PINNACLE PLAN MEASURES

SEMI-ANNUAL SUMMARY REPORT

August 20, 2020

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Executive Summary Regarding COVID-19
Child Welfare Services Director Deborah Shropshire

The first half of 2020 brought unprecedented challenges to social and health systems around the world, and Oklahoma's child welfare system was not spared. In the Core Strategy Report issued in May 2020, Oklahoma Human Services (OKDHS) Child Welfare Services (CWS) detailed its emergency efforts to respond to the COVID-19 pandemic through telework; virtual visits; financial and relational support for resource parents and congregate facilities; near constant communication with stakeholders around public health concerns; communicating about COVID-19 and emergency system changes impacting children and families; and ensuring virtual access to health, behavioral health, education, and court processes.

Very quickly our attention moved from responding to the disaster of the SARS-CoV-2 virus to learning to live with it, recognizing that there is a need to balance the public health challenges brought by the virus against the significant social challenges experienced by children and families during this time, many of which also pose a different kind of health and safety risk. In May 2020, restrictions on in-person visits between parents and children were eased, and by June 2020 Child Welfare (CW) resumed most face-to-face activities conducted by CW specialists. This was response to the safety and emotional needs of children as well as improvements in the public health tools needed to manage the virus. Armed with better public health information, CWS began crafting a more strategic approach to operating a child welfare system during the pandemic. This approach included modifying in-person activities with high risk populations, such as congregate facilities or families who identified as high-risk. It also included regular review of public health data and consultation with health department officials to target communities where COVID-19 outbreaks were occurring through community spread. For example, while most of Oklahoma experienced a low rate of new COVID-19 cases during May and June 2020, Texas County, located in the Oklahoma panhandle, was the site of a large outbreak that originated in a meat-packing plant. Nearly five percent of the population ultimately was infected. For that county, CWS modified its protocols so that only emergent in-person encounters were approved, such as initiating Child Protective Services investigations; county CW staff was not allowed to make visits outside of the county; and no children from outside of the county were placed in Texas County foster homes until the outbreak was contained in mid-June 2020. In another example, Comanche County experienced a spike in COVID-19 cases due to an outbreak at its county jail. This outbreak was largely not due to community spread, so in-person caseworker and parent-child visits continued, but an addition to health screening questions prior to visits included asking about any exposure to the jail so that close contact with high-risk persons could be modified. While both the experience of and public guidance around the COVID-19 pandemic will continue to evolve, CWS intends to maintain a more surgical approach to its own system, maintaining high quality child welfare practice while balancing safety and support of its workforce and the communities and families served by CWS.

The fall of 2020 brings a new set of challenges – ones CWS is only now beginning to understand and address. July 2020 saw record increases in COVID-19 cases across many parts of Oklahoma and the southern half of the United States. Statewide emergency orders to isolate ended and have not returned in the same sweeping format as had occurred in the spring. Schools now wrestle with how to approach the fall semester, with their responses and plans varying widely but little true experience as to how COVID-19 will impact in-person learning. Despite all that is still unknown, CWS identifies itself as a first responder to child safety and family well-being and remains committed to in-person parent-child and caseworker visits as much as possible under appropriate health safety protocols. CWS will use virtual encounters as a way to augment engagement, and while many activities can occur virtually, CWS must continue to support staff, parents and resource parents in accessing the technology and platforms needed to participate fully, and must also recognize that, at times, in-person team meetings with families are more appropriate and may positively influence decision-making and engagement of families. There is also an ongoing heightened need to provide tangible support for such things as child care and other safety net resources, and to ensure that families and children can adequately connect with service providers.

Above all else, CWS takes a stubborn position against allowing a virus to disrupt the future trajectory of children and

their families, and commits to tireless creativity in support of staff, children, families, and partners during this historic moment.

Deborah Shropshire, M.D.
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Oklahoma Human Services

Oklahoma Human Services (OKDHS) is committed to improving the safety, permanency, and well-being of children served by the child welfare (CW) system. The Pinnacle Plan is the roadmap and public reporting is critical to ensuring transparency and accountability. The OKDHS Metrics, Baselines, and Targets Agreement - 3/7/13 outlines how the outcomes and other indicators are measured and reported. Monthly and semi-annual reports are made available to the public.

Oklahoma is committed to good faith efforts and positive trending toward the goals outlined in the Plan. Twice per year OKDHS provides an analysis in which the agency outlines: (1) the strategies employed to improve performance in the areas identified in the Compromise and Settlement Agreement; and (2) the progress toward improving performance. The report includes an update regarding performance improvement strategies implemented to date and, when possible, an assessment of the effectiveness of those strategies. Each semi-annual report addresses seven performance areas comprised of 27 specific metric elements. The seven areas are: Foster Care Safety, Counts for New Foster Homes, Worker Contacts, Placement Stability, Shelter Usage, Permanency Timeliness, and Workloads.

The Compromise and Settlement Agreement requires the Co-Neutrals to determine the extent to which OKDHS makes good faith efforts to achieve substantial and sustained progress toward each Target Outcome. This report summarizes the most significant strategies implemented for each Target Outcome and, where possible, draws connections between those efforts and progress toward the Target Outcomes established in the Metrics, Baselines, and Targets Agreement.

Measurement Notes
OKDHS was the first state agency in the nation to have a federally-approved statewide automated child welfare information system (KIDS) and continues to strive for high quality data. **The findings in this report are subject to change due to ongoing data entry, changes in policy, changes in practice, and changes in definitions, or data quality issues that may be discovered through the process.**

Organization of the Report
To align the metrics in this report with the elements of a continuous quality improvement (CQI) process, OKDHS believes it is important to clarify how the various metrics relate to the levers that OKDHS can potentially influence to improve outcomes for children in care.

The CQI process is based on the premise that improving outcomes for children requires some degree of system reform and system reform involves changing one or more elements of the traditional way of doing business: (1) the process of care, (2) the quality of care, and (3) the capacity to deliver care. Process changes relate to how the work is done; quality changes pertain to how well it is done; and capacity changes pertain to the tangible resources the agency devotes to delivering care. CQI presumes that a combination of these three types of reforms will lead to improved outcomes (i.e., safety, permanency, and well-being) for children.

To clarify how the various Settlement Agreement metrics relate to these particular aspects of OKDHS' ongoing reform efforts, the report begins with some contextual information and is then organized by metric type:

SECTION 1: Contextual information. This section provides a general description of entry and exit trends since the enactment of the Settlement Agreement and trends in the demographic profile of the children captured during the history of reporting periods.

SECTION 2: Child outcomes. This section reports on metrics related to safety and permanency outcomes for children in care. These include indicators pertaining to **maltreatment in care, frequency of worker contacts**, **placement stability, shelter placement,** and **permanency**.

SECTION 3: Capacity indicators. This section reports on metrics designed to measure the capacity of OKDHS to deliver foster care services. These include metrics pertaining to **foster home development** and **caseload/workload.**

SECTION 1. Contextual Information

Entry and Exit Trends

The Oklahoma Human Services (OKDHS) began Pinnacle Plan implementation in July 2012, six months after the Settlement Agreement was reached. In July 2012, just over 9,000 children were in care, and this number continued to rise before peaking at 11,303 in October 2014. In November 2014, the number started to decline for the first time since Pinnacle Plan implementation began. As of June 2020, the number of children in care was 7,730, a 31.6 percent decrease since October 2014, which is a continued reduction in the number of children in care. Section 1, Graph 1 shows the number of children removed and the children who exited care during each month from April 2019 through June 2020. In federal fiscal year (FFY) 2020, the overall number of children exiting care outnumbered the number of children removed during the 12-month period.

Removals and Exits by Month - Statewide

Data Source: KIDS Data *Run Date for the report is the 5th of the month for prior month's data. This data is subject to change due to the short lag time.
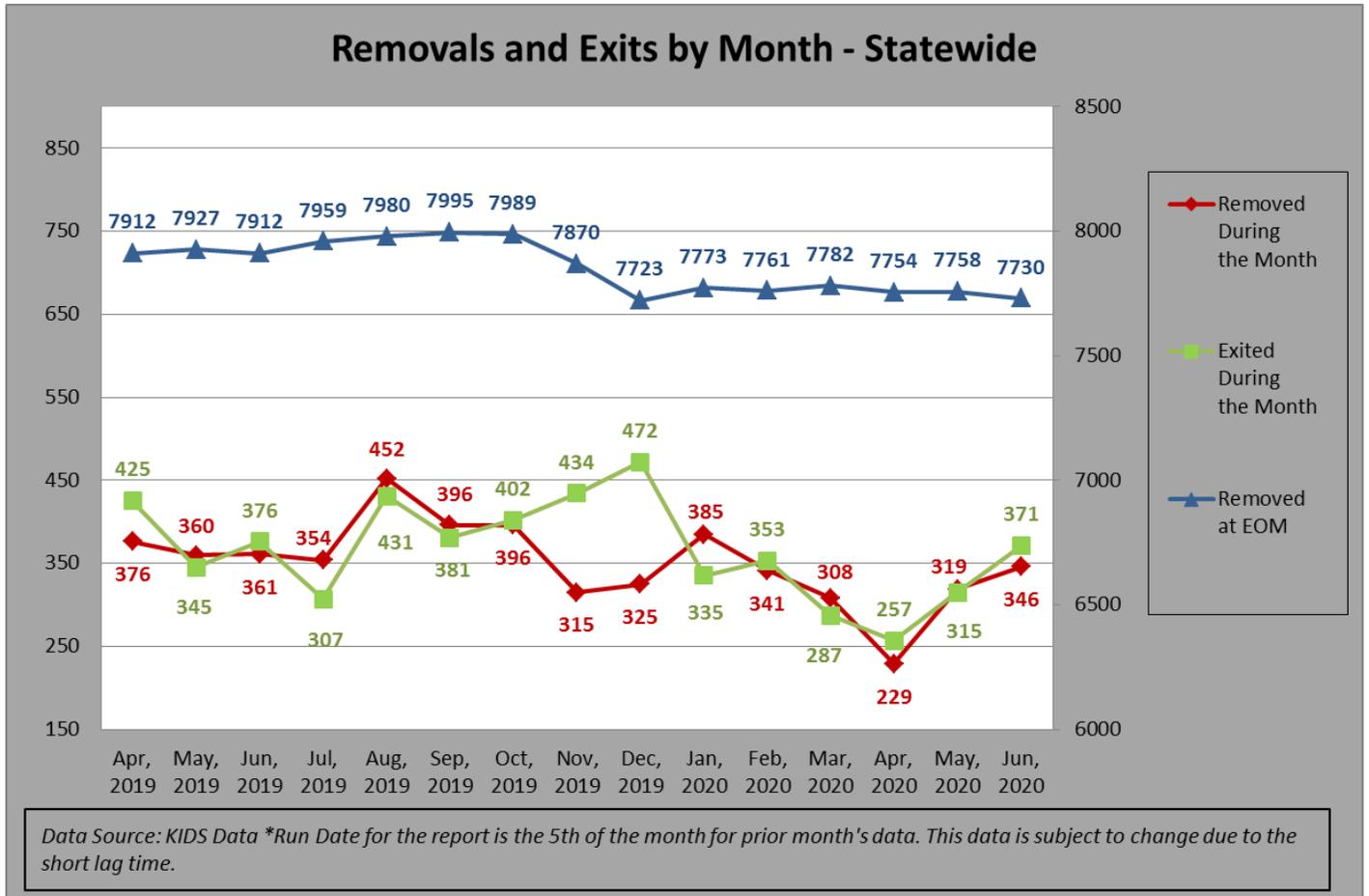
Section 1, Graph 1

Demographic Information by Reporting Period

During the reporting period of April 1, 2019 through March 31, 2020, according to Adoption and Foster Care Analysis Reporting System (AFCARS), OKDHS served 12,659 children. The "served" population includes all children who were in care for at least 24 hours. This number also includes children in tribal custody. For the purposes of Pinnacle Plan reporting, children in tribal custody are not included in the measures, except for the Absence of Maltreatment in Care measure that includes all children served. This leaves a served population of 12,328 excluding children in tribal custody.

Section 1, Charts 1, 2, and 3 show the children's demographics by age, race, and placement type. For race, when a child claims more than one race, the child is counted in the Multi-Race category. Hispanic or Latino origin is no longer counted as a primary race.

Total Children Served in Out-of-Home Care
By Age Groups - Apr. 1, 2019 - Mar. 31, 2020

15.53%

20.77%

32.21%

31.49%

- ☐ 0-1 Years
- ☐ 2-5 Years
- ☐ 6-12 Years
- ☐ Over 13 Years

Data Source: KIDS Data
Pinnacle Context Data

Section 1, Chart 1

Total Children Served in Out-of-Home Care
By Race - Apr. 1, 2019 - Mar. 31, 2020

8.46%

34.20%

47.78%

9.42%

- ☐ White
- ☐ African American
- ☐ Multi-Race
- ☐ Native American

Asian and Pacific Islander were omitted as they total <0.2% of the
population. Hispanic is not included in primary races as it is an ethnicity.
18.36% of the children identified an ethnicity of Hispanic.

Data Source: KIDS Data
Pinnacle Context Data

Section 1, Chart 2

Placement Days of Children in Out-of-Home Care by Placement Type - Apr. 1, 2019 - Mar. 31, 2020

Legend:
- CW Foster Family Care
- CW Supported Homes
- Kinship Relative Care
- Kinship Non-Relative Care
- Therapeutic Foster Care
- Other Foster Family Care
- Congregate Care
- Other Placements

Data Source: KIDS Data
Placement Days by Resource Type

Section 1, Chart 3

SECTION 2. Child Outcomes

1.1: Absence of Maltreatment in Care by Resource Caregivers

Operational Question

Of all children served in foster care during the 12-month reporting period, what percent were **not** victims of substantiated or indicated maltreatment (abuse or neglect) by a foster parent or facility staff member?

Data Source and Definitions

For the semi-annual report, Oklahoma uses the logic from the official federal metric. This measure is a 12-month period based on the federal fiscal year (FFY) of October 1 through September 30. Oklahoma uses the two official state-submitted Adoption and Foster Care Analysis Reporting System (AFCARS) 19B & 20A files combined with a non-submitted annual National Child Abuse and Neglect Data System (NCANDS) file, covering AFCARS 19B & 20A periods, to compute the measure. The NCANDS file used for this report is calculated the same as the file submitted to the federal government, which includes running the data through the official validation tool. However, the official submission to NCANDS occurs only once annually and is due yearly by January 31, so NCANDS data is subject to change until that date.

- Counts of children not maltreated in foster care (out-of-home care) are derived by subtracting the NCANDS count of child maltreatment by foster care providers from the AFCARS count of children placed in out-of-home care during the reporting period.
- This metric measures performance over 12 months and differs from the monthly data collected from KIDS.
- The federal metric only counts a victim once during the FFY, even if a child is victimized more than once in the course of a year. In the monthly report, a victim is counted for every substantiated finding of abuse or neglect.
- NCANDS does not include any referral when the report date and completion date do not both fall during the same FFY reporting period.
- The total population in this measure includes tribal custody children, as these children are included in the

federal submission to NCANDS.

This measure includes all children placed in traditional foster care homes, kinship homes (relative or non-relative), therapeutic foster care homes, group homes, shelters, and residential facilities. Oklahoma began including children substantiated for maltreatment by the Office of Client Advocacy (OCA) in institutional settings in March 2013.

## Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2019 through 3/31/2020.

Numerator: The number of children served in foster care from 4/1/2019 through 3/31/2020 who did not have any substantiated or indicated allegations of maltreatment by a foster parent or facility staff member during that period.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014	15,605	15,806	98.73%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014	16,066	16,272	98.73%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015	16,410	16,640	98.62%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015	16,543	16,808	98.42%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016	16,323	16,548	98.64%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016	16,037	16,244	98.73%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017	15,571	15,753	98.84%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017	14,929	15,113	98.78%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018	14,229	14,405	98.78%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018	13,754	13,901	98.94%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019	13,317	13,441	99.08%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019	12,995	13,082	99.33%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020	12,556	12,659	99.19%
Target				99.68%

