support, and education are also available to guide and teach parents and improve family functioning. Supervised visitation services may be accessed by DSS to support visitation requirements.

The Department also has a number of service models targeted to the needs of adolescents, including the following:

- Bridge Homes for adolescents, which focus on assessment, while working intensively with the parents and accessing mediation services to support the teens returning home.
- CommonWorks Lead Agencies, which coordinate an array of aftercare services to meet individualized client and family needs in order to assist the youth in achieving their treatment plan goals. These services may be provided directly by the Lead Agency or purchased from community-based providers and include skill building, wraparound, support, respite, and tracking services, as well as individual or family therapy. The Commonworks Program also provides up to six months of aftercare services for youth discharged from residential placement. Aftercare services may also include assistance with arranging financial support, supportive housing, recreation and transportation, as well as linkages with educational, vocational, and advocacy programs. During FY'00, Commonworks Lead Agencies provided aftercare services to 281 youth discharged from placement. This represents a twenty-seven percent increase from FY'99 in the number of youth receiving aftercare services.
- Services designed to prepare youth for the process of moving from placement to independence and to strengthen their chances of leading productive lives within the community after discharge are called Independent Living Support services. The Department's Preparing Adolescents for Young Adulthood (PAYA) curriculum is often used to teach life skills and includes intensive individualized independent living skills assessment and training to youths.

The Department initiated the Challenge 2000 program to reduce or eliminate barriers to matching children who have a goal of adoption with those families who have been identified as potential adoptive homes. In addition, in October 2000, the Department created a budget of \$100,000 to facilitate and fund adoption home studies by out-of-state agencies.

#### **Basis: On-Site Review**

The area of service array was rated as a strength because the cases reviewed and the stakeholders interviewed confirmed that the Department has developed a comprehensive array of services to assess and address the needs of children and their families. Stakeholders in all three sites cited a variety of services as examples of the Department's success in meeting the needs of children and families. These services included the MDAT, strong efforts to address Domestic Violence issues, services available through the Family Based Services contracts, and the availability of flexible funding.

Stakeholders also noted particular strengths in the service area of each of the sites reviewed. For example, in New Bedford, stakeholders noted that Department staff arrange home-based services during off-hours to address the needs of working families. They also worked with the Housing Authority to obtain Section 8 housing certificates as a support to reunification. In Pittsfield, stakeholders noted effective coordination between the Department staff and law enforcement. They also spoke about attempts to strengthen the quality of substance abuse evaluations and to work collaboratively with programs such as AA. In Boston, stakeholders spoke about post-adoption services and PATCH. Reviewers in Boston were impressed with the philosophy and approach of PATCH, a partnership between the Department and a coalition to provide community and strength-based services to DSS families.

Some of the other services that were touted included Skill Builders, Parenting Partners, Community Connections, CommonWorks, DSS Youth Outreach Workers, Sexual Abuse Intervention Network teams, Child Advocacy Centers, Communities for People, and DARE foster homes.

However, in some cases, reviewers identified needs that were not met, and in particular, noted the lack of available/accessible mental health services and alcohol/drug in-patient treatment services. In addition, stakeholders identified a shortage of placement resources across the continuum of care. Especially noted was the need for specialized foster homes for children with attachment issues; placement options for adolescents, including placement resources for run-aways, particularly girls; residential care (substance abuse and behavioral treatment programs, in particular); and independent living arrangements. Stakeholders spoke about the long waiting lists for specialized foster care and the continued difficulty - even with the new service models - in accessing appropriate levels of care for adolescents discharged from hospitals.

Finally, stakeholders provided a comprehensive list of services needed to support and to assist the rehabilitation of families involved with the Department. These include: affordable housing; services for fathers; more culturally responsive service and bilingual treatment providers, including Creole and Spanish translation; services and placement resources to meet the needs of Tribal children; substance abuse evaluations, drug testing and in-patient treatment for adolescents; outpatient mental health services and mental health services for targeted populations; additional shelters for victims of domestic violence; additional parent skill building services; therapeutic after school programs; dental care for foster children; services for the hearing impaired; and informal community supports to families to prevent involvement or re-involvement with the Department.

## Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP.

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Strength	V	Area Needing	Improvement
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#### **Basis: Statewide Assessment**

The majority of supportive services mentioned in item 35 are available on a statewide basis. The Department plans for most of its programming on a statewide basis, with the opportunity for some customization at the Regional and Area levels.

#### **Basis: On-Site Review**

This item was rated as an area needing improvement because reviewers at all three sites noted access issues with a number of services. While the extent of the problem appears to be worse in some areas than others, primary among these needs were accessing mental health services, special education services, and substance abuse assessment and treatment services - especially for adolescents.

Stakeholders expressed concern about continued issues between DSS and the Departments of Mental Health (DMH), Mental Retardation (DMR), and Education (DOE) that create barriers to accessing needed services from these agencies. Some stakeholders claimed that DSS families who would have received services through DMH and DMR were denied direct access to these services once

they became involved with DSS. Others reported that the only way some families can gain access to mental health services for their children, particularly residential care, was to sign a voluntary placement agreement with the Department.

It was also reported that special education coordinators in some schools often resist cost sharing for special services and pose opposition to accepting troubled adolescents. Some stakeholders claimed that the approach by some schools to "informally" provide Special Ed services may be denying some children their rights and services guaranteed by an IEP.

In addition, stakeholders reported that other service gaps impacting timely access to services exist to varying degrees in a number of Massachusetts' communities. Stakeholders in all three sites noted significant waiting lists for specialized foster homes, after school programs, and some family support services, such as parenting programs that are age and culturally appropriate. Finally, stakeholders in each of the sites noted access issues with particular services either because of transportation, scheduling, or child care problems or because of long waiting lists. In Boston, limited access to transition and aftercare services was reported. In New Bedford, stakeholders noted that some providers no longer accept Mass Health. Other stakeholders reported that there is a lack of bilingual treatment providers. In the most rural of the three sites, stakeholders indicated that families from the area have limited access to certain services (e.g. detox services and drug testing.) They noted that some families need to travel outside the area to obtain services. For example, the only therapeutic residential setting for this area's children is in Springfield. Finally, the lack of public transportation in the Pittsfield area was noted to increase the difficulty of accessing services for some families.

## Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency.

_X_ S	Strength	Ar	ea Needing	g Improvement
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## **Basis: Statewide Assessment**

Many of the services provided by the Department are tailored to fit the needs of the family. The Department is moving to a strength-based model of service where family members are encouraged to participate in identifying their strengths and needs. The Department's programs and services reflect this approach. For example, Family Based Services are non-categorical, discrete activities based on family needs rather than pre-defined service models. The PAYA curriculum is another example; it is often used to teach life skills and includes intensive individualized independent living skills assessment and training for youths.

## **Basis: Onsite Review**

Item 37 was rated as a strength based on information from case record reviews and stakeholder interviews that indicated that the array of services available can generally be tailored to meet the particular needs of the children and their families. In some of the cases reviewed, services did meet the unique need of families; however, in other cases, they did not. Although these inconsistencies were found, reviewers noted that the Department had the capability to provide individualized services through programs such as Family

Based Services. According to stakeholders, team decision-making and community partnerships such as the MDAT and Community Connections also enhance the Department's efforts to individualize services.

Despite the strengths in this area, the need for better assessments and tailoring of services at varying intensity levels was found in some of the cases reviewed. In addition, it was also noted that the funding for services in placement cases tended to be more categorical and less family-focused than services provided to intact families. Finally, the generic (FamilyNet) service plan document was said to be an impediment to the individualization of needs and services.