Section 2, Table 1.1-1
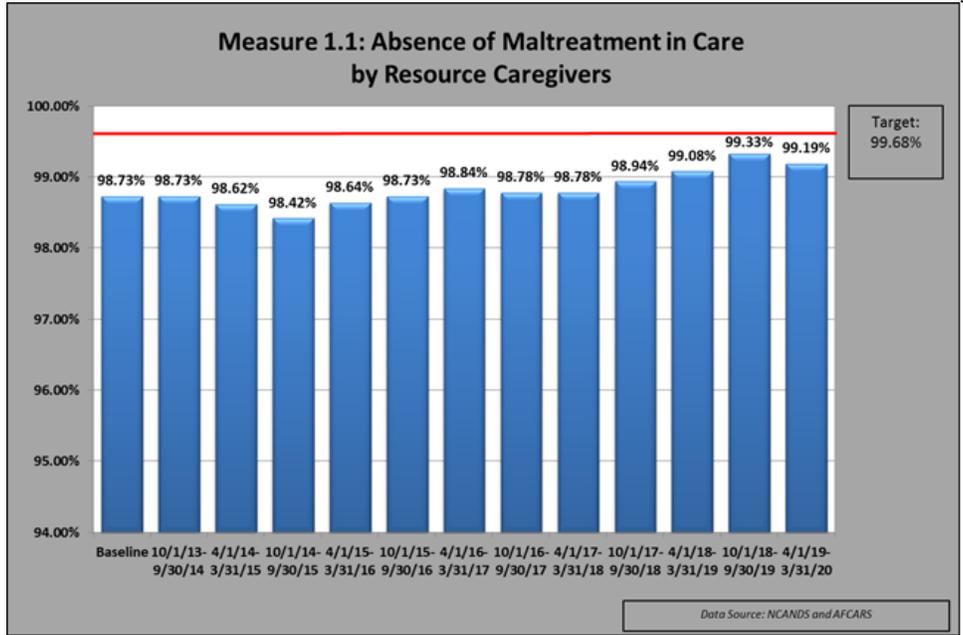
Section 2, Graph 1.1-1
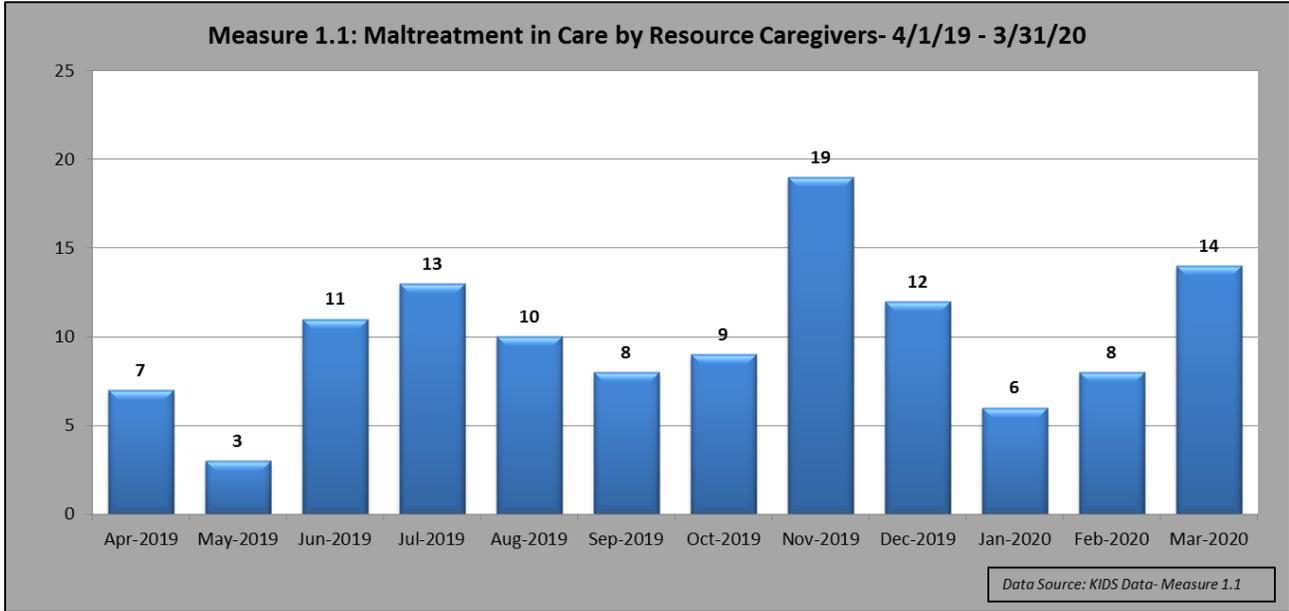
Section 2, Graph 1.1-2

| Children in Out-of-Home Care
April 1, 2019 - March 31, 2020 | | | | | | Ending 3/31/20 |
Placement Type	Placement Days	Percent	Placement Type	MIC	Percent	MIC Rate per 100,000 days
CW Foster Family Homes	566,904	20.7%	CW Foster Family Homes	30	25.0%	5.3
CW Foster - Supported Homes	468,406	17.1%	CW Foster - Supported Homes	5	4.2%	1.1
Kinship Foster Care - Relative	953,474	34.8%	Kinship Foster Care - Relative	25	20.8%	2.6
Kinship Foster Care Non-Relative	336,601	12.3%	Kinship Foster Care Non-Relative	22	18.3%	6.5
Therapeutic Foster Care Homes	46,471	1.7%	Therapeutic Foster Care Homes	3	2.5%	6.5
Congregate Care	188,086	6.9%	Congregate Care	35	29.2%	18.6
Other Foster Family Care	157,676	5.8%	Other Foster Family Care	0	0.0%	0.0
Other Placements	23,151	0.8%	Other Placements	0	0.0%	0.0
Total	2,740,769	100.0%	Total	120	100.0%	4.4
Data Source: Pinnacle MIC Data for 12 months ending 3/31/20; Run Date: 6/1/20 and Placement Days by Resource Type; Run Date: 4/5/20						

Section 2, Table 1.1-2

Commentary

This indicator is based on the federal measure for maltreatment in care and produces representative information about the incidence of maltreatment in care (MIC). For NCANDS reporting, 103 victims were reported.

For the reporting period April 1, 2019 – March 31, 2020, 120 substantiations of maltreatment while in out-of-home care were reported in the monthly MIC Pinnacle Plan Measure. These 120 victims were included in 78 separate referrals: 50 referrals for children in foster care and 28 referrals to the OCA. Of the 120 victims, 85 were placed in foster care settings and 35 were placed in congregate care settings:

Foster Family Care Types: 85 Victims
- 30 children were in a child welfare (CW) Foster Family Home (35.3%);
- 25 children were in a Kinship Foster Care - Relative Home (29.4%);
- 22 children were in a Kinship Foster Care Non-Relative Home (25.9%);
- 5 children were in a CW Foster-Supported Home (5.9%); and
- 3 children were in a Therapeutic Foster Care (TFC) Home (3.5%).

Congregate Care Placement Types: 35 Victims
- 22 children were in a Level Resource Facility (B, D, D+, or E) (62.9%);
- 8 children were in a Psychiatric Residential Treatment Center (22.9%);
- 2 children were in a Detention Center (5.7%);
- 2 children were in a Non-Oklahoma Human Services (OKDHS) Operated facility (5.7%); and
- 1 child was in a Youth Services Shelter (2.9%).

The difference between the two measures is explained in Data Source and Definitions.

FOSTER CARE

Screen-Out Consultations on Out-of-Home Referrals			
Screen-Out Referral Month	Total Screen-Out Referrals	Screen-Out Referrals with Screen-Out Consultation	% in Compliance
Baseline (Sept-Nov 2016)	312	122	39.1%
Oct-19	60	60	100.0%
Nov-19	39	39	100.0%
Dec-19	60	60	100.0%
Jan-20	60	60	100.0%
Feb-20	67	67	100.0%
Mar-20	52	52	100.0%
TOTAL	338	338	100.0%

Data Source: YI790B - Out-of-Home Screen-Out Detail; Run Date: 6/18/20

Section 2, Table 1.1-3

10-day Staffing on Out-of-Home (OOH) Investigations			
Investigation Closure Month	Total Children in OOH Referrals	Children with 10-day Staffing	% in Compliance
Oct-19	89	89	100.0%
Nov-19	92	92	100.0%
Dec-19	81	81	100.0%
Jan-20	81	81	100.0%
Feb-20	102	102	100.0%
Mar-20	125	125	100.0%
Total	570	570	100.0%

Data Source: YI751 - Out-of-Home Investigations; Run Date: 6/18/20

Section 2, Table 1.1-4

Statewide Automated Child Welfare Information System (SACWIS)/KIDS

Several WebFOCUS reports continue to be utilized by Foster Care and Adoptions (FC&A) management to inform and guide practice critical to reduction of maltreatment in care. The YI790B Out-of-Home (OOH) Screened-Out Referrals report contains screened-out referrals in the last 12 months; this report highlights when a screen-out consultation does not include required approvals for each responsible CW specialist and is noted as incomplete. Resource family partner (RFP) liaison supervisors conduct screen-out consultations for supported foster homes, monitor the YI790B report, and share information with RFP agencies, as applicable. FC&A programs staff began sending the YI790B report to Resource supervisors and field managers on a bi-weekly basis in February 2020. This report assists with timely documentation and follow-up to ensure the screen-out consultation occurred and safety was assessed.

The YI025 Child Protective Services (CPS) Referral and Written Plan of Compliance (WPC) for Open Resource Homes report and progress report/scorecard is sent out monthly to Resource staff. The FC&A field deputy director and field managers review the information and use it to monitor trends and practice in the field. The YI025 report contains all open resource homes with a current or previous referral(s) and/or WPC. It also provides a totality perspective of each resource's overall referral count, referral dispositions, and WPC count. For easy identification, the report also highlights when a resource home has an overdue WPC. The FC&A RFP field administrator reviews and monitors this report as well for the RFP supported foster homes.

The YI043 WPC Summary report continues to provide WPC trend information. The report includes monthly data and a current state fiscal year count of all WPCs for foster care resources, along with closed resources. The report also features the number of new WPCs created monthly and all resources with an open WPC that subsequently have or had an open investigation. The report provides statewide, regional, and agency specific trends to further guide practice by providing a proactive approach to reducing MIC.

During this reporting period, planning and development continued on the project to track resource exception requests and policy violations in KIDS, which is set to release October 2020. The release was scheduled for August 2020 but delayed due to the COVID-19 pandemic. Adding resource exception requests and policy violation tracking in KIDS will help CW staff with appropriate follow-up and easily identify practice trends. An additional KIDS enhancement is set to release in October 2020 that will provide details on the reason a WPC was implemented, as well as congregate data to inform practice change.

Screen-Out Consultations
Screen-out consultations consistently maintained a compliance rate in the upper 90 percent range in previous reporting periods. However, the percentage of screen-out consultations completed increased to a 100 percent completion rate for this reporting period. From October 2019 to March 2020, all 338 required screen-out consultations were completed as seen in Section 2, Table 1.1-3. In the previous reporting period, a slight decline was due to advance notice not being provided to staff to complete documentation and correct errors. The report was sent by FC&A programs during this reporting period to provide staff an opportunity to ensure accurate documentation for those showing as incomplete. FC&A programs will continue to send follow-up notification with field staff in the future.

CPS programs staff continues to review every OOH screened-out referral to ensure policy guidelines are adhered to in the disposition process. KIDS also continues to capture the review process when CPS programs staff document if their office concurs with the screened-out disposition. When CPS programs staff does not concur with the referral's disposition, programs staff overrides the original disposition and assigns it in KIDS for investigation.

During an MIC review completed in January 2020, a process change for RFP and TFC programs was initiated to ensure timely follow-up for concerns identified during investigations and/or screen-out consultations. The review revealed the follow-up by the Child Welfare Services (CWS) RFP and TFC units, and private agencies was not always sufficient. To address the issue of insufficient follow-up and documentation by a RFP or TFC agency, practice change was implemented in January 2020. When a concern is noted through a screen-out consultation, a 10-day staffing, or any other process or staffing, CW staff in the RFP unit or TFC programs provides the agency with a deadline for the concern to be addressed with the family and the outcome reported back to CWS. The deadline provided to the agencies is within 10-calendar days of notice of the concern. The agency's follow-up on noted concerns is tracked by both RFP and TFC programs staff and documented in the KIDS Resource.

The RFP unit implemented monthly safety calls in February 2020 to provide improved oversight and assistance to agency partners. The monthly safety calls' goal is to ensure timely follow-up on potential safety issues identified in a foster home. Resources with a recent screened-out referral, investigation, active resource alert, overfill, past due annual update, active WPC, or general ongoing concerns are discussed during the call. The agency partner discusses the progress towards resolving potential safety issues and collaborates with the RFP unit to identify and resolve any barriers.

In February 2020, the FC&A program supervisor and a field manager provided Screened-Out Referrals in Resource Homes training at the statewide FC&A supervisor meeting to give additional guidance on improving the quality of screen-out consultations. Resource supervisors, RFP unit supervisors, and TFC program staff were the primary participants. This two-hour training provided instruction for completing quality supervisor reviews of screened-out referrals, reviewing history in totality, fully assessing concerns, identifying appropriate follow-up, and actions taken before, during, and after a screen-out consultation. The training also included specific action to take when a referral is screened-out as a policy violation and is referred to Resource staff for follow-up. Building off information provided in

the training, ***CWS Numbered Memo 20-05 Out-of-Home Screened-Out Referrals*** was released and sent to staff in April 2020. The numbered memo provided additional guidance for Resource supervisors in completing a quality review of a screened-out referral within two-business days. It also addressed notification to resource parents and discussion of the allegations within 30-calendar days, if not completed prior to the screen-out consultation. The numbered memo outlined action steps for Resource specialists when a referral is screened-out as a policy violation. This includes initiation of face-to-face contact with the alleged victim and resource family within five-business days, gathering information from collaterals, consulting with the Resource supervisor/field manager, and communicating all information learned to the child's assigned CW specialist and supervisor during the screen-out consultation.

Placement Process Enhancements
CWS is committed to improving the placement process to ensure a child is placed in a resource home that can best meet his or her needs. FC&A initiated a placement process workgroup to review current placement processes utilized in each region. The workgroup's goal is to improve placement process efficiency and identify areas for consistency statewide. A Continuum of Care workgroup focused on child screening and placement in all levels of care is currently working to develop a uniform placement request. This placement request will include an interview with the child's CW specialist to gather the child's strengths and needs. Inclusion of an interview portion in the request incorporates human interaction into an administrative process and results in a more accurate ,historical picture of the child's behaviors and needs.

Another enhancement to the placement process is improving communication between CW staff and resource parents about a child's needs and behaviors at placement. As learned in the exit surveys with foster parents who requested home closure, some reported not receiving all known information about the child's behavior at the time of placement. FC&A programs explored the possibility of a comprehensive, auto-generated KIDS report that outlines information about the child's needs and behavior that could be given to a resource parent at placement. However, this task cannot be completed in KIDS due to the complexity and documentation of information. In fall 2020, CWS plans to utilize the placement request interview to build a comprehensive, living document that outlines a child's story in a strengths-based manner that can be provided to foster parents at the time of placement. The document would also be in the child's KIDS case and accessible to any newly-assigned staff.

Foster Home Assessments
Quarterly resource family assessment (RFA) contractor meetings continue to be held to address questions and concerns, and ensure clarity and consistency in the assessment process of resource homes. Trends and information pertinent to the reduction of MIC continue to be shared with the RFA contractors in order to emphasize the need to conduct quality assessments.

During this reporting period, FC&A enhanced several forms related to the initial and ongoing resource approval process. Two new forms were also developed and released for use during this reporting period. Development of new forms and ongoing revision of current forms assists with continual improvement of the resource approval process.
  - In March 2020, the *Resource Family Application* was revised to gather information from the applicant about any adult in the home filing or being a party to a protective order. Protective order documentation is required to be obtained as part of the criminal and CW history assessment process and requires field manager approval.
  - In April 2020, the ***Resource Family Application Other Adults in the Home*** was revised to ensure all aliases are captured and to gather information about previous protective orders.
  - In April 2020, the ***Resource Family Reference Letter for School Personnel*** was updated with new questions regarding placement of additional children in the home. This reference letter contains numerous safety-related questions and is completed by school personnel for each school-age child residing in the resource home.
  - In April 2020, the ***Referral for Resource Family Assessment*** was updated to include the reasons for removal and permanency plan for the child(ren) for a kinship family assessment. It is critical for RFA contractors to understand the reason for the child(ren)'s removal when assessing applicant protective capacities and evaluating family dynamics.
  - In April 2020, the ***Annual Update School Reference for Child in OKDHS Custody*** was created and released for

use. This is a new reference required during the family's annual assessment and is obtained for each school-age child in OKDHS custody placed in the resource home. School personnel provide pertinent information regarding the resource parent's attentiveness to the child's educational needs, parenting ability, and safety concerns.

- In April 2020, the **Kinship Pre-Screening Assessment** was created and released for use. This new form captures information to assist with gathering information for a new kinship assessment request. The form includes information from the specialist requesting the kinship assessment, including the child(ren)'s individual needs, applicant's involvement in the case, and any potential protective capacities concerns the specialist is aware of. The form also includes information to obtain from the applicants to begin assessment. This form is completed for any kinship assessment request.

In previous reporting periods, overdue annual updates and reassessments were determined to be a barrier in reaching permanency goals, assessing child safety timely, and identifying needs for families. As a result, FC&A leadership developed a backlog plan to address this issue. This review process began in January 2019 with 273 overdue annual updates or reassessments. As of June 2020, the backlog was reduced to 79 overdue annual updates or reassessments. This model continues to decrease the number of overdue annual updates/reassessments each month, while ensuring that staff assesses child safety more timely, addressing any needs for the child and family, and providing exceptional customer service to resource families. These strategies are to increase placement stability, improve permanency for children, and decrease MIC.

Overfill requests continue to be reviewed and approved at a higher decision-making level. The assigned Resource specialist gathers information regarding the child, resource family, and family unit as a whole to assist in assessing the situation. The *Resource Overfill Assessment* form is used to collect and document information. When the request is for seven total children in the foster home, the field manager reviews and makes an approval decision. When the request is for eight or more children in the foster home, the FC&A field deputy director and the regional deputy director review and make an approval decision.

When a resource home is overfilled, Resource staff and the child's assigned CW specialist continue working to make sure a family is supported and the child's and family's safety and well-being needs are addressed. Overfilled resources are tracked to evaluate if supports are in place when necessary to aid the resource family. As detailed in prior reports, FC&A programs staff was responsible for tracking support plans, but this task was moved to the administrative staff assigned to each field manager. The responsibility of monitoring support plans for supported foster homes was shifted to the RFP agency directors with the expectation that CWS may request verification and/or documentation at any time. This reassignment of duties allows for more accountability at the local level and includes managerial oversight to ensure appropriate supports are established and modified as needed to ensure child safety in the resource home.

FC&A is working with the National Resource Center for Youth Services (NRCYS) to develop an additional element of pre-service training focused on child problematic sexual behavior. In addition, FC&A programs and NRCYS identified various in-service trainings regarding problematic sexual behavior and are currently working on a plan to make the training available to all existing foster families. Educating existing and new resource parents about problematic sexual behavior will equip them with necessary tools and information to respond appropriately and ensure the safety of all children in the home. In July 2020, two information sheets from the National Child Traumatic Stress Network, **Sexual Development Behavior in Children** and **Understanding and Coping with Sexual Behavior Problems in Children**, were included as the monthly resource reminder for OKDHS and RFP resource homes. The information focuses on child sexual development and behavior, and understanding and coping with their sexual behavioral problems. As part of a resource reminder, the Resource specialist initiates a discussion about the information to ensure it was reviewed and to answer any questions. CWS is also exploring further training options for Resource, Permanency Planning, and CPS staff, including a webinar conducted by Dr. Jane Silvosky from the University of Oklahoma Health Sciences Center that would be specific to placement decisions and providing support to resource parents to ensure the safety of all children in the home.

Resource Alerts

As detailed in previous reporting periods, FC&A leadership worked with KIDS to develop enhancements to assist when an issue or concern in a resource home requires follow-up or ongoing monitoring. *CWS Numbered Memo 18-09, Documenting Resource Contacts* took effect 9/17/2018. The resource alert increases communication between programs when concerns arise in a resource home and ensures the continued safety of children placed in the resource home. When an issue or concern is identified by Resource staff or the child's assigned CW staff at any point during the approval process or after the home was approved and open, a resource alert is entered to notify all assigned staff of the need for ongoing monitoring. Ongoing monitoring of issues or concerns includes communication between assigned staff prior to initiating monthly contacts, and discussion of the resource alert during a screen-out consultation or 10-day staffing when a referral is received for the resource home.

Resources with resource alert contact generate to the WebFOCUS YI042 Resource Homes with an Open Resource Alert Issue report for monitoring by Resource staff and CW staff with children placed in the home. The report is emailed monthly with an expectation that field managers, supervisors, and RFP agency staff use the report as a management tool to track open and resolved resource alerts.

As part of the ongoing evaluation of new processes and practice implementation, three necessary KIDS enhancements were identified in June 2019.

- In November 2019, a new KIDS contact type for Resource staff was added to track the occurrence of ongoing issue or concern monitoring. Guidance for usage of the new contact type was sent to Resource staff on 11/25/2019. A glitch was found in the new contact type and it is unable to be selected with other contact purposes, such as a monthly contact or quarterly visit. In March 2020, a request was made to update the contact type and this enhancement was completed in July 2020.
- The second needed enhancement is the inability to close a resource with an unresolved alert. This enhancement is pending with an anticipated release date for February 2021 due to the COVID-19 pandemic and telework-related needs. Presently, FC&A programs staff monitor the YI042 report for closed resources with an open alert and follow up with assigned staff to ensure the resource alert is resolved.
- The third needed enhancement is generation of an automated alert to newly-assigned staff upon case transfer or placing a new child in the resource home. This enhancement was pending but KIDS staff discovered in March 2020 that a new alert cannot be automatically generated; additional KIDS solutions are still being explored. The YI042 report contains a Placements tab that outlines the child's assigned CW specialist and supervisor. This report can be viewed on a regular basis by CW staff to identify children on his or her caseload that are placed in a resource home with an open resource alert. FC&A programs staff began providing the YI042 report monthly to district directors in June 2020 with a request to review and provide to staff with children placed in the home. Additionally, the Resource Information Sheet populates when a child is placed in a resource home in KIDS and includes open or resolved resource alert information.

In May 2020, FC&A programs led a discussion with field managers regarding resource alert implementation and utilization. Positive feedback was received that included improved communication with permanency partners and keeping the concern or issue at the forefront of visits and communication. The FC&A field deputy director required each field manager to review all resource alerts open more than 180 days and discuss how ongoing monitoring of the concern is occurring with the assigned staff. FC&A programs will develop a refresher training for supervisors and field managers regarding resource alert oversight and management to decrease risk to the child.

On 7/1/2019, 148 resource alerts were open. In State Fiscal Year (SFY) 20, 255 alerts were opened with 181 resolved by the end of June 2020. Resource staff resolved a total of 309 alerts during SFY 20. The usage of alerts represents improved, proactive practice in addressing potential safety concerns and/or risk factors identified in a resource home. Common anecdotal risk factors requiring ongoing monitoring might include, but are not limited to, a history of substance abuse, increased family stress, individuals identified as unsafe with potential access to the child in OKDHS custody, unclean or hazardous home environment, and criminal action taken against a resource parent that does not

result in automatic closure. In addition to increasing and improving communications between Resource staff and each child's assigned CW specialist, resource alerts also improve support for resource families. Increased communication and addressing the needs of a resource family provides a positive customer service experience and furthers efforts to retain resource families.

Training
To assist staff in assessing and remediating concerns in a resource home, *Assessing Concerns in Resource Homes* training is a required training for all new Resource and RFP staff and is available to any staff that requests the training or needs a refresher. This training develops and enhances Resource staff skills in determining the appropriate level of intervention required when concerns are present in a foster home, including addressing policy violations, and preparing and monitoring a WPC. The training was offered twice in January and February 2020, but was cancelled for March and April 2020 due to the COVID-19 pandemic. This training will be transitioned to a virtual format in future months and will continue on the previously scheduled frequency.

Records Check Training is a new training developed in the previous reporting period for new and/or current CW specialists to assist in developing skills related to searching and documenting records in a quality manner. This training will eventually be a required Level 1 training for all Resource staff. In December 2019, three sessions of *Records Check Training* were completed by FC&A programs. In January 2020, a specialized training session was provided to Adoption Transition Unit (ATU) staff that conducts records searches on call after hours. Additional training dates scheduled in March 2020 for Resource staff, RFP contractors, and TFC contractors were canceled due to the COVID-19 pandemic. Programs staff is exploring limited in-person training options while transitioning the course to a virtual format.

A training developed in the previous reporting period, *Records Check Review and Approval Training*, is required for all lead specialists, supervisors, and field managers. This training is offered to Resource staff, RFP contractors, and TFC contractors. This training is designed to assist in crafting skills related to reviewing and coaching staff for quality records checks, and approval at the appropriate level. In January and February 2020, nine sessions of training were completed. Two sessions scheduled for March 2020 were cancelled due to the COVID-19 pandemic. The sessions were then conducted virtually in April 2020. Feedback from staff was very positive. Anecdotal feedback from staff includes feeling more confident when documenting their recommendation regarding history, and staff are held more accountable to the records check guidelines. FC&A programs staff will provide this training on a bi-annual basis or as a need is identified.

In February 2020, an FC&A program field representative (PFR) and field manager presented information at the statewide FC&A supervisor meeting regarding assessment of other adults as household members. CWS identified that staff are sometimes unclear when to assess an individual who may not be a primary household member and this, in turn, led to some MIC incidents based on the individual's role and access to the child. The presentation outlined policy requirements for assessments of other household members, both minors and adults, as well as provided examples of individuals who may not technically live in the home but should still be assessed, such as someone who lives on the property and is frequently in the home or a caregiver that is in the home daily. FC&A program staff also developed guidance, *Should this Person be Assessed as Another Household Member*, to assist staff with critically thinking through how to assess these individuals.

Resource Parent Support
In this reporting period, the COVID-19 pandemic began impacting Oklahoma in mid-March 2020 and posed new concerns for children and resource parents. CWS rapidly responded with efforts aimed at increased foster parent support and resources to ensure resource family and child needs were addressed. Multiple resources were provided to families on a wide range of topics including COVID-19 education; discussing COVID-19 with children; connecting to community resources; video conferencing; emergency internet resources; and grief. Communications from CWS Director Deborah Shropshire, M.D., informed resource parents of changing dynamics including increased contact with the Resource specialist and the child's assigned CW specialist, virtual parent-child family time, and virtual worker visits.

Additionally, funding was secured to give emergency relief payments to resource families. Each kinship or traditional resource home that had placement of a child for the entire month, beginning in March 2020, received an additional $250 payment the following month. The emergency relief payments were in effect through May 2020.

The Network Support Groups for resource parents are unable to meet at this time; however, NRCYS staff provided the Network Support Group facilitators with resources to support them during this stressful period. A newsletter was created in mid-April to provide a variety of resources to parents statewide. NRCYS and CWS worked together to develop virtual support groups statewide using the Network model of training and support. These groups continue to meet virtually. Community partners HALO, Pivot, and Lilyfield also stepped up to provide virtual weekly support groups led by a trained mental health professional. Due to the Arnall Family Foundation's generosity, this training is provided at no cost to Oklahoma foster families. CWS recognizes connection, peer support, education and access to resources is important for resource parents at this time.

FC&A Quality Assurance (QA)

Over prior reporting periods, the FC&A QA team was established and began conducting resource reviews and face-to-face transfer of learning (TOL) debriefings based on the review findings. As described previously, the QA team modeled debriefing of the review tool to FC&A management and field managers began review tool debriefings with applicable Resource staff. This effort was to create a feedback loop, improve practice, and provide accountability. Since establishment of the FC&A QA team in 2018, the approach to conducting resource reviews has shifted from statewide to regional-based upon feedback and data collection. After each regional debriefing, the QA team conducted large group debriefings with applicable supervisors and field managers following regional reviews to discuss data and trends. FC&A programs staff was in attendance at the debriefings to establish a feedback loop to inform policy, guidance, and training.

In September 2019, the QA team implemented a two-phase review system. The first phase included reviewing a kinship resource initially approved for child placement. The second phase included a follow-up approval review of the same resources 60-calendar days after the initial kinship placement review was completed. Both phases of this review were completed for Region 2 and phase one was completed for Region 1. After completion of both phases in Region 2, a debriefing was held with staff; however, FC&A programs staff was unable to attend. This debriefing helped identify minor inconsistencies in practice between supervisors in the region and opportunities for continued development of CW specialists. In addition to providing review results and debriefing with staff, the QA team provided identified trends to FC&A programs since they were not in attendance. Information learned from the regional reviews highlighted to FC&A leadership included:
- Previously identified background check concerns
- Minimally completed forms and missing documentation
- Lack of quality WPCs and addendums
- Difficulty obtaining quality references.

Extensive work in the areas noted above was completed by FC&A programs and field staff. As information is learned from the QA team, additional areas for improvement are targeted. As the expectation for staff to consistently provide quality work and conduct thorough safety assessments increased, FC&A programs continues to expand training in these areas. All concerns listed above are highlighted in Level 1 trainings and Records Check trainings. Since the Records Check Review and Approval Trainings were completed by FC&A Programs in March and April 2020, no additional reviews were initiated to assess the quality of background checks. Emphasis is placed on completing forms fully and obtaining all documentation in various trainings and communication to staff. Tip sheets were developed and provided to staff to enhance the information's quality. This information is part of Level 1 trainings and is referenced when quality issues arise. FC&A programs are developing additional guidance and best practices on obtaining quality references, which will be provided to staff and included in existing trainings.

In the previous reporting period, the QA team completed a quarterly RFP review and an additional RFP and TFC agency review. Effective 4/1/2020, FC&A QA staff transitioned to the Continuum of Care Program. The QA responsibilities for

FC&A were transitioned to the Continuous Quality Improvement (CQI) Contract Performance Review (CPR) team. The FC&A QA team supported the shift by conducting process and review instrument training for CPR staff. They also conducted phase two of the Region 1 placement reviews. FC&A programs supported the transition by providing criminal and CW background check training, process and review instrument training, and consultation on policy or procedures to the CPR team, as needed. CQI leadership and FC&A leadership worked together in April and May 2020 regarding a plan for FC&A programs and CPR staff to begin process revisions prior to CPR staff initiating reviews. In May 2020, FC&A programs and CPR staff started intensive collaboration efforts to revise the reviewing tool and process. The decisions from these meetings were to focus the review on the areas of safety and quality of assessments for resource homes recently fully approved. CPR staff was tasked with numerous revisions and discussions with FC&A staff to create a viable tool moving forward.

In June 2020, CPR staff worked continually to revise the tool and QA process. CPR staff and MIC program staff collaborated regarding review efforts, as MIC and FC&A QA have a joint MIC strategy. It was determined that given the revisions to the QA tool, a referral should be submitted to Innovation Services to discuss the possibility of using a Qualtrics survey to gather data and create a dashboard to measure outcomes. Several meetings with Innovation Services, CPR staff, and FC&A programs staff were held to discuss the viability of a survey and further QA tool revisions needed. The outcome of these meeting was very promising and CPR is moving forward with Innovation Services to build the Qualtrics survey.

The CPR team is expected to initiate FC&A QA reviews on 8/1/2020. The sample will be drawn across all five regions of the state to include newly-approved resource homes with a mix of traditional, kinship relative, and kinship non-relative homes. The quarterly review will also include RFP homes. The CPR unit will be adjusting to a balance of completing the QA reviews and also maintaining their original slate of duties in the coming months. FC&A leadership will evaluate progress and make adjustments when needs are identified.

MIC Expanded Strategies
Over the last three reporting periods, the occurrence of MIC incidents for children placed in foster care remained fairly consistent with MIC not happening over 99 percent of the time. This rate is much improved since the baseline measurement in 2013, and even since reporting period 10/1/2017 – 9/30/2018 when the expanded MIC strategies and additional FC&A efforts began implementation. Although this reporting period did see an uptick in MIC incidents, it was by a marginal amount of 0.14 percent. Efforts to prevent and reduce MIC incidents for children placed in foster homes continue to be vigilant in all CWS program areas. The MIC leadership team maintained regular meetings with good member attendance. Meetings continue to focus on improving CW practices, specifically as they relate to the known contributing factors to MIC.

MIC Case Review Updates
The MIC program staff continues to review all substantiated cases of MIC in a family-like setting, as well as eight randomly selected unsubstantiated MIC cases of children placed in a family-like setting. In addition to the MIC program reviews, the district directors and field managers also conduct an independent monthly review of at least one unsubstantiated MIC case. This is a reduction in reviews required of the district directors. In March 2020, it was determined with executive approval that the monthly district director review requirements would decrease from two substantiated and two unsubstantiated reviews per month to one unsubstantiated review. This reduction was largely due to capacity; however, district directors are still charged with reviewing the substantiated reviews completed by the MIC PFR involving their staff. This MIC review is conducted on each and every substantiated MIC incident and contains important TOL notes specific to the staff and CW programs under the assigned and reviewing district directors and field managers. The MIC expanded strategy remains active and enhanced since the sharing process began in January 2019.

Momentum for the monthly district director and field manager reviews continued throughout the year and into the first quarter of 2020. These efforts gleaned a significant amount of data that when analyzed helped CWS identify ongoing MIC-related trends and/or patterns. This data was also compared to the data from the MIC program level reviews to

determine the significance of each of the contributing factors. The results were, as anticipated, heavily related to a deficit in the quality of worker contacts. To ensure that the CQI process is also the responsibility of the supervisors that read and approve the reports, a transition toward implementing impactful actions is the goal moving forward. Reducing the number of district director monthly reviews was embraced by the MIC team. Doing so allowed for restructuring the review's focus based on the analyses findings that are explained briefly below and in more detail in an attachment to this report. It is important to realize that reviews by district directors will continue in other capacities. A current goal is for district directors to transition into a more focused review related to the continual top contributing factor, the quality of contacts. Since reducing district director reviews, considerations are underway to design another targeted review that looks specifically at quality aspects of specialist visits that were shown to be lacking. This concentrated focus integrates into the existing regional strategic plans. The restructuring of the district director review process and focus on action planning is currently in development and is already incorporated in the expanded strategies. As the MIC team begins to finalize how district director and supervisors will review quality worker visits possibly through each region's strategic action plans, consideration will also be given to the QA efforts in other program areas, such as program reviews, appeals, Child and Family Services Reviews (CFSR), and the regional focus areas.

Conversations with RFP agency partners about moving to an online MIC review tool began in November 2019. During this reporting period, a meeting with RFP MIC leads was held in February 2020, where the Qualtrics online MIC review tool was discussed and a version of the tool was tested. Several minor changes were needed to make the review tool sufficiently usable for agency partners. These corrections were completed by late February. A step-by-step guide of how to use the online review tool was completed by the RFP PFR and the guide was provided to agency partners. Agencies began using the Qualtrics online MIC review tool in March 2020. To date, RFPs have completed and entered 16 MIC reviews using this online system.

MIC Review Analyses
Two review analyses were conducted during this period, one analysis on the data collected from the program level MIC reviews, *MIC Program Review Data Analysis 2019*, and another on the data collected in Qualtrics of the district director MIC reviews, *District Director Review Data Analysis May 2020*. The most significant finding from both reports is that despite having completely differing reviewers in each set of data collection, both reports identified the same top contributing factor to MIC was a lack of quality during monthly worker contacts. Additionally though there was some variation as to order for the third and fourth place holders, there was also consistency between the two analyses as to all four of the top contributing factors.

	Substantiated & Unsubstantiated Reviews Combined	**Substantiated Reviews Only**
PFR Reviews	1. Quality Contacts	1. Quality Contacts
	2. Totality of Information	2. Totality of Information
	3. Children with Special Needs	3. Unsafe/Unapproved Person in or Visiting the Home/Children
District Director Reviews	1. Quality Contacts	1. Quality Contacts
	2. Lack of Communication Between Programs	2. Unsafe/Unapproved Person in or Visiting the Home/Children
	3. Unsafe/Unapproved Person in or Visiting the Home/Children	3. Lack of Communication Between Programs

MIC Case Analysis Updates
In March 2020, discussions with agency partners about case analyses were held. After receiving input from the agency partners, it was determined that each agency would complete a case analysis on a home that was subject to an MIC investigation. At that time, guidance on how to complete a case analysis was provided to aid the agencies in their case analysis. Each agency will hold an all-staff meeting where the case analysis is reviewed and TOL processes are completed. These case analyses will occur twice per year.

Case analyses continued in each region quarterly until the state restricted group gatherings due to the COVID-19 pandemic. In March 2020, all MIC case analysis activities were paused until further notice by the MIC strategy lead. Feedback from field leadership continues to affirm that staff benefit and experience learning opportunities from the case analysis process. On 6/12/2020, discussions were held with the regional MIC leads to strategize transforming the case analysis process into an online, virtual format. Barriers to establishing a virtual case analysis meeting were identified. In some regions, the meeting consists of all regional staff with upwards of 100 participants. Virtual meeting systems have some complications in facilitating such a conversational learning climate; therefore, the meeting and conversational structure of the case analysis process will need to be reformatted to align with the virtual meeting system. Zoom is the preferred system for such an activity given the number of involved participants and required breakout sessions. The MIC team is working diligently to obtain a Zoom account for all regions which maintains the quality TOL aspects observed in prior case analysis projects, as well as ensuring it encourages sensitive information sharing. The design for how to conduct each meeting is an agenda item of discussion for the July 2020 MIC meeting. As of report time, strategy planning and development for an online case analysis process remains in the early stages of development.