#### IX. AGENCY RESPONSIVENESS TO THE COMMUNITY

Rating of Review Team Regarding Substantial Conformity						
Not in Substantial Conformity Substantial Conformity						
Rating	1	2	3 -X	4		

Item 38	consumer	nenting the provisions of the CFSP, the State engages in ongoing consultation with tribal representatives, es, service providers, foster care providers, the juvenile court, and other public and private child- and rving agencies and includes the major concerns of these representatives in the goals and objectives of the
_X_	Strength	Area Needing Improvement

#### **Basis: Statewide Assessment**

The Department, through its Community Connections initiative, has made progress in creating opportunities for community involvement in the arenas of prevention and family support, policy development and case management. The relationship that DSS has built with twenty communities through this Connections initiative provides a strong foundation for ongoing consultation and future work. The focus and challenge will be to formalize the link between the DSS Community Connections and other prevention efforts with the Family Based Services Networks in ways that integrate the work of DSS with the community while effectively meeting the needs of at-risk families.

Also, the KidsNet Program, run through the Massachusetts Society for the Prevention of Cruelty to Children, works in partnership with foster, kinship and adoptive families and the Department of Social Services to advocate for and support parents caring for foster and adoptive children. In addition, the DSS area office staff sit on child and family coalition steering committees and coalition members can typically be found on DSS area office advisory boards. Finally, the Department is also involved in on-going consultation with the courts on ASFA implementation.

#### **Basis: Onsite Review**

Rated as a strength, the Department was found to have a number of avenues for on-going consultation and community participation and feedback used in development of the CFS Plan.

These include partnerships such as Community Connections Coalitions, the Task Force for Foster Care Support, the DSS Area and Advisory Boards and the Foster Parent Support Groups. Also, most Area Directors are said to meet regularly with a wide variety of stakeholders including the judges, chiefs of police, mental health agency representatives, and domestic violence service providers. However, a tribal representative spoke strongly about the need for the Department to include the tribe in decision-making and consultation on a regular basis.

# Item 39. The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP.

X	Strength	Area Needing Improvement
	~	

## **Basis: Statewide Assessment**

Community Connections coalitions coordinate neighborhood-based networks of family support, involving families in planning and decision-making regarding deployment of resources and development of services to fill gaps.

In compliance with the Child Abuse Prevention and Treatment Act (CAPTA), the Department has established three citizen review panels to examine state policies, procedures, evaluate agency compliance with the State Plan and review cases of child fatalities and near fatalities that are a result of child abuse and neglect. While the specifics of the case are explored, another purpose of the panels' discussions is to identify any broader systemic policy or practice issues, which may need to be addressed by the Department.

#### **Basis: On-Site Review**

This item was rated as a strength primarily because stakeholders reported that there is an active DSS Advisory Board as well as local Area Boards and/or coalitions comprised of a broad-based group of stakeholders who review annual reports and proposals, advocate with legislators for funding, and make recommendations regarding child welfare issues.

# Item 40. The State's services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population.

	Strength	X	Area Needing	Improvement
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#### **Basis: Statewide Assessment**

One of the Department's program goals for the current fiscal year is to increase collaboration with other state agencies and organizations to ensure coordination and appropriate service provision for children and families of the Commonwealth. In a major effort to improve coordination and integration of services to seriously emotionally disturbed children and adolescents and their families, DSS meets regularly with colleagues from other federally assisted programs such as the Department of Mental Health, the Division of Medical Assistance and the Mass. Behavioral Health Partnership. This collaboration has led to numerous innovative projects benefiting children and families.

In addition to these collaborative efforts, the Department is also engaged in the following activities:

- Coordination of the Sexual Abuse Intervention Network Teams with District Attorneys and other law enforcement members;
- Coordination of Substance Abuse Programming with the Department of Public Health;
- Established a committee of senior officials from other state agencies, the legal system, and the courts to review and make recommendations regarding the CHINS statute; and
- Establishing school-based community programs with the Department of Education.

## **Basis: Onsite Review**

Rated as an area needing improvement, reviewers and stakeholders noted ongoing coordination issues between DSS and DMH, DMR, and DOE that are negatively impacting families' access to the services of these agencies. While reviewers found that DSS has a

number of approaches to coordinating services with other federally funded programs, stakeholders emphasized the need for greater collaboration, sharing of information across systems, and cost sharing among these agencies. Stakeholders acknowledged that several initiatives to improve and expand service coordination are underway, including a number of projects between DSS and DMH and DOE; however, the impact of these initiatives – while promising - has not been sufficient to allay their concerns.