Conclusion

The supervisory framework, permenancy safety consultations, screen-out consultations, resource alerts, and the expanded strategies all played a large part in the continual reduction of MIC and positive trending. While CWS acknowledges the intended federal target has not been reached, it is evident that CWS demonstrated substantial improvement not only in the metrics, but also in identifying activities, efforts, and strategies, which are improving practice related to MIC by resource caregivers. MIC teams continue compiling and organizing data from the completed district director, field manager, and program level MIC reviews for continued comprehensive analysis. The program level reviews will be easier to analyze in the coming review periods as it was also entered into the Qualtrics system for easily accessible real-time information and data analysis. The MIC team began partnering with the FC&A QA team to share information about the outcomes from both programs' review trends to inform the continued MIC efforts and regional action plans. The process for ongoing qualitative and quantitative analysis, as well as dissemination of key findings, will continue with regard to MIC contributing factors once the virtual formatting is complete. As patterns continue to emerge in the CWS trend data from reviews and case analyses, a method to combine findings from the CFSR case reviews, program reviews, permanency safety consultation reviews, placement stability data, permanency data, MIC reviews, and FC&A reviews to implement a feedback loop will be developed based on the combined findings to influence training, policy, and MIC activity changes.

CONGREGATE CARE

Children with Substantiations of Abuse or Neglect while in Out-of-Home Care OCA Heightened Monitoring Facilities (HMF)									
Heighten Monitored Period	Closure Month	Group Homes / Shelters								
		Group Home/ Shelter 1	Group Home/ Shelter 2	Group Home/ Shelter 3	Group Home/ Shelter 4	Group Home/ Shelter 5	Group Home/ Shelter 6	Group Home/ Shelter 7	Group Home/ Shelter 8	Total
16th Data Period	Apr-2019									0
	May-2019									0
	Jun-2019	4				1				5
17th Data Period	Jul-2019		1			1				2
	Aug-2019		1				1			2
	Sep-2019							1		1
18th Data Period	Oct-2019								1	1
	Nov-2019									0
	Dec-2019			2	1					3
19th Data Period	Jan-2020									0
	Feb-2020		2							2
	Mar-2020								1	1
TOTAL		4	4	2	1	2	1	1	2	17

Data Source: KIDS Data Measure 1.1 MIC; Run Date: 5/31/20 -Numbers indicate children with substantiations while in DHS custody and placed at Facility. Substantiations for children in DHS custody only.

15th Period Data ID'd as HMF	16th Period Data ID'd as HMF	17th Period Data ID'd as HMF	18th Period Data ID'd as HMF

Section 2, Table 1.1-5

Children with Substantiations of Abuse or Neglect while in Out-of-Home Care OCA Heightened Monitoring Facilities (HMF)			
Heighten Monitored Period	Closure Month	Acute/ RTC 1	Total
16th Data Period	Apr-2019		**0**
	May-2019		**0**
	Jun-2019	1	**1**
17th Data Period	Jul-2019		**0**
	Aug-2019	2	**2**
	Sep-2019		**0**
18th Data Period	Oct-2019		**0**
	Nov-2019		**0**
	Dec-2019		**0**
19th Data Period	Jan-2020	1	**1**
	Feb-2020		**0**
	Mar-2020		**0**
TOTAL		**4**	**4**
Data Source: KIDS Data Measure 1.1 MIC; Run Date: 5/31/20 -Numbers indicate children with substantiations while in DHS custody and placed at Facility. Substantiations for children in DHS custody only.			
15th Period Data ID'd as HMF	16th Period Data ID'd as HMF	17th Period Data ID'd as HMF	18th Period Data ID'd as HMF

Section 2, Table 1.1-6

Note: The color blocking denotes the data period when a facility was identified as requiring heightened monitoring. Data reporting periods are for three months.

Ongoing efforts are occurring in all core strategy activities to address MIC in higher levels of care. Current semi-annual data indicates a decrease of nine MIC victims in congregate care when compared to data from the last report. This decrease indicates the efforts from OKDHS and providers to ensure safer congregate care settings for youth continues to be successful. Additionally, six of the total 35 MIC incidents in congregate care, during the current reporting period, occurred in resources of facilities whose contracts were terminated or are no longer providing services. Eleven of the remaining 29 MIC victims were in programs OKDHS does not hold the funding contract for, i.e. psychiatric hospitals, Office of Juvenile Affairs (OJA) placements, and shelter care. OKDHS offers support to residential treatment care (RTC) providers as well as shelter providers when they are identified as a program that could benefit from heightened monitoring (HM) support. Support is also given outside of the HM process by implementing Facility Service Plans (FSPs) and Safety Plans, which the Specialized Placements and Partnerships Unit (SPPU) liaisons monitor. At this time, OKDHS does not provide HM or liaison support to OJA detention providers. All OJA congregate care providers, including shelters, are included in the trainings offered by NRCYS to support trauma-informed care training opportunities across the state for all providers who serve Oklahoma youth. This past year SPPU also began working with the OKDHS Tribal liaison to ensure the NRCYS trainings are offered to Tribal group care providers.

The three primary efforts designed to decrease MIC in congregate care settings are heightened monitoring of facilities with the highest number of MIC incidents; policy, practice and technical enhancements; and contract enhancements. These efforts will continue with ongoing commitment to seek ways to support safe care for youth determined to need a treatment and/or a placement above foster care.

Heightened Monitoring
The specific activities and detailed processes on the selection of, and the work completed with, facilities in need of HM based upon 17 data sets were summarized in previous semi-annual reports. This reporting period includes HM activities based on the 18th and 19th MIC data sets. Of the four group homes identified from the 16th and 17th data sets, no subsequent MIC incidents took place during the 18th or 19th data set. In the 16th data set, one provider was identified as in need of HM based on referral concerns; however, no incidents of MIC occurred. This program did have an incident of MIC during the 18th data set and CWS continued to engage with this provider in HM support. The data indicates the HM support process was successful for this reporting period. SPPU program staff met with the only hospital to have MIC

during this reporting period. The hospital had refused to participate in HM; however, after meeting the hospital agreed to a modified HM plan. The modified HM plan was to provide support and oversight to the hospital's already initiated improvement activities.

18th MIC Data Set: October – December 2019
A quarterly heightened monitoring team (HMT) meeting was held on 1/13/2020 to identify facilities in need of enhanced HM support based on data from October-December 2019. Monthly HMT updates via phone call or in person occurred 1/13/2020, 2/5/2020, and 3/4/2020. During monthly calls, action plans were reviewed and updates were suggested based on information from weekly onsite monitoring by SPPU liaisons, bi-monthly visitation by the SPPU program supervisor assigned to HMT activities, NRCYS, and OCA feedback.

The 18th MIC data set was received January 2020. This data review identified two resources in need of HM at the group home and shelter level of care. The first resource identified was participating in HM from a previous quarter and the efforts continued. As of this report, the team saw substantial improvement and successful completion of the HM process for this program. In late June 2020, the HMT recommended this program be released from HM. The team met with the second identified resource in February 2020. The team met multiple times from February through March to develop a plan which would have the most impact on MIC in this program. Due to the COVID-19 pandemic, no HM occurred in this program until late June 2020. At that time, the HMT met with NRCYS and a national consultant to develop support for this program. The identified support will be focused on the development of shift supervisors and reducing the use of physical interventions.

Review of the 18th data set identified no resources in need of HM at the hospital acute/RTC level of care. However, the RTC resource identified during the 17th data period continued participation in the HM process.

19th MIC Data Set: January – March 2020
A quarterly HMT meeting was held on 4/9/2020 to identify facilities in need of enhanced HM support based on data from January – March 2020. Monthly HMT conference calls were held on 5/6/2020, 6/3/2020, and 7/1/2020. During the monthly calls, action plans were reviewed and updates were suggested based on information from weekly onsite monitoring by the SPPU liaisons, bi-monthly visitation by the SPPU PFR assigned to HMT activities, NRCYS, and OCA.

The 19th MIC data set was received April 2020. This data set review identified one resource in needing HM at the group home and shelter level of care. This resource was already participating in the HM process based on data from the 18th data set. In the meantime, this program self-identified the need for a leadership change and made a change in the Program Director's position.

The 19th MIC data set identified one resource at the RTC level of care. This was the same resource identified in the 17th data set. This resource began participation in the HM process in December of 2019 and continues participation at this time. The program experienced setbacks in relation to their plan due to the COVID-19 pandemic; however, referrals and MIC incidents at the program decreased and the use of physical intervention is decreasing as well.

To improve the HM process, SPPU met with congregate care providers in early March 2020 to get their feedback and insight. SPPU is committed to supporting providers in the best way possible so they are able to provide quality trauma-responsive care to youth in OKDHS custody. As a result of the meeting, SPPU developed plans to address the HM process and identified some shifts to achieve positive outcomes in MIC rates. Due to the COVID-19 pandemic, the official shifts were delayed; however, the identified process changes are scheduled to occur during the next reporting period.

Suggested Process Changes
- SPPU will give providers the opportunity to make suggestions and then vote on a new name for the HM process. The purpose is to remove the process' negative connotation, and instead move to a more positive process and

experience.

- In the initial meetings, instead of starting with the observations, SPPU will give the provider an opportunity first to discuss with SPPU what they do really well and what areas would be helped the most with additional support.
- Immediately following the onsite observations by NRCYS, the HM lead and NRCYS will meet with program leadership to provide immediate feedback. While this will not include the full results of the program assessment, it will provide focus points for the facility to begin working on while awaiting the full assessment.
- NRCYS will remove the recommendations section from the program assessment to provide detailed information to the provider's leadership team, allowing conversation regarding recommendations to occur during the HM meeting with NRCYS and the SPPU team. The providers will be invited to the HM meeting to bring their support ideas and steps to reach their goals. NRCYS will provide recommendations to the SPPU team and both will be prepared to give support ideas when the provider need suggestions.
- The SPPU team will scale down what is addressed in the HM process, focusing instead on the top three concerns that impact youth safety. SPPU and the providers will work together to select the top three focus areas. Additionally, SPPU will provide feedback and request updates to program policy as needed.

Policy, Practice, and Technical Enhancements
All activities to support the utilization of the Assessing Safety in Residential Settings Contact Guide continue. The guide is provided to the youth's assigned CW specialist when the group home referral is made and is addressed in the MIC Modules 1 and 2 online trainings.

Utilization of the SPPU FSP continues. During this reporting period, SPPU shifted liaison roles. All facilities now have an assigned support liaison. This liaison's focus is on supporting the facility and driving good transition work for each youth in the program. Facilities also have safety liaisons that monitor all referrals of abuse or neglect for the program. The safety liaisons are responsible for the contract monitoring efforts, collaboration, and safety plan monitoring for OCA and FSP work within each facility. The safety liaisons review all assigned and screened-out referrals quarterly to identify patterns, trends, or areas of concern in the broader agency practice and culture which may not be easily recognizable during individual referral review. This practice also serves to strengthen the communication between the facility and SPPU related to direct care practices. The quarterly facility review practice now has a tool to support cross-program collaboration and clearer opportunity for trend identification. SPPU hosted a workgroup with SPPU, CPS, OCA, and Developmental Disabilities Services teams in February 2020. During the meeting, SPPU discussed the screen-out consultation process across different levels of care. No major concerns were identified and at this time the screen-out processes will continue with no changes. SPPU is working with KIDS to add a resource alert to congregate care resources; however, many technical barriers may result in SPPU developing a different alert process.

From January through August 2019, shelter placement training was provided across the state for more than 700 CW specialists and supervisors.   The training's purpose was to enhance the knowledge of CW specialists working with children placed in shelters. The training focused on connecting the agency's practice standards to the CWS team supporting children in shelter care. During this training, information was provided on group home levels of care and safety assessment expectations in all levels of care outside of foster care. In January 2020, SPPU program staff began reaching out to district directors again to provide the training, when needed. This was in place until March 2020 when face-to-face training was paused due to the COVID-19 pandemic. Currently, a training is under development for district directors and CW supervisors that focuses on the broader practices of placement stability, appropriate specialist interventions, and supports for youth at all levels of care. This training will include a TOL opportunity and will be initiated in fall 2020.

The processes for how group home referrals are reported and how the group home waitlist is managed are well integrated since the last reporting period. In the past, due to staff capacity and protocol, the group home waitlist was primarily managed by one SPPU staff. In April 2019, a new process was begun to engage SPPU PFRs assigned to support youth in other levels of care, such as hospital care and shelter care, as well as staff from the clinical team. This weekly call provides real-time perspective about how a youth is functioning in a lower level of care and is the opportunity for

good planning for all youth on the waitlist. Often, during these weekly calls alternate plans for placement and services are identified and shared with the youth's assigned CW team for consideration. The group home waitlist call also supports preplacement calls for all youth going to a program under HM and all youth with a history of problematic sexual behavior. These preplacement calls are tentatively scheduled weekly, when applicable, and the time is often based on the provider's schedule. Beginning August 2020, a tool will be sent to the child's assigned CW team. The tool is designed to assist CW supervisors gather additional information to better inform the decisions around group home referrals prior to supervisory approval.

The SPPU program hired a new program supervisor to focus on supporting the ongoing HM activities, as well as integrating training and supports provided to contracted and non-contracted providers.

Contract Enhancements

Provider performance report cards are still shared with D+ and E providers throughout the year and as they become available. In December 2019, the SPPU program staff assigned to support this effort identified ways to increase provider engagement around this activity. At the February 2020 Group Home Provider Meeting time was scheduled to address the report cards and improve the reporting of relevant information from the group home's required monthly report.

Activities to support the Managing Aggressive Behaviors (MAB) implementation and other provider supports continue to be supported by the OKDHS contract with NRCYS. In addition to the supports listed, NRCYS provided HM support to all providers participating in HM this reporting period.

Supports Provided through NRCYS Contract
- Residential Child and Youth Care Professional (RCYCP) 3: Building Relationships Sand Springs, OK – 10/1/2019 – 10/2/2019
- Group Home Provider Meeting – 10/4/2019
- MAB Trainer Certification Course (TCC) Norman, OK – 10/7/2019 – 10/11/2019
- RCYCP 4: Teaching Discipline Sand Springs, OK – 10/15/2019
- MAB Direct Sand Springs, OK – 10/30/2019 – 10/31/2019
- RCYCP Certification Test Sand Springs, OK – 10/30/2019
- Systematic Training to Assist in the Recovery from Trauma (START) Training of Trainers (TOT) Norman, OK – 11/19/2019 – 11/21/2019
- Building Bridges Initiative Oklahoma City, OK – 12/11/2019 – 12/12/2019
- Trans Youth Training Mustang, OK – 1/3/2020
- LBGTQ Training Idabel, OK – 1/8/2020
- MAB Direct Muskogee, OK – 1/28/2020 – 1/29/2020
- MAB Refresher Sallisaw, OK – 2/3/2020
- Group Home Administrator meeting Norman, OK – 2/21/2020
- MAB TCC Tulsa, OK – 2/24/2020– 2/28/2020
- Technical Assistance: COVID-19 Support Call – 3/23/2020, 3/30/2020, 4/6/2020, 4/13/2020, 4/20/2020, 4/27/2020, 4/29/2020, 5/4/2020, 5/18/2020, and 6/1/2020
- Technical Support Art Group for Safe Haven – 4/29/2020
- START Direct Online Day 1 – 6/9/2020
- START Direct Online Day 2 – 6/11/2020
- Virtual Group Home Administrators Meeting – 6/12/2020
- START Direct Online Day 3 – 6/16/2020
- START Direct Online Day 4 – 6/18/2020
- START Direct Online Day 5 – 6/19/20 20
- MAB Direct Virtual Non-Physical Day 1 – 6/23/2020
- MAB Direct Virtual Non-Physical Day 2 – 6/25/2020

- START Direct Virtual Day 6 – 6/25/2020

In conjunction with the support being provided by the Annie E. Casey Foundation, in October 2019 OKDHS began working with the Building Bridges Initiative (BBI), who have been providing consultation focused on supporting efforts to identify and promote best practices in congregate care settings, leading to better outcomes for youth. In December 2019 OKDHS hosted a two-day conference with training provided by BBI for all OKDHS contracted group home providers. The conference focused on direct care and programing practices that support better youth and family engagement when youth are in congregate care, as well as aftercare planning. The training was well received and ongoing collaboration with BBI continues. The COVID-19 pandemic interrupted some of the work, allowing group home providers to focus on emergency response planning but the BBI continued to be engaged with group homes by providing sensory kits for six providers to use with youth during the quarantine. The BBI continued to support the efforts to reduce MIC by working directly with one group home provider through program director coaching calls and consultation with the program administrator to support work the provider was doing related to reducing missing from care incidents for the youth they serve. SPPU refocused collaboration efforts in May, and in June 2020 a self-assessment tool created by BBI was sent out to all OKDHS group home providers to gather initial information that will be utilized in the ongoing quality improvement work being done in the group homes.

Conclusion

Efforts targeted to MIC reduction in congregate care settings began in August 2015 and encompassed significant changes in multiple work areas. Specific initiative activities included policy and protocol modifications, standardized tool development and implementation, KIDS technical enhancements, improved community partner collaboration, creation of an intensive intervention and remediation process for problematic providers, and contract modifications related to reduction of restraint, trauma-informed service provision, and overall provider accountability. While work remains to be done for MIC reduction in congregate care settings, examination of the data from the last three reporting periods indicates a meaningful and sustained decrease, indicative of the multi-faceted and responsive approach undertaken by OKDHS for this measure.

1.2: Absence of Maltreatment in Care by Parents

Operational Question

Of all children served in foster care during the 12-month reporting period, what percent were **not** victims of substantiated or indicated maltreatment (abuse or neglect) by a parent while in Oklahoma Human Services (OKDHS) custody?

Data Source and Definitions

For the semi-annual report, Oklahoma uses the same logic as Data Element XI. Children Maltreated by Parents while in Foster Care on Oklahoma's Federal Data Profile. This element uses a 12-month period based on the time frame of October 1 through September 30. Oklahoma used the two official state-submitted Adoption and Foster Care Analysis Reporting System (AFCARS) 19B & 20A files combined with a non-submitted annual National Child Abuse and Neglect Data System (NCANDS) file, covering AFCARS 19B & 20A periods, to compute the measure. The NCANDS file used for this report is calculated the same as the file submitted to the federal government, which includes running the data through the official validation tool. The official submission to NCANDS occurs only once annually and is due yearly by January 31, so the NCANDS data is still subject to change until that date.

- This metric measures performance over 12 months and differs from the monthly data collected from KIDS.
- The federal data element requires matching NCANDS and AFCARS records by AFCARS IDs.
- The NCANDS report date and completion date must fall within the removal period found in the matching AFCARS record.
- The federal metric only counts a victim once during the federal fiscal year (FFY), even when a child is victimized more than once in the course of a year. Whereas in the monthly report, a victim is counted for every substantiated finding of abuse or neglect.

The federal data element includes all victims of substantiated abuse or neglect by a parent while in care, even when the reported abuse occurred prior to the child coming into care.

## Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2019 through 3/31/2020.

Numerator: The number of children served in foster care from 4/1/2019 through 3/31/2020 that did not have any substantiated or indicated allegations of maltreatment by a parent during that period.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2010 – 9/30/2011	All children served from 10/1/2010 - 9/30/2011	12,352	12,533	98.56%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013	14,800	15,045	98.37%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014	15,580	15,806	98.57%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014	16,018	16,272	98.44%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015	16,390	16,640	98.50%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015	16,571	16,808	98.58%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016	16,348	16,548	98.79%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016	16,057	16,244	98.85%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017	15,570	15,753	98.84%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017	14,911	15,113	98.66%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018	14,226	14,405	98.76%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018	13,772	13,901	99.07%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019	13,296	13,441	98.92%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019	12,942	13,082	98.93%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020	12,510	12,659	98.82%
Target				99.00%

Section 2, Table 1.2-1
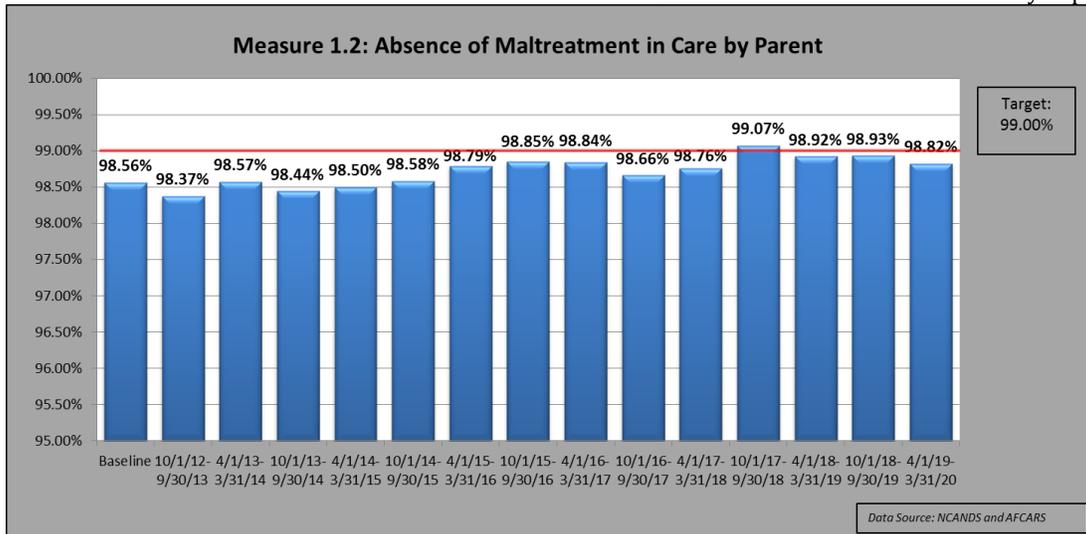
Section 2, Graph 1.2-1
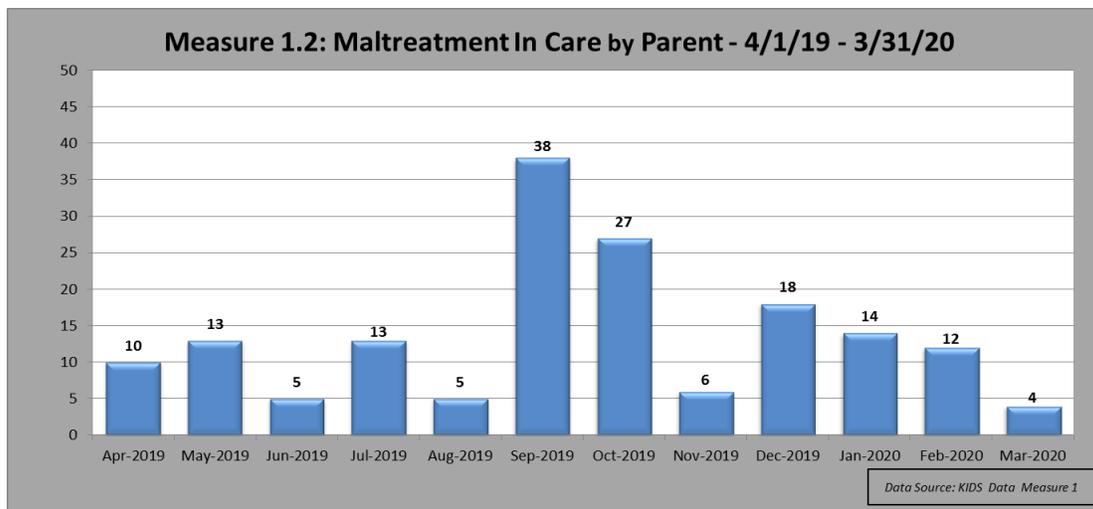
Section 2, Graph 1.2-2

Commentary

Section 2, Graph 1.2-1 is based on the federal indicator for maltreatment in care (MIC) and produces representative information about the incidence of MIC by parents. This reporting period had a slight decrease by 0.11 percent making the overall outcome 98.82 percent. Child Welfare Services (CWS) remains above the baseline by 0.26 percent.

In the most recent reporting period, 98.82 percent of children in out-of-home (OOH) care were not abused or neglected by a parent. Of the 12,659 children served in care during the reporting period, 149 had a substantiation of abuse by a parent.

For the reporting period 4/1/2019 through 3/31/2020, a total of 165 MIC substantiations while in OOH care by a parent was reported in the monthly MIC Pinnacle Plan Measure. The 165 victims were included in 94 separate referrals. In the monthly reporting for the same time period, 68 of these victims were excluded based on the alleged abuse/neglect occurring prior to the child coming into OOH care; however, these victims are still reported to NCANDS.

Of the 165 victims in OOH care maltreated by a parent:
- 73 children were in Trial Reunification (44.2%);
- 50 children were in a Kinship Foster Care - Relative Home (30.3%);
- 12 children were in a child welfare (CW) Foster-Supported Home (7.3%);

- 11 children were in a Kinship Foster Care Non-Relative Home (6.7%);
- 11 children were in a CWS Foster Family Home (6.7%);
- 6 children were placed in a Psychiatric Residential Treatment Center (3.6%); and
- 2 children were in a Therapeutic Foster Care Home (1.2%).

Children Maltreated in OOH Care by Parent, Excluding Prior Abuse

Section 2, Tables 1.2-2 and 1.2-3 provide an additional view of performance on this measure. Understanding not only the type of setting in which the abuse occurred, but also when the abuse occurred is important. Victims with a substantiation of abuse or neglect that occurred prior to the child coming into care are normally excluded in the monthly reports, but are included in the Pinnacle Plan's Semi-Annual Reports. This means the Semi-Annual Report counts substantiations on abuse and neglect by a parent regardless of when the child in OKDHS custody reports the abuse. When a child while in OKDHS custody reported abuse that occurred in his or her parents' home prior to custody, and that abuse was substantiated, then the child is currently counted in the MIC 1.2 numbers, even though the abuse and/or neglect did not occur while in OKDHS custody.

Measure 1.2a - Children Maltreated by Parent While in Out-Of-Home (OOH) Care - Excluding Prior Abuse														
Report Month	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	TOTAL	% SAFE
# in OOHC	8602	8538	8557	8601	8745	8700	8735	8649	8532	8435	8438	8384	12659	
# Safe in OOHC	8601	8535	8554	8594	8743	8680	8719	8644	8516	8427	8430	8381	12567	99.27%
# Maltreated in OOHC	1	3	3	7	2	20	16	5	16	8	8	3	92	

Data Source: # in OOHC is from the Annual File built from the SEP 2019 and MAR 2020 AFCARS files
 # Maltreated in OOHC is from last 6 month of the FFY 2019 and first 6 months of the FFY 2020 NCANDS Files
Report Run on : June 14, 2020 at 8:47 pm

Section 2, Table 1.2-2

MIC 1.2 Excluding Prior Abuse by Placement Type		
Placement Type	# Children	% Children
CW FOSTER FAMILY CARE	2	2.2%
CW FOSTER FAMILY CARE - SUPPORTED HOME	3	3.3%
KINSHIP/RELATIVE/CW FOST. FAM. CARE	19	20.7%
THERAPEUTIC FOSTER CARE	1	1.1%
TRIAL REUNIFICATION	67	72.8%
TOTAL	92	100.0%

Data Source: # in OOHC is from the Annual File built from the SEPT 2019 and MAR 2020 AFCARS files. # Maltreated is from the FFY 2019 NCANDS File; Run Date: 6/14/2020

Section 2, Table 1.2-3

Based on the monthly reporting that ended 3/31/2020, 68 of these victims would be excluded because the alleged abuse/neglect occurred prior to the child coming into OOH care. Eleven of the 68 victims are already excluded in the NCANDS report as they are not included in the AFCARS population, leaving 57 additional victims that could be excluded due to reported abuse that was prior to the child's removal. If those substantiations were to be excluded in the Semi-Annual Report, the overall number of victims would be reduced to 92 victims, from the originally reported 149 victims, out of a served population of 12,659. This calculates out to a rate of 99.27 percent safe, which is above the federal standard, and above the 99.00 percent target for this measure. Of the 92 victims abused in OOH care by a parent, 67 victims or 72.8 percent were placed in trial reunification at the time of the MIC.

3.1: Frequency of Worker Contacts

Operational Question

What percentage of the total minimum number of required monthly face-to-face contacts occurred with children who were in foster care for at least one calendar month during the reporting period?

Data Source and Definitions

This measure is calculated using the criteria for the federal visitation measure. However, the measure differs from the federal measure since this measure does not include children in tribal custody.

- The data reflects the total number of required monthly contacts due to children in out-of-home care over the course of 12 months and the number of total required monthly contacts made for those visits.
- Only one monthly contact per month is counted even though multiple visits may have occurred.

Description of Denominator and Numerator for this reporting period

Denominator: The number of required monthly contacts due from 7/1/2019 through 6/30/2020.
**Numerator:** The number of qualifying required monthly contacts made.

## Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 7/1/2011 – 6/30/2012	All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012	90,355	94,639	95.5%
10/1/2012 – 9/30/2013	All children due a visit who were in care at least a full calendar month from 10/1/2012 – 9/30/2013	105,868	110,673	95.7%
7/1/2013 – 6/30/2014	All children due a visit who were in care at least a full calendar month from 7/1/2013 – 6/30/2014	118,824	123,343	96.3%
1/1/2014 – 12/31/2014	All children due a visit who were in care at least a full calendar month from 1/1/2014 – 12/31/2014	124,355	128,745	96.6%
7/1/2014 – 6/30/2015	All children due a visit who were in care at least a full calendar month from 7/1/2014 – 6/30/2015	123,596	128,173	96.4%
1/1/2015 – 12/31/2015	All children due a visit who were in care at least a full calendar month from 1/1/2015 – 12/31/2015	121,799	125,417	97.1%
7/1/2015 – 6/30/2016	All children due a visit who were in care at least a full calendar month from 7/1/2015 – 6/30/2016	117,879	120,998	97.4%
1/1/2016 – 12/31/2016	All children due a visit who were in care at least a full calendar month from 1/1/2016 – 12/31/2016	111,659	114,567	97.5%
7/1/2016 – 6/30/2017	All children due a visit who were in care at least a full calendar month from 7/1/2016 – 6/30/2017	106,218	108,704	97.7%
1/1/2017 – 12/31/2017	All children due a visit who were in care at least a full calendar month from 1/1/2017 – 12/31/2017	102,032	104,427	97.7%
7/1/2017 – 6/30/2018	All children due a visit who were in care at least a full calendar month from 7/1/2017 – 6/30/2018	98,321	100,853	97.5%
1/1/2018 – 12/31/2018	All children due a visit who were in care at least a full calendar month from 1/1/2018 – 12/31/2018	94,582	96,870	97.6%
7/1/2018 – 6/30/2019	All children due a visit who were in care at least a full calendar month	90,751	92,882	97.7%

	from 7/1/2018 – 6/30/2019			
1/1/2019 – 12/31/2019	All children due a visit who were in care at least a full calendar month from 1/1/2019 – 12/31/2019	88,628	90,979	97.4%
7/1/2019 – 6/30/2020	All children due a visit who were in care at least a full calendar month from 7/1/2019 – 6/30/2020	87,210	90,082	96.8%
Target				95.0%

Section 2, Table 3.1-1
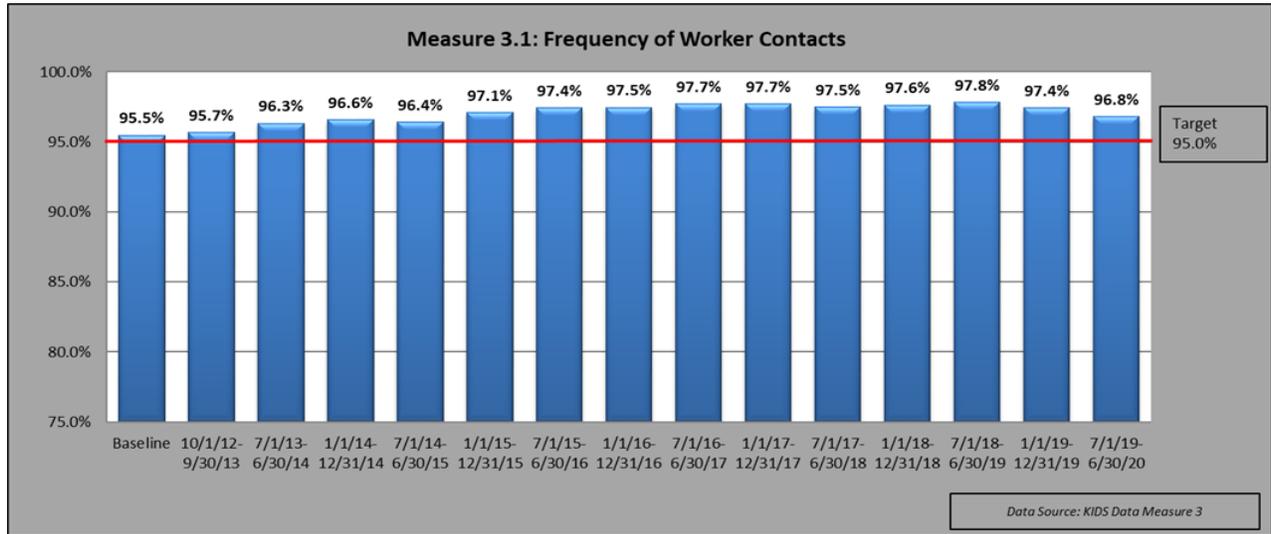
Section 2, Graph 3.1-1
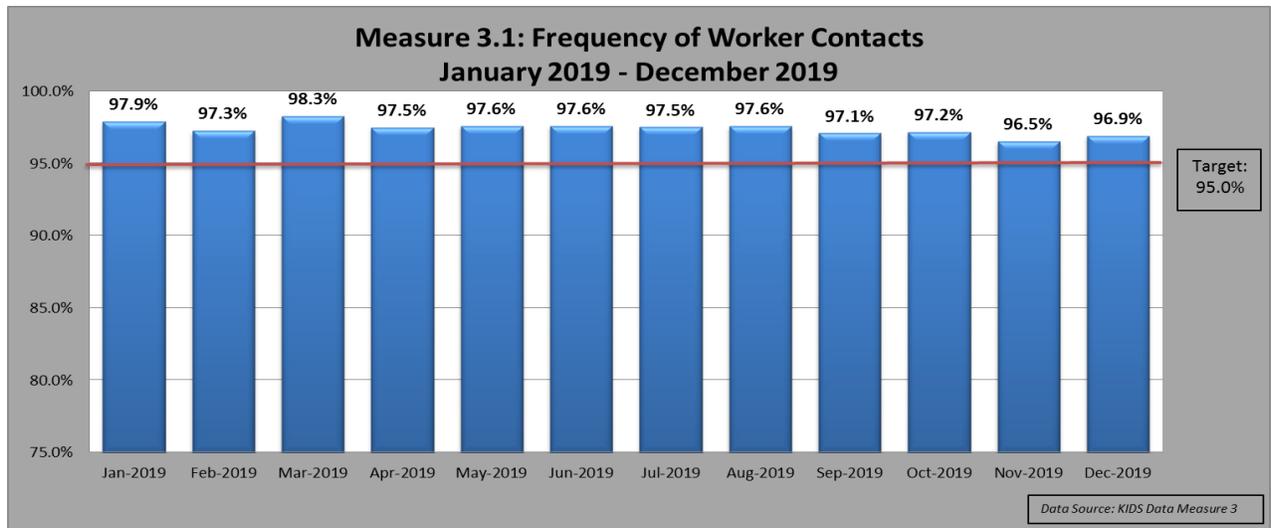
Section 2, Graph 3.1-2

Commentary

The baseline for this measure is 95.5 percent and the target is to sustain 95.0 percent. Over the 12-month period of 7/1/2019 through 6/30/2020, 90,082 monthly contacts were required and 87,210 monthly contacts were completed resulting in a completion rate of 96.8 percent. Though the performance remains above the target, there was a small decline this reporting period because of the initial response to the COVID-19 pandemic. In March 2020, Oklahoma Human Services had to quickly respond to the COVID-19 pandemic. Due to this unexpected circumstance, Child Welfare Services (CWS) observed a decline in documented face-to-face contacts. Of the children without a documented face-to-

face contact, 91 percent of those children had a completed telephone contact with their assigned child welfare specialist. During April and May 2020, compliance improved and exceeded the target. Approved COVID-19 protocols were established that allowed video conferencing to be considered an acceptable form of worker contact. CWS resumed face-to-face contact in June 2020. Overall performance in this area continues to be above the baseline and exceeds the target.

3.2: Frequency of Primary Worker Contacts

Operational Question

What percentage of the total minimum number of required monthly face-to-face contacts was completed by the primary worker with children who were in foster care for at least one calendar month during the reporting period?