## X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

Rating of Review Team Regarding Substantial Conformity						
Not in Substantial Conformity  Substantial Conformity						
Rating	1	2	3 - X	4		

Item 41.	41. The State has implemented standards for foster family homes and child ca	are institutions, which are reasonably in
	accord with recommended national standards.	

X	Strength	Area Needing Improvement
4.	200000000000000000000000000000000000000	incu i tecume improvement

## **Basis: Statewide Assessment**

The Department strengthened licensing/approval standards for DSS Foster/Adoptive Families in September 1998. Prior to that, the Office of Child Care Services set standards. After being determined eligible to apply, families complete an application and begin a family resource assessment during which DSS evaluates whether the family and home meet the Department's standards. The applicant must also complete the DSS-approved foster/adoptive family pre-service training program. Following successful completion of the assessment and training, all prospective foster/adoptive parents enter into an agreement with the Department, which specifies the type of approval received: kinship, child-specific, or unrestricted. Foster homes are reassessed on an annual basis and re-licensed every two years. Licensing requires a more in-depth evaluation than the re-assessment. In addition, DSS Family Resource Workers are required to visit each assigned foster home at least every two months and to document these visits in FamilyNet.

When placement into a community residential care facility is in a child's best interests, the Department selects from facilities that are licensed or approved by the State Office of Child Care Services. The facility must also have a valid DSS Community Residential Care Purchase Agreement in place.

The Department also runs a program that conducts periodic evaluations of all community residential providers under contract. The evaluation includes site visits to the facility. The Department maintains a written record of the evaluations with a copy provided to the director of each facility.

#### **Basis: On-Site Review**

This item was rated as a strength primarily because stakeholders expressed the opinion that the standards for foster family homes and child care institutions are comprehensive and appropriate. Stakeholders also noted that a new set of child safety guidelines has been established that provides additional safety precautions with regard to foster homes with swimming pools and/or pets.

A few stakeholders reported that there is a high level of scrutiny of foster homes, including a biannual re-licensing study by a regional Licensing Worker and bimonthly visits by a Family Resource Worker. In addition, the Family Resource Worker re-evaluates the foster homes in the non-licensing year. While stakeholders acknowledged that these efforts are contributing to the safety of children in placement, a few stakeholders feel that this high level of inspection is intrusive and may have a negative impact on foster parent recruitment.

## Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.

X	Strength	Area	Needing	Improv	ement
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## **Basis: Statewide Assessment**

The Standards described above are applied by policy and regulation to all foster and adoptive homes and child care institutions that serve children in DSS care or custody.

**Basis: On-Site Review** 

**Rated as strength**, stakeholders reported that all foster family homes are held to the same standards. Reviewers, however, received mixed feedback about the participation of relative foster parents in the required pre-service training.

Item 43	approving foster	es with Federal requirements for criminal background clearances as related to licensing or care and adoptive placements and has in place a case planning process that includes provisions for fety of foster care and adoptive placements for children.
_X_	Strength	Area Needing Improvement
Basis: S	Statewide Assessme	nt
backgro This pol criminal foster ar worker,	und record checks or icy has been strictly record check, the un id adoptive parents h	Central Office unit to implement the Executive Office of Health and Human Services' policy requiring all new staff hires, foster parents and every member of a foster family household over the age of 14. enforced and is applied equally by the Department and by its contracted agencies. As a part of the nit also searches the Department's database for prior involvement with DSS. The policy also requires that have a criminal record check done as part of the annual re-evaluation process. The DSS family resource her Departmental staff have the authority to request a criminal background record check as part of their do so.
Some of	fenses may be recon	hed guidelines around what offenses will disqualify a person from becoming a foster or adoptive parent. sidered after a certain number of years after the offense and may require a waiver by the DSS Regional e mandatory disqualification for life.
Basis: (	On-Site Review	
includin foster or requiren	g relatives and emer adoptive parent has nents for serious offer	olders reported that criminal records checks were completed on all potential foster and adoptive homes, gency placements. In addition, criminal records checks are conducted in other State(s) if a prospective lived out of State in recent years. Stakeholders noted that no exceptions are made to the criminal records enses. Older, minor offenses may be waived but only at the discretion of the Regional Director. Some Boston region - expressed the opinion that these standards were too high and/or rigidly applied.
Item 44	-	place a process for ensuring the diligent recruitment of potential foster and adoptive families that and racial diversity of children in the State for whom foster and adoptive homes are needed.
_X_	Strength	Area Needing Improvement