Data Source and Definitions

This measure is calculated similarly to the federal visitation measure. However, the measure only counts visits made by the primary caseworker. In October 2016, for children in trial adoption cases, the monthly contact will be completed by the primary permanency planning worker if the child is being adopted in an identified placement. However if the child is in a non-identified placement, the monthly contact is completed by the adoption worker with a primary assignment. Beginning with the semi-annual reporting period ending December 31, 2015, children who were placed in out-of-state placements will be excluded from the primary worker visitation measure, as these children have an assigned worker out-of-state responsible for monthly visitation.

- The data reflects the total number of required monthly contacts due to children in out-of-home care over the course of 12 months and the number of total required monthly contacts made by the primary assigned worker.
- Only one contact per month is counted even though multiple visits may have been made during the month.
- To be counted as a valid monthly contact completed by a primary worker, the worker who completed the visit must have had a primary assignment at the time of the visit.

Description of Denominator and Numerator for this reporting period

Denominator: The number of required monthly contacts due from 7/1/2019 through 6/30/2020.
Numerator: The number of qualifying monthly visits made by a primary worker.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 7/1/2011 – 6/30/2012	All children due a visit who were in care at least a full calendar month from 7/1/2011 – 6/30/2012	48,497	94,639	51.2%
10/1/2012 – 9/30/2013	All children due a visit who were in care at least a full calendar month from 10/1/2012 – 9/30/2013	81,971	110,673	74.1%
7/1/2013 – 6/30/2014	All children due a visit who were in care at least a full calendar month from 7/1/2013 – 6/30/2014	93,760	123,343	76.0%
1/1/2014 – 12/31/2014	All children due a visit who were in care at least a full calendar month from 1/1/2014 – 12/31/2014	99,358	128,745	77.2%
7/1/2014 – 6/30/2015	All children due a visit who were in care at least a full calendar month from 7/1/2014 – 6/30/2015	105,749	128,173	82.5%
1/1/2015 – 12/31/2015	All children due a visit who were in care at least a full calendar month from 1/1/2015 – 12/31/2015	108,859	121,024	89.9%

7/1/2015 – 6/30/2016	All children due a visit who were in care at least a full calendar month from 7/1/2015 – 6/30/2016	107,763	116,834	92.2%
1/1/2016 – 12/31/2016	All children due a visit who were in care at least a full calendar month from 1/1/2016 – 12/31/2016	103,881	110,830	93.7%
7/1/2016 – 6/30/2017	All children due a visit who were in care at least a full calendar month from 7/1/2016 – 6/30/2017	99,699	105,424	94.6%
1/1/2017 – 12/31/2017	All children due a visit who were in care at least a full calendar month from 1/1/2017 – 12/31/2017	96,217	101,378	94.9%
7/1/2017 – 6/30/2018	All children due a visit who were in care at least a full calendar month from 7/1/2017 – 6/30/2018	93,124	97,873	95.1%
1/1/2018 – 12/31/2018	All children due a visit who were in care at least a full calendar month from 1/1/2018 – 12/31/2018	89,532	93,917	95.3%
7/1/2018 – 6/30/2019	All children due a visit who were in care at least a full calendar month from 7/1/2018 – 6/30/2019	85,422	89,924	95.0%
1/1/2019 – 12/31/2019	All children due a visit who were in care at least a full calendar month from 1/1/2019 – 12/31/2019	83,617	87,998	95.0%
7/1/2019 – 6/30/2020	All children due a visit who were in care at least a full calendar month from 7/1/2019 – 6/30/2020	82,348	87,352	94.3%
Target				90.0%

Section 2, Table 3.2-1
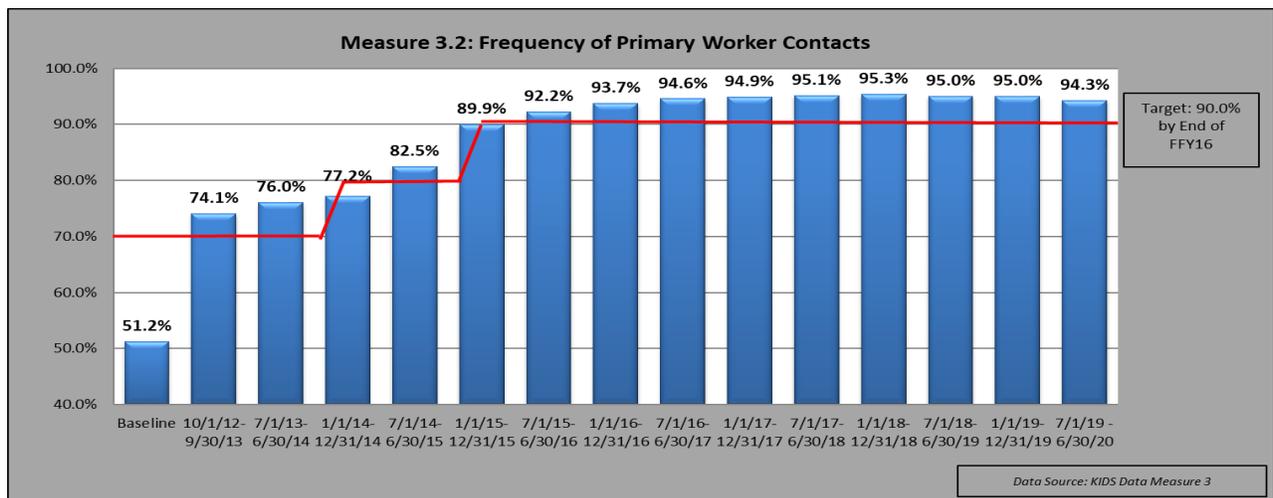
Section 2, Graph 3.2-1
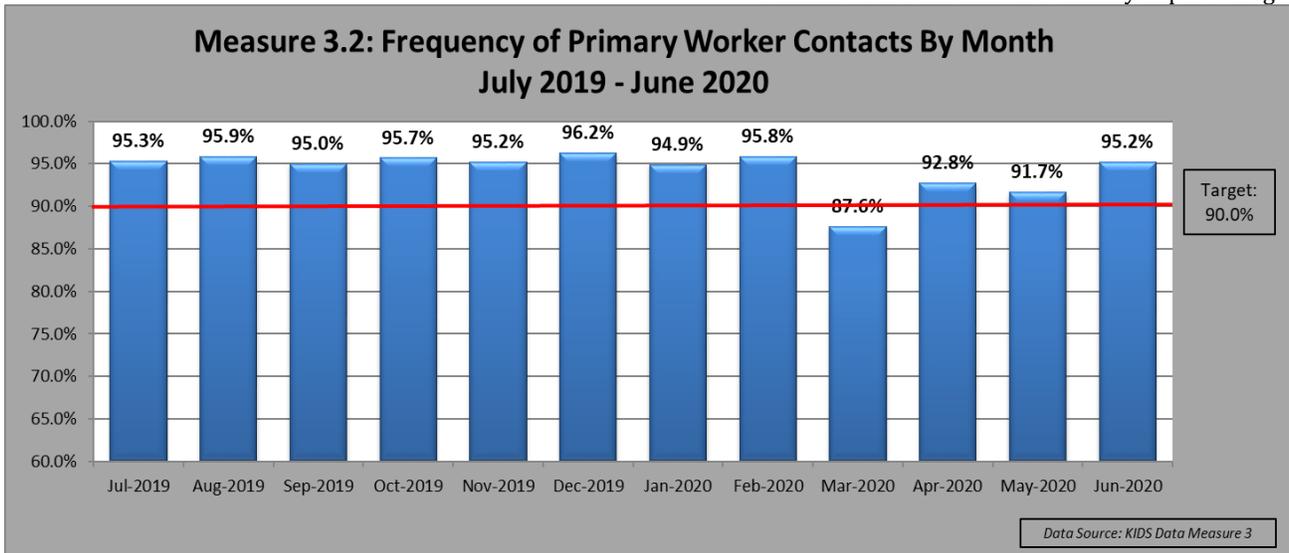
Section 2, Graph 3.2-2

Commentary
The baseline for this measure is 51.2 percent and the final target is 90.0 percent. Over the 12-month period of 7/1/2019 through 6/30/2020, 87,352 primary monthly contacts were required and 82,348 of those monthly contacts were made by the primary worker for a compliance rate of 94.3 percent. As noted in Measure 3.1, there was a decline in contacts in March 2020 due to the initial response to the COVID-19 pandemic. By June 2020, performance returned to normal. Even with the decline in March, performance in this area continues to be above the baseline and exceeding the target.

3.3: Continuity of Worker Contacts by Primary Workers

Operational Question
What percentage of children in care for at least six consecutive months during the reporting period were visited by the same primary caseworker in each of the most recent six months, or for those children discharged from Oklahoma Human Services (OKDHS) legal custody during the reporting period, the six months prior to discharge?

Data Source and Definitions
This measure looks at the percentage of children in care for at least six consecutive months during the reporting period who were visited by the same primary caseworker in each of the most recent six months, or for those children discharged from OKDHS legal custody during the reporting period, the six months prior to discharge. This measure does not include children in tribal custody or children placed out-of-state.
- Only one contact per month is counted even though multiple visits may have been made during the month by different workers.
- To be counted as a valid monthly contact completed by a primary worker, the worker who completed the visit must have had a primary assignment at the time of the visit.

For children in trial adoption (TA) cases, the monthly contact must have been completed by the adoption worker with a primary assignment. When the child went into TA status in the last six months of the reporting period or when a child in TA's adoption finalized in less than six months, then they are excluded from this measure.

Description of Denominator and Numerator for this reporting period
**Denominator:** Number of children in custody for at least six consecutive months from 1/1/2020 through 6/30/2020.

Numerator: Number of children who were seen for six consecutive months by the same primary caseworker for the last six months of the reporting period or for those children discharged from OKDHS legal custody during the reporting period, the last six months prior to discharge.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 1/1/2014 – 6/30/2014				40.6%
1/1/2015 – 6/30/2015	All children in care at least 6 full calendar months from 1/1/2015 – 6/30/2015	5,135	10,349	49.6%
7/1/2015 – 12/31/2015	All children in care at least 6 full calendar months from 7/1/2015 – 12/31/2015	5,259	9,997	52.6%
1/1/2016 – 6/30/2016	All children in care at least 6 full calendar months from 1/1/2016 – 6/30/2016	5,717	9,650	59.2%
7/1/2016 – 12/31/2016	All children in care at least 6 full calendar months from 7/1/2016 – 12/31/2016	5,717	9,094	62.9%
1/1/2017 – 6/30/2017	All children in care at least 6 full calendar months from 1/1/2017 – 6/30/2017	5,519	8,718	63.3%
7/1/2017 – 12/31/2017	All children in care at least 6 full calendar months from 7/1/2017 – 12/31/2017	5,238	8,370	62.6%
1/1/2018 – 6/30/2018	All children in care at least 6 full calendar months from 1/1/2018 – 6/30/2018	4,951	8,140	60.8%
7/1/2018 – 12/31/2018	All children in care at least 6 full calendar months from 7/1/2018 – 12/31/2018	4,599	7,726	59.5%
1/1/2019 – 6/30/2019	All children in care at least 6 full calendar months from 1/1/2019 – 6/30/2019	4,393	7,405	59.3%
7/1/2019 – 12/31/2019	All children in care at least 6 full calendar months from 7/1/2019 – 12/31/2019	4,216	7,297	57.8%
1/1/2020 – 6/30/2020	All children in care at least 6 full calendar months from 1/1/2020 – 6/30/2020	4,491	7,214	62.3%
Target				65.0%

Section 2, Table 3.3-1
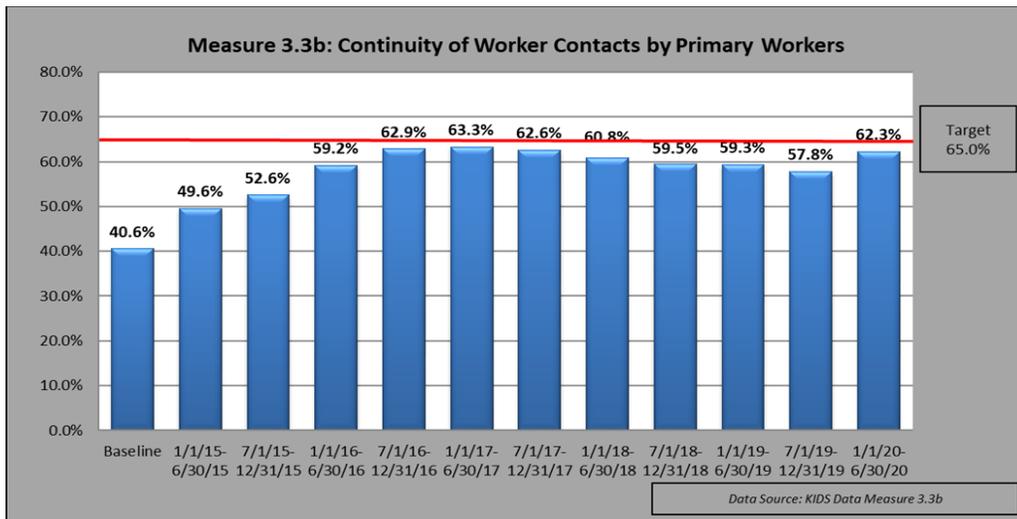
Section 2, Graph 3.3-1

Commentary

From 1/1/2020 through 6/30/2020, 62.3 percent of the children in out-of-home care were seen by the same primary worker for six consecutive months. The baseline was set at 40.6 percent. Child Welfare Services (CWS) observed an increase from the last reporting period by 4.5 percent and the measure is 21.7 percent above the baseline reporting.

CWS remains committed to ongoing efforts to ensure the continuity of worker visits. Work to reduce caseloads and improve hiring and staff retention is a vital part of supporting performance in Measures 3.1, 3.2, and 3.3. During the last reporting period, CWS leadership continuously communicated to district directors that worker continuity must be considered when reassigning cases. Staff retention and development efforts are outlined in Measure 7 and aimed at increasing workforce stability and decreasing turnover. These targeted efforts may have contributed to the 4.5 percent increase for worker continuity during this reporting period. For this reporting period, implementation of the Supervisory Framework had occurred in all five regions. The Framework will continue to enhance a supervisor's ability to support and coach staff, thus improving worker retention and directly impacting Measures 3.1, 3.2, and 3.3.   Data reports and other ongoing strategy efforts will continue to be used to help identify trends that might impact the continuity of worker visits, such as workload percentages, staff vacancies, and secondary assignments.

Frequency of worker visits, Measure 3.1, remained above the target percentage since the beginning of the reform. Frequency of primary worker contacts, Measure 3.2, with a baseline percentage of 51.2 percent for data ending in June 2012 stayed above the target for the last eight reporting periods. Continuity of worker contacts by the primary worker, Measure 3.3, had positive trending the first five reporting periods beginning in January 2015 through June 2017. Measure 3.3 began to decline in the July 2017 reporting period, but increased this reporting period and is the highest it has been in the last five reporting periods, which is still higher than the baseline.

4.1a: Placement Stability—Children in Care for Less than 12 Months

Operational Question
Of all children served in foster care during the 12-month reporting period that were in care for at least eight days but less than 12 months, what percent had two or fewer placement settings to date?

Data Source and Definitions
Timeliness and Permanency of Reunification – Adoption and Foster Care Analysis Reporting System (AFCARS) 19B and 20A
- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

Description of Denominator and Numerator for this reporting period
Denominator: All children served in foster care from 4/1/2019 through 3/31/20 whose length of stay (LOS) as of 3/31/20 was between eight days and 12 months.

Numerator: All children served in foster care from 4/1/2019 through 3/31/20 whose LOS as of 3/31/20 was between eight days and 12 months **and** who had two or fewer placement settings as of 3/31/20.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS between 8 days and 12 months			70.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS between 8 days and 12 months	4,396	6,031	72.9%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS between 8 days and 12 months	4,564	6,136	74.4%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS between 8 days and 12 months	4,513	5,933	76.1%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 -	4,297	5,564	77.2%

	3/31/2015 with LOS between 8 days and 12 months			
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS between 8 days and 12 months	3,981	5,585	71.3%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS between 8 days and 12 months	4,048	5,537	73.1%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS between 8 days and 12 months	4,106	5,462	75.2%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS between 8 days and 12 months	4,271	5,617	76.0%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017 with LOS between 8 days and 12 months	4,219	5,506	76.6%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018 with LOS between 8 days and 12 months	4,039	5,196	77.7%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018 with LOS between 8 days and 12 months	4,048	5,017	80.7%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019 with LOS between 8 days and 12 months	3,971	4,975	79.8%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019 with LOS between 8 days and 12 months	3,873	4,869	79.5%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020 with LOS between 8 days and 12 months	3,812	4,817	79.1%
Target				88.0%

Section 2, Table 4.1a-1
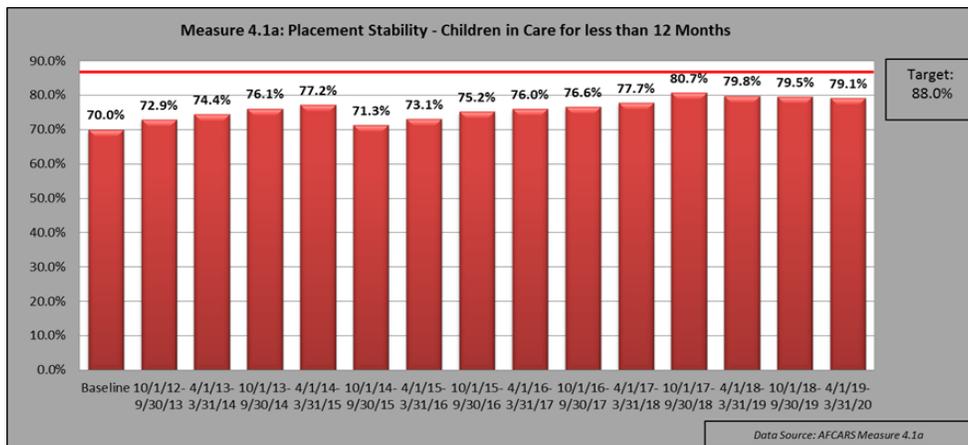
Section 2, Graph 4.1a-1

4.1b: Placement Stability—Children in Care for 12 to 24 Months

Operational Question
Of all children served in foster care during the 12-month reporting period that were in care for at least 12 months but less than 24 months, what percent had two or fewer placement settings to date?

Data Source and Definitions
Timeliness and Permanency of Reunification – Adoption and Foster Care Analysis Reporting System (AFCARS) 19B and 20A

- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

Description of Denominator and Numerator for this reporting period
Denominator: All children served in foster care from 4/1/2019 through 3/31/2020 whose length of stay (LOS) as of 3/31/2020 was between 12 months and 24 months.

Numerator: All children served in foster care from 4/1/2019 through 3/31/2020 whose LOS as of 3/31/2020 was between 12 months and 24 months **and** who had two or fewer placement settings as 3/31/2020.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS between 12 and 24 months			50.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS between 12 and 24 months	2,292	4,514	50.8%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS between 12 and 24 months	2,569	4,909	52.3%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS between 12 and 24 months	2,795	5,174	54.0%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS between 12 and 24 months	3,034	5,430	55.9%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS between 12 and 24 months	2,844	5,271	54.0%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS between 12 and 24 months	2,710	4,977	54.5%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS between 12 and 24 months	2,636	4,935	53.4%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS between 12 and 24 months	2,620	4,717	55.5%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017 with LOS between 12 and 24 months	2,719	4,684	58.0%

4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018 with LOS between 12 and 24 months	2,766	4,750	58.2%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018 with LOS between 12 and 24 months	2,767	4,686	59.0%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019 with LOS between 12 and 24 months	2,698	4,426	61.0%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019 with LOS between 12 and 24 months	2,719	4,309	63.1%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020 with LOS between 12 and 24 months	2,584	4,169	62.0%
Target				68.0%

Section 2, Table 4.1b-1
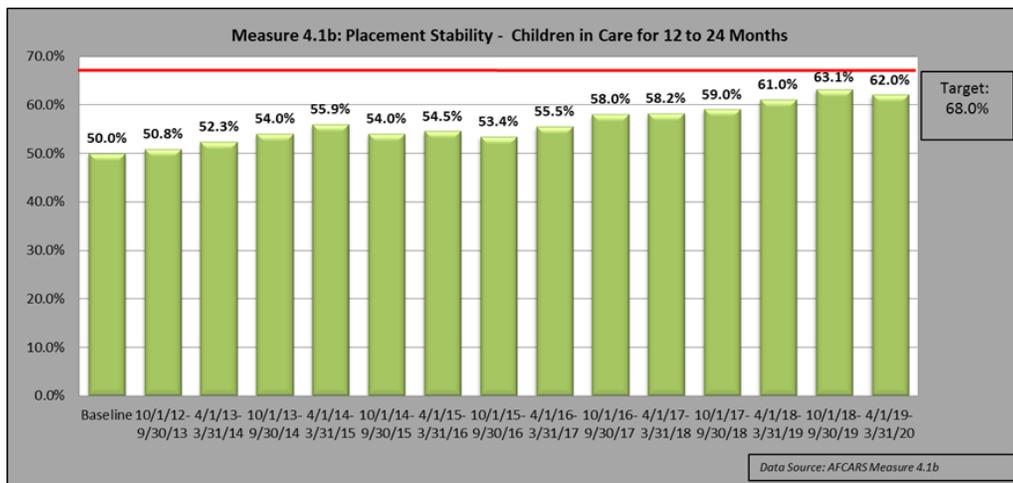
Section 2, Graph 4.1b-1

4.1c: Placement Stability—Children in Care for 24 Months or More

Operational Question
Of all children served in foster care during the 12-month reporting period that were in care for at least 24 months, what percent had two or fewer placement settings to date?

Data Source and Definitions

Timeliness and Permanency of Reunification – Adoption and Foster Care Analysis Reporting System (AFCARS) 19B and 20A
- Measures 4.1a, b, and c are based on the Permanency Federal Composite 1 measures C1-1, C1-2, and C1-3. The data looks at the number of children with two or fewer placement settings during the different time periods.

### Description of Denominator and Numerator for this reporting period
Denominator: All children served in foster care from 4/1/2019 through 3/31/2020 whose length of stay (LOS) as of 3/31/2020 was 24 months or longer.

Numerator: All children served in foster care from 4/1/2019 through 3/31/2020 whose LOS as of 3/31/2020 was 24 months or longer **and** who had two or fewer placement settings as of 3/31/2020.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with LOS 24 months or longer			23.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS 24 months or longer	1,002	4,035	24.8%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS 24 months or longer	1,112	4,277	26.0%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS 24 months or longer	1,303	4,731	27.5%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS 24 months or longer	1,576	5,260	30.0%
10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS 24 months or longer	1,632	5,572	29.3%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS 24 months or longer	1,688	5,677	29.7%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS 24 months or longer	1,676	5,486	30.6%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS 24 months or longer	1,524	5,051	30.2%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017 with LOS 24 months or longer	1,324	4,630	28.6%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018 with LOS 24 months or longer	1,236	4,129	29.9%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018 with LOS 24 months or longer	1,207	3,913	30.8%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019 with LOS 24 months or longer	1,244	3,772	33.0%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019 with LOS 24 months or longer	1,213	3,669	33.1%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020 with LOS 24 months or longer	1,186	3,475	34.1%
Target				42.0%

Section 2, Table 4.1c-1
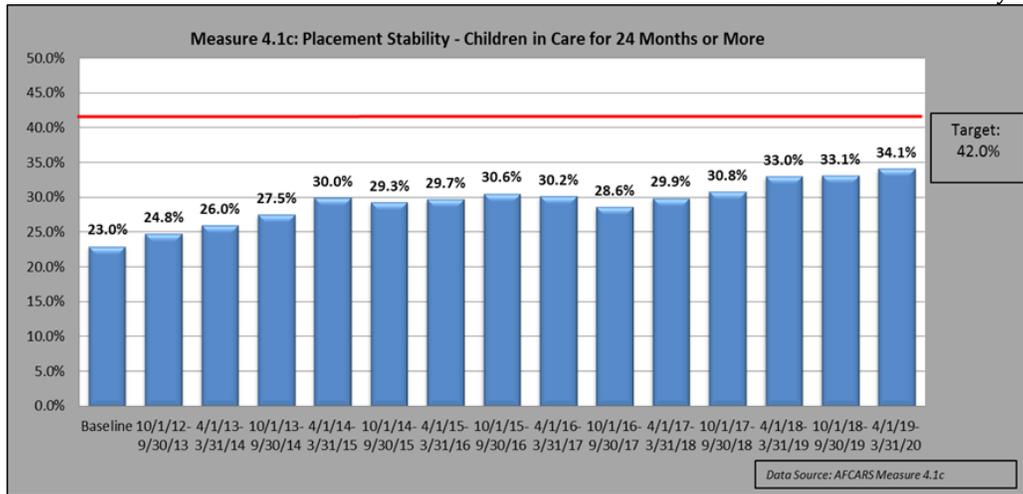
Section 2, Graph 4.1c-1

4.2: Placement Stability—Placement Moves After 12 Months in Care

Operational Question

Of all children served in foster care for more than 12 months, what percent of children experienced two or fewer placement settings after their first 12 months in care?

Data Source and Definitions

Measure 4.2 looks at placement stability that occurs after the child's first 12 months in care. The placement that the child is placed in 12 months after their removal date counts as the first placement, and then the metric shows how many children had two or fewer placement settings after that time.

Description of Denominator and Numerator for this reporting period

Denominator: All children served in foster care from 4/1/2019 through 3/31/2020 whose current removal was prior to 3/31/2020 and remained in care at least 12 months.

Numerator: All children served in foster care from 4/1/2019 through 3/31/2020 whose current removal was prior to 3/31/2020 and remained in care at least 12 months **and** had two or fewer placement settings.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children served from 10/1/2011 - 9/30/2012 with length of stay (LOS) at least 12 months			74.0%
10/1/2012 – 9/30/2013	All children served from 10/1/2012 - 9/30/2013 with LOS at least 12 months	6,404	8,374	76.5%
4/1/2013 – 3/31/2014	All children served from 4/1/2013 - 3/31/2014 with LOS at least 12 months	7,026	9,002	78.0%
10/1/2013 – 9/30/2014	All children served from 10/1/2013 - 9/30/2014 with LOS at least 12 months	7,590	9,763	77.7%
4/1/2014 – 3/31/2015	All children served from 4/1/2014 - 3/31/2015 with LOS at least 12 months	8,263	10,522	78.5%

10/1/2014 – 9/30/2015	All children served from 10/1/2014 - 9/30/2015 with LOS at least 12 months	8,334	10,691	78.0%
4/1/2015 – 3/31/2016	All children served from 4/1/2015 - 3/31/2016 with LOS at least 12 months	8,122	10,445	77.8%
10/1/2015 – 9/30/2016	All children served from 10/1/2015 - 9/30/2016 with LOS at least 12 months	7,871	10,172	77.4%
4/1/2016 – 3/31/2017	All children served from 4/1/2016 - 3/31/2017 with LOS at least 12 months	7,479	9,583	78.0%
10/1/2016 – 9/30/2017	All children served from 10/1/2016 - 9/30/2017 with LOS at least 12 months	7,112	9,071	78.4%
4/1/2017 – 3/31/2018	All children served from 4/1/2017 - 3/31/2018 with LOS at least 12 months	6,888	8,711	79.1%
10/1/2017 – 9/30/2018	All children served from 10/1/2017 - 9/30/2018 with LOS at least 12 months	6,659	8,349	79.8%
4/1/2018 – 3/31/2019	All children served from 4/1/2018 - 3/31/2019 with LOS at least 12 months	6,360	7,996	79.5%
10/1/2018 – 9/30/2019	All children served from 10/1/2018 - 9/30/2019 with LOS at least 12 months	6,172	7,737	79.8%
4/1/2019 – 3/31/2020	All children served from 4/1/2019 - 3/31/2020 with LOS at least 12 months	5,883	7,390	79.6%
Target				88.0%

Section 2, Table 4.2-1
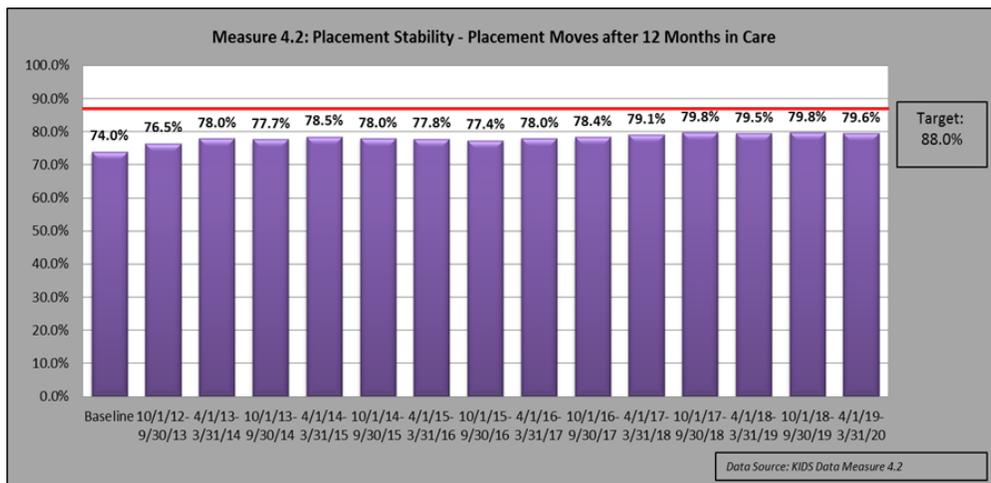
Section 2, Graph 4.2-1

Removal Month	First Placement Kinship		
	Children Placed in Kinship as 1st Placement	Children Removed during Month and Entered in Countable Placement	% of Kinship as 1st Placement
Baseline: Jul - Dec 2016	878	2540	34.6%
Jan-17	122	399	30.6%
Feb-17	190	443	42.9%
Mar-17	206	517	39.8%
Apr-17	162	432	37.5%
May-17	151	397	38.0%
Jun-17	170	410	41.5%
Jan - Jun 2017	1001	2598	38.5%
Jul-17	176	398	44.2%
Aug-17	240	489	49.1%
Sep-17	158	373	42.4%
Oct-17	149	357	41.7%
Nov-17	136	344	39.5%
Dec-17	150	303	49.5%
Jul - Dec 2017	1009	2264	44.6%
Jan-18	188	402	46.8%
Feb-18	146	350	41.7%
Mar-18	147	312	47.1%
Apr-18	183	353	51.8%
May-18	197	389	50.6%
Jun-18	188	332	56.6%
Jan - Jun 2018	1049	2138	49.1%
Jul-18	163	344	47.4%
Aug-18	213	431	49.4%
Sep-18	157	379	41.4%
Oct-18	139	307	45.3%
Nov-18	118	299	39.5%
Dec-18	169	353	47.9%
Jul - Dec 2018	959	2113	45.4%
Jan-19	146	349	41.8%
Feb-19	146	338	43.2%
Mar-19	168	333	50.5%
Apr-19	163	352	46.3%
May-19	181	338	53.6%
Jun-19	170	335	50.7%
Jan - Jun 2019	974	2045	47.6%
Jul-19	126	331	38.1%
Aug-19	205	435	47.1%
Sep-19	152	363	41.9%
Oct-19	182	379	48.0%
Nov-19	126	296	42.6%
Dec-19	145	303	47.9%
Jul - Dec 2019	936	2107	44.4%
Jan-20	169	359	47.1%
Feb-20	169	332	50.9%
Mar-20	139	297	46.8%
Apr-20	104	225	46.2%
May-20	147	306	48.0%
Jun-20	162	336	48.2%
Jan - Jun 2020	890	1855	48.0%

Data Source: Baseline-YI844; Run Date: 7/19/2017. YI867: Jan- Sept 2017; Run Date: 10/19/17, Oct 17- Mar 19; Run Date: 10th of each month (report on 45 day lag).

Section 2, Table 4.2-2

Placement Stability						
Placement Stability Efforts	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20
Resource Check-In Call	86.7%	88.8%	92.8%	93.1%	85.8%	89.1%
Initial Meeting	76.0%	65.1%	73.7%	72.8%	65.3%	68.0%
First Placement Kinship	47.1%	50.9%	46.8%	46.2%	48.0%	48.2%
Quarterly Visit	96.2%	96.3%	95.3%	96.1%	94.8%	93.1%
Subsequent Initial Meetings	40.6%	30.4%	38.7%	49.8%	48.5%	49.3%
Data Source: YI867 & YI827; Run Date: 10th of each month. Data on 45 day lag. YI840 monthly after 5th for Quarterly Visits.						

Section 2, Table 4.2-3

Commentary

During this reporting period, Child Welfare Services (CWS) improved in one of the four measures for placement stability. CWS saw a slight decrease of 0.4 percent in Measure 4.1a from 79.5 percent to 79.1 percent. Even with this slight decrease, performance is 9.1 percent above the baseline data. Measure 4.1b saw a decrease of 1.1 percent from 63.1 percent to 62.0 percent. Measure 4.1c increased by 1.0 percent, for an overall total of 34.1 percent, which is the fifth period of consecutive, positive trending. This is the highest overall percentage seen in Measure 4.1c since Pinnacle Plan reporting began. Measure 4.2 saw a slight decrease of 0.2 percent making the overall performance 79.6 percent. The measure is 5.6 percent above the original baseline.

Placement Stability Efforts

Placement stability efforts are continually examined and explored to ensure a continuous quality improvement approach is taken to improve outcomes. Striving towards a proactive self-correcting system is vital to encourage forward thinking and continued improvement with child placement stability. The process of gathering information to learn what is going well to improve outcomes and offer supports and resources to address areas needing improvement is carried out by analyzing both qualitative and quantitative data available from an ongoing occurrence.

Since the last reporting period, the Placement Stability team continued to review the quality of initial meetings (IMs) by using documentation gathered and shared, and reviewing the Child and Resource Family Support Plans created during IMs. The individual case-specific information gathered from the reviews points out both strengths and areas needing improvement, and is then provided to the Placement Stability regional leads that share the information with those responsible for the work. This sharing is in addition to regional quantitative data provided to seek out continuous opportunities for both quantitative and qualitative improvements. The qualitative review results revealed an increase in parent participation and the creation of support plans, which fulfill the two main purposes for holding IMs. Region 1 IM's are consistently on target with documenting the purpose as intended and uploading support plans into KIDS. The IM review findings from the remaining regions initially consisted of other interactions with families such as transfer meetings, worker visits with foster parents, as well as telephone calls inquiring about the well-being of children after placement in foster homes. Since the IM reviews were initiated on a monthly basis with specific IM review feedback provided to regional leadership, a noticeable increase occurred in IMs satisfying an IMs two purposes:

- Foster parents meeting with a child's parents to take a team approach to placement stability for the child; and
- Creating the Child and Resource Family Support Plans to support the placement and then uploaded into KIDS.

With a focus on placement stability efforts, the data on timing and staff responsible for IMs, particularly at removal, was examined to determine if IMs were held at the right time and facilitated by the right people with the case circumstances to produce quality support plans. An increase in the quality of IMs, the number of IMs held timely, and parent participation was predicted when the timeframe for completion was expanded from occurring within 10-business days of placement to 30-calendar days. This prediction takes into consideration the increased emotional levels that parents experience following a child's removal, as well as Child Protective Services (CPS) specialists have higher priority demands during the first week after removal. This adjustment to when to conduct the IM was proposed and approved by the CWS Executive Team and *CWS Numbered Memo 20-04 Placement Stability Practice Updates* was disseminated electronically to all child welfare (CW) staff on 2/12/2020. Feedback was solicited from a limited number of staff

towards the end of March 2020 inquiring about the existence of any barriers to successfully implementing the timeframe change. Input revealed all staff needed to be reminded to not wait until an IM to relay critical known information about children to resource parents. Therefore, the Resource Parent Check-In Call Guide for staff was updated to include relay information, such as medical needs, during the call made two-business days after placement and continue to provide resource parents with any known pertinent and critical information about the child immediately upon placement. As a follow-up, additional feedback is in the process of being collected. The feedback will be used to determine if there are any additional barriers that indicate a need for more support or guidance.

Subsequent IM data is gathered, analyzed, and disseminated in addition to the first IM after removal data. This subsequent IM data is provided directly to the regional deputy directors, placement stability leads, and district directors in every region. The Placement Stability lead requested this data be broken down in the future into a district chart to make it easier for regional staff to determine how individual districts are progressing with the completion of subsequent IMs. This breakdown change began in February 2020 and is now included in the monthly subsequent IM data.

The Placement Stability team understands and continues to discuss the importance of how placement stability connects to safety, permanency, and well-being for children in out-of-home (OOH) care. CWS is acutely aware when children are in a stable placement, they are more likely to be safe, have their well-being needs met, and move to permanency safely and timely. When children are in stable placements, CW staff is better able to engage parents in services and visitations, which contributes to permanency. In addition, when children are stable in placements, resource parents are receiving the necessary supports that assist with retention and recruitment.

Training
CWS continues to work with the University of Oklahoma (OU) and CWS Training to finalize the online Placement Stability training to support all CW specialists. Unanticipated barriers for completion and launching the online training developed including a reassignment of the placement stability OKDHS lead, an organizational change/alignment of the OU director and production team, as well as the COVID-19 pandemic. Despite the numerous delays, the training was finalized and became available to all CW specialist on 7/14/2020 for mandatory completion.

Move Report
Beginning with June 2019, the Move Report was altered for staff to select specific KIDS pick-list barriers for children moving from any type of placement, for first placement upon removal, and for second placement when their second placement was a kinship placement. Data collected from staff up to December 2019 removals revealed the most common barrier which could be used in the data analysis was the family the child was now being placed with after their first placement was not identified by CPS. This data collection had several limitations as there was no second level Quality Assurance (QA) process to go into each individual child's case to determine if the correct barrier was selected. The barrier of family not identified by CPS was not clarified and could be interpreted differently amongst staff. Regardless, it provided a more defined approach of supports and resources staff may need to identify kinship upon or prior to removal to increase first placement kinship efforts.

The Move Report data revealed supports and resources needed to identify possible kinship placements during the CPS process. The emphasis for staff is on using *Important People in the Child's Life-Family Tree Form* as a tool to gather contact information about potential first kinship placements in the event removal is inevitable. The messaging was about the importance of beginning to gather information upfront during the investigation process and collecting details for family identified supports, connections, and placements, instead of waiting until after removal to begin seeking out this vital information. This work is also a result of a virtual meeting with the Co-Neutrals on 3/31/2020 when it was suggested to consider all points of opportunities to collect information upfront prior to removal in addition to child safety meetings (CSMs).

The Move Report is also utilized to identify the top five reasons for moves statewide and regionally. The data is collected, analyzed monthly, and provided to all CW district directors and deputy directors; thus, highlighting an

awareness of why the majority of children are experiencing multiple placement episodes. It is also used to determine the guidance needed to equip staff in selecting the most appropriate reason in KIDS as to why children are moved from one placement into another.

Kinship, Resource Parent Check-In Call, IM, and Resource Quarterly Visits
The emphasis on children placed initially in kinship continues as a significant focus. The use of CSM monthly data brings awareness of placement recommendations for child removal.   This data provides the comparison percentages of recommendations for kinship, foster home, group home, shelter, residential treatment, and own home.   This data emphasizes the comparison of kinship placement to all other placement types and the need for it to be higher with the understanding that increasing the likelihood of a child placement with kin requires recommending it first. ***Statewide CSM Protocol May 2020*** was updated regarding timeframes, documentation, and virtual meetings, and was provided to all CW staff on 7/2/2020 along with updated ***Safety Guidance 2020 - CSM***. Plans are underway at this time for the CSM lead to partner with CSM regional supervisors to update back-to-basics CSM training, utilizing current data to guide the training needs per district including conducting a CSM within two-business days, as well as instructing that best practice is to have a meeting before the child has to move. Monthly data is also sent to leadership to identify timeliness of meetings being held to aid regional and district leadership in coaching staff about adhering to the CSM model.

Continued focus is on the efforts of completing Child and Resource Family Support Plans during IMs as well as considering the quality of those being completed. The IM reviews conducted also provide feedback to leadership as to whether or not support plans were created and scanned into the KIDS File Cabinet. As a result of this feedback loop, the reviews revealed the majority of IMs reviewed do align with the IM's intent as evidenced by increased parent participation and the higher number of support plans created.

CWS continues to learn and self-correct placement stability practices. CWS stays focused on coaching staff on the importance of early family engagement and identification of services, resources, and supports. Moving forward, CWS will remain focused on current practices, with an emphasis on quality IMs, ensuring IMs occur in subsequent placements, the creation of Child and Resource Family Support Plans, providing supports and guidance to overcome barriers to first placement kinship, analyzing the prominent reasons children are moving monthly, and finalization of the online training.

Conclusion
CWS has made progress in all Placement Stability metrics since focusing on this strategy to minimize placement episodes for children. Measure 4.1c increased by 1.0 percent, for an overall total of 34.1 percent, which is the fifth period of consecutive, positive trending. This is the highest overall percentage seen in Measure 4.1c since Pinnacle Plan reporting began. However, CWS also recognizes the overall plateau occurring in the placement stability measurements, as well as the uncertainty the COVID-19 pandemic brings to placement stability. CWS was thoughtful in tying COVID-19 relief payments for foster parents to support placement stability, and is developing additional strategies including efforts to place more emphasis on relative placement, data driven district planning, and higher level leadership involvement in placement stability efforts. CWS is continuously examining opportunities for improvements in the quality of work conducted to achieve the targeted goals in each metric.

5.1: Shelter Use—Children ages 0 to 1 year old

Operational Question
Of all children ages 0-1 year old with an overnight shelter stay from 1/1/2020 through 6/30/2020, how many nights were spent in the shelter?

Data Source and Definitions
Data shown is the total number of nights children ages 0-1 year old spent in the shelter during the time period from 1/1/2020 through 6/30/2020. The baseline for this measure was 2,923 nights with a target of 0 nights by 12/31/2012.

Automatic exceptions are made when the child is part of a sibling set of four or more or when a child is placed with a minor parent who is also in the Oklahoma Human Services (OKDHS) custody. Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.

Trends

Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 0-1 year with an overnight shelter stay from 1/1/2012 – 6/30/2012	2,923 Nights
7/1/2013 – 12/31/2013	All children age 0-1 year with an overnight shelter stay from 7/1/2013 – 12/31/2013	843 Nights
1/1/2014 – 6/30/2014	All children age 0-1 year with an overnight shelter stay from 1/1/2014 – 6/30/2014	190 Nights
7/1/2014 – 12/31/2014	All children age 0-1 year with an overnight shelter stay from 7/1/2014 – 12/31/2014	505 Nights
1/1/2015 – 6/30/2015	All children age 0-1 year with an overnight shelter stay from 1/1/2015 – 6/30/2015	624 Nights
7/1/2015 – 12/31/2015	All children age 0-1 year with an overnight shelter stay from 7/1/2015 – 12/31/2015	189 Nights
1/1/2016 – 6/30/2016	All children age 0-1 year with an overnight shelter stay from 1/1/2016 – 6/30/2016	2 Nights
7/1/2016 – 12/31/2016	All children age 0-1 year with an overnight shelter stay from 7/1/2016 – 12/31/2016	0 Nights
1/1/2017 – 6/30/2017	All children age 0-1 year with an overnight shelter stay from 1/1/2017 – 6/30/2017	0 Nights
7/1/2017 – 12/31/2017	All children age 0-1 year with an overnight shelter stay from 7/1/2017 – 12/31/2017	0 Nights
1/1/2018 – 6/30/2018	All children age 0-1 year with an overnight shelter stay from 1/1/2018 – 6/30/2018	0 Nights
7/1/2018 – 12/31/2018	All children age 0-1 year with an overnight shelter stay from 7/1/2018 – 12/31/2018	0 Nights
1/1/2019 – 6/30/2019	All children age 0-1 year with an overnight shelter stay from 1/1/2019 – 6/30/2019	0 Nights
7/1/2019 – 12/31/2019	All children age 0-1 year with an overnight shelter stay from 7/1/2019 – 12/31/2019	0 Nights
1/1/2020 – 6/30/2020	All children age 0-1 year with an overnight shelter stay from 1/1/2020 – 6/30/2020	0 Nights
Target		0 Nights

Section 2, Table 5.1-1
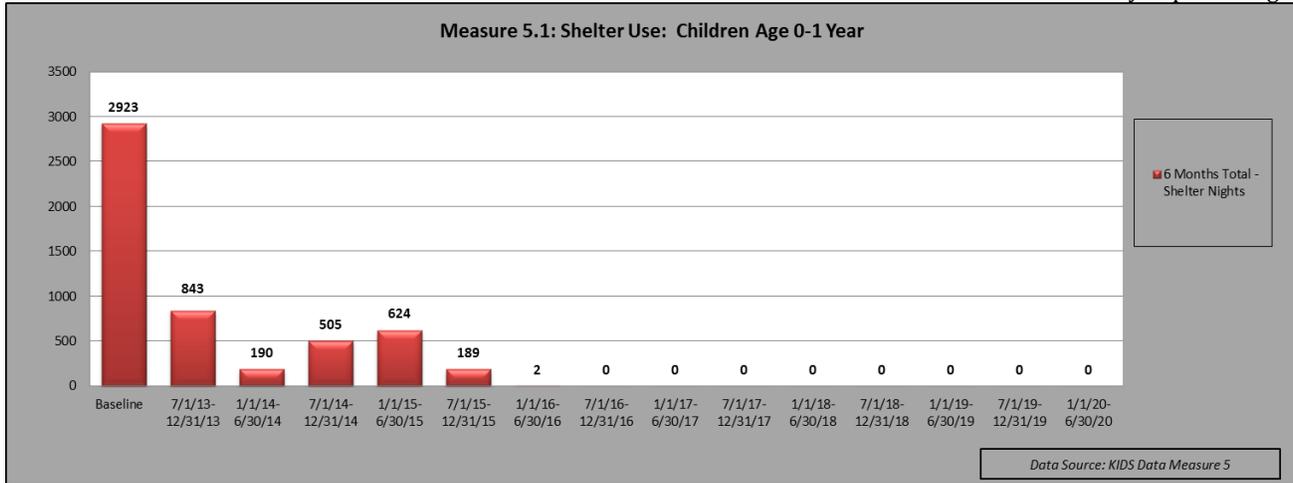
Section 2, Graph 5.1-1

Commentary

There were 0 children, age 0-1 year, who spent a night in the shelter from 1/1/2020 through 6/30/2020. During this time period, 1,997 children, ages 0-1 year. were in care and 100 percent of those children did not have a shelter stay. A child under the age of 2 years old has not been placed overnight in the shelter since January 2016.

5.2: Shelter Use—Children ages 2 to 5 years old

Operational Question

Of all children ages 2-5 years old with an overnight shelter stay from 1/1/2020 through 6/30/2020, how many nights were spent in the shelter?

Data Source and Definitions

Data shown is the total number of nights children ages 2-5 years old spent in the shelter during the time period from 1/1/2020 through 6/30/2020. The baseline for this measure was 8,853 nights with a target of 0 nights by 6/30/2013. Automatic exceptions are made when the child is part of a sibling set of four or more or a child is placed with a minor parent who is also in OKDHS custody. Note: Children who meet automatic exceptions are still included in the count of total nights spent in the shelter.

Trends

Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 2-5 years with an overnight shelter stay from 1/1/2012 – 6/30/2012	8,853 Nights
7/1/2013 – 12/31/2013	All children age 2-5 years with an overnight shelter stay from 7/1/2013 – 12/31/2013	4,357 Nights
1/1/2014 – 6/30/2014	All children age 2-5 years with an overnight shelter stay from 1/1/2014 – 6/30/2014	2,080 Nights
7/1/2014 – 12/31/2014	All children age 2-5 years with an overnight shelter stay from 7/1/2014 – 12/31/2014	2,689 Nights
1/1/2015 – 6/30/2015	All children age 2-5 years with an overnight shelter stay from 1/1/2015 – 6/30/2015	2,275 Nights
7/1/2015 – 12/31/2015	All children age 2-5 years with an overnight shelter stay from 7/1/2015 – 12/31/2015	1,340 Nights
1/1/2016 – 6/30/2016	All children age 2-5 years with an overnight shelter stay from 1/1/2016 – 6/30/2016	137 Nights
7/1/2016 – 12/31/2016	All children age 2-5 years with an overnight shelter stay from 7/1/2016 – 12/31/2016	7 Nights

| 1/1/2017 – 6/30/2017	All children age 2-5 years with an overnight shelter stay from 1/1/2017 – 6/30/2017	75 Nights
7/1/2017 – 12/31/2017	All children age 2-5 years with an overnight shelter stay from 7/1/2017 – 12/31/2017	130 Nights
1/1/2018 – 6/30/2018	All children age 2-5 years with an overnight shelter stay from 1/1/2018 – 6/30/2018	148 Nights
7/1/2018 – 12/31/2018	All children age 2-5 years with an overnight shelter stay from 7/1/2018 – 12/31/2018	4 Nights
1/1/2019 – 6/30/2019	All children age 2-5 years with an overnight shelter stay from 1/1/2019 – 6/30/2019	60 Nights
7/1/2019 – 12/31/2019	All children age 2-5 years with an overnight shelter stay from 7/1/2019 – 12/31/2019	0 Nights
1/1/2020 – 6/30/2020	All children age 2-5 years with an overnight shelter stay from 1/1/2020 – 6/30/2020	1 Night
Target		0 Nights

Section 2, Table 5.2-1
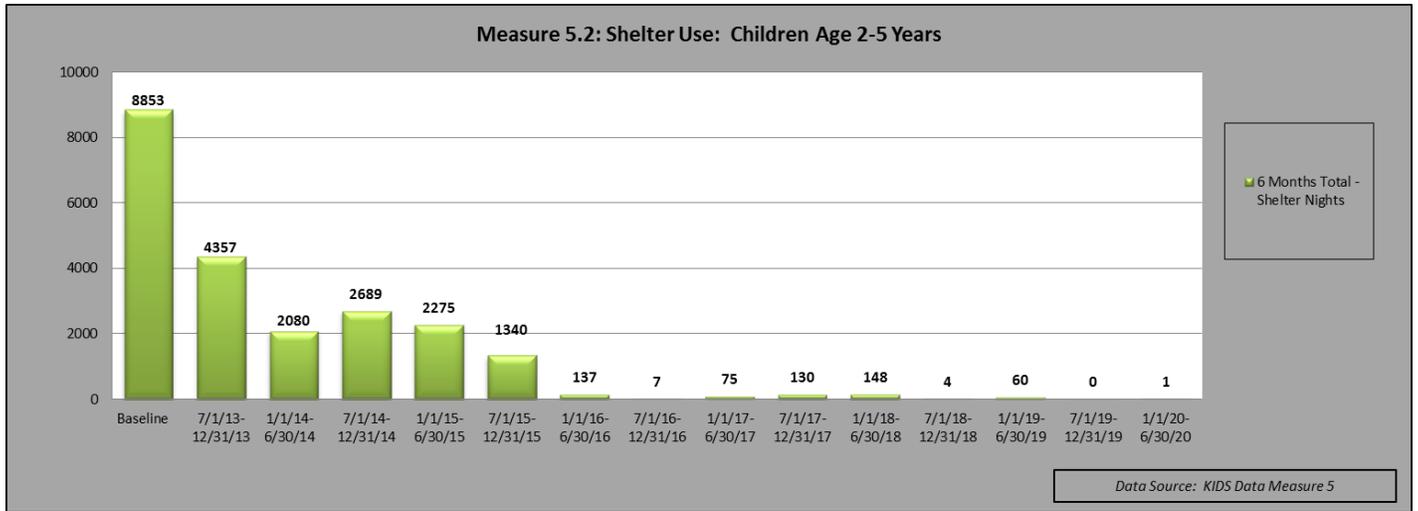
Section 2, Graph 5.2-1

Section 2, Graph 5.2-2

Measure 5.2: Monthly Children in Shelter, Age 2-5
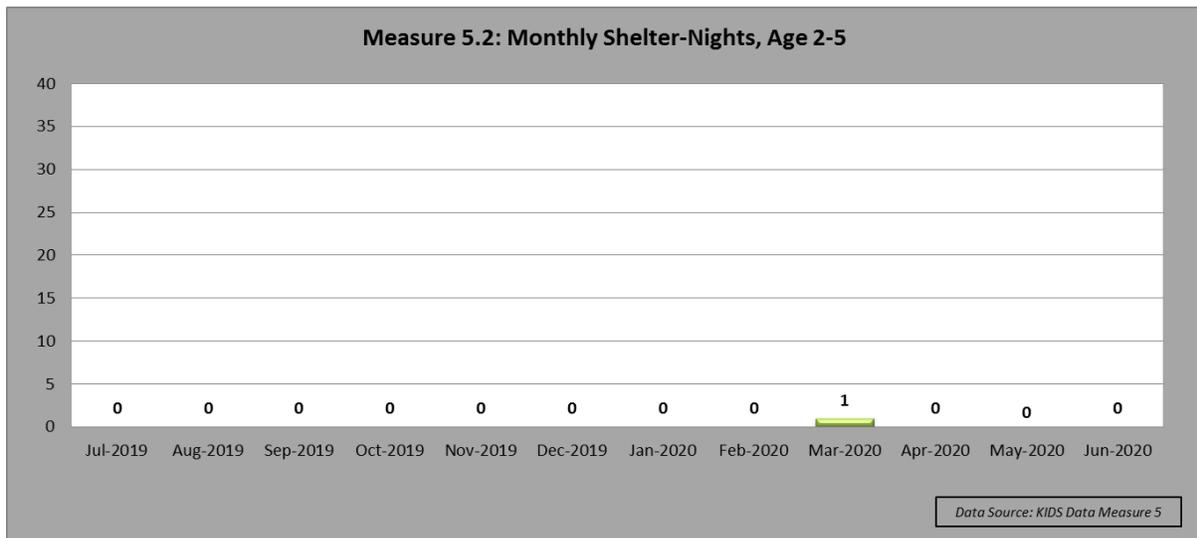