**Basis: Statewide Assessment** 

The Department aggressively recruits foster and adoptive parents, utilizing three recruiters in each of the six regions of the State. The Department coordinates its statewide recruitment efforts with other agencies in the Commonwealth, including the Massachusetts Adoption Resource Exchange (MARE), which coordinates a "Black Child Festival" and a "Latino Festival".

Specific populations are targeted at various times, as appropriate, including certain ethnic and racial groups. The Department currently has 6,048 foster parents across the State. Of these, 969 (16%) identify themselves as Black; another 16% identify themselves as Hispanic/Latino. The census reports that the Massachusetts population as a whole contains 5% Black and 4.8% Hispanic persons, so the DSS foster parent population reflects a significantly higher percentage of minority representation.

The Department has a number of services designed to support existing foster and adoptive families. These include training, support groups, information and referral and some respite services. Every DSS foster parent has an assigned Family Resource Worker who is available to provide support, encouragement and advocacy for the foster parent(s).

In addition, each DSS Region has a KidsNet Program Director and Program Assistant who are available to assist and support foster parents during work hours. A Helpline is available evenings and weekends to provide needed information and support services.

#### **Basis: On-Site Review**

This item was rated as strength primarily because stakeholders reported that the Department has a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed. According to these stakeholders, overall recruitment efforts for both foster and adoptive parents are creative and extensive, including the use of private and faith—based organizations, multiple types of media, high profile events, a corporate advisory board, and a website. Stakeholders noted that the Regional Offices are responsible for adoptive home recruitment and has responded to the greater diversity in the region with targeted recruitment, for example in Hispanic newspapers, Spanish language radio stations, and community fairs. In addition, to increase the pool of potential foster/adoptive parents, the Department became more open to non-traditional families as placement resources. Some stakeholders also spoke about a recent initiative that resulted in a very useful resource book for prospective families that includes information on key contacts, the licensing and placement process, etc.

However, a few stakeholders voiced concerns about a lack of focus and continuity in recruitment efforts caused by shifts in responsibilities between central and regional/area offices. Some stakeholders also noted a need for better use of current foster and adoptive parents as recruiters. Finally, stakeholders spoke of a need for the Department to increase its efforts in recruiting Native American families and to better plan for the placement needs of Native American children.

Some specific barriers to recruitment/retention of foster, kinship and adoptive homes were said to be the need for increased day care availability for two-parent working foster families, the current income requirements for potential families, the feeling that foster parents are always under a "microscope," and limited availability of support services outside of normal working hours.

It was noted that there was a major turnover of foster homes three years ago, and for some time, too many children were being placed out of the local area. The Area Office Directors asked the community for help and many collaborative recruitment efforts were launched. The Task Force for Foster Care Support, sponsored by Community Connections in New Bedford, was cited for the good work that it is doing in providing training, advocacy, support and service development for the foster care community in that area.

Foster Parent Liaisons, who are chosen by their peers to act as liaisons between the foster parents and the agency in the Area Offices, were said to be effective in helping to support foster parents and to resolve issues before they escalate. Moreover, reviewers heard that the Department increased its level of support to foster and adoptive parents through partnerships with private agencies, such as those operating KidsNet and the Adoption Crossroads programs. However, foster parents reported that respite through KidsNet is difficult to access due to a complex authorization and reimbursement process. In addition, there is also a perception among some stakeholders (internal as well as external) that the level of support and services are greater for unrelated foster homes than kinship homes.

## Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children.

_X	Strength	A	rea Need	ling	Improvement
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#### **Basis: Statewide Assessment**

In October 2000 the Department created a budget of \$100,000 to facilitate and fund adoption home studies by out-of-state agencies. These funds are available to contract with licensed private agencies in other states to do home studies on families that have expressed an interest in a child in the care of DSS.

With an upgrade to the DSS FamilyNet system, the Department developed the ability to create "Child and Family Profiles." Now fully functional and accessible online, these documents can be completed and sent to others as attachments to an e-mail message. As a result, information on waiting families and children can be exchanged expeditiously on a statewide basis, further enhancing the matching process. With the rapidly increasing use of the Internet, access to children's profiles goes far beyond state boundaries. A workgroup has been established to create protocols to minimize or eliminate in-state geographic barriers to making pre-adoptive placements. These protocols will be issued in early 2001, and will outline agreements between area offices around the sharing of case responsibility, family resource assignment, transportation arrangements and visitation. The Department is also in the process of publishing a guide for social workers who do out-of-state placements.

## **Basis: On-Site Review**

**Rated as a strength** because the State was found to have a process for the effective use of cross-jurisdictional resources. Reviewers saw cases in which children were placed in adoptive and pre-adoptive homes in a number of other states.

Stakeholders reported that children available for adoption but not been placed with a prospective permanent family resource are referred to the Regional Adoption Unit. Reviewers were told that this unit identifies and promotes placement with appropriate adoption resources anywhere in the State. Also, stakeholders noted that recent system changes foster better use of interjurisdictional resources, such as MARE. In addition, reviewers heard that the Department has revised matching protocols, which has improved collaboration among private agencies and has facilitated the sharing of information on waiting children and prospective adoptive families. Finally, most stakeholders gave very positive feedback on "Matching" events and especially noted those sponsored by a private business (Jordan's Furniture). The consensus was that these events have greatly enhanced the Department's capacity to connect waiting children with prospective parents in other jurisdictions.

Stakeholders noted that they are receiving clear messages about the need for and benefit of cross-jurisdictional placements from DSS leadership. However, because of issues with visitation, negative experiences in getting home studies completed, and difficulty negotiating subsidies and finalizing adoptions through the ICPC, stakeholders still expressed concerns about these placements.

## XI. DETERMINATION OF SUBSTANTIAL CONFORMITY

For each outcome and systemic factor listed below, mark "Y" where the State is determined to be in substantial conformity and "N" where the State is determined not to be in substantial conformity. For each outcome or systemic factor marked "N," place a check beside the performance indicator, listed by item number in this form, that has been determined to be an area needing improvement.

Safety	Child and Family Well-Being	Y Quality Assurance System
N Outcome S1	N Outcome WB1	Item 30
<del>_</del>	<u> </u>	Item 31
Item 1	X Item 17	
X Item 2	XItem 18	Y Training
<del></del>	Item 19	&
N Outcome S2	Item 20	Item 32
<del>_</del>	<del></del>	Item 33
X Item 3	N Outcome WB2	Item 34
Item 4	<del>_</del> _	<del></del>
<del></del>	X Item 21	Y Service Array
Permanency	<del>_</del> <del>_</del>	
v	N Outcome WB3	Item 35
N Outcome P1	<del></del>	Item 36
<del>_</del>	X Item 22	Item 37
X Item 5	XItem 23	<del></del>
X Item 6	<del>_</del> _	Y Agency Responsiveness to the
XItem 7	Systemic Factors	Community

XItem 8		
XItem 9	Y Statewide Information System	Item 38
X Item 10		Item 39
<del>_</del> _	Item 24	Item 40
Y Outcome P2		<del></del>
	N Case Review System	Y Foster and Adoptive Paren
Item 11		Licensing, Recruitment, and
Item 12	X Item 25	Retention
Item 13	Item 26	Item 41
Item 14	X Item 27	Item 42
Item 15	Item 28	Item 43
Item 16	Item 29	Item 44
<del></del>	<del></del>	Item 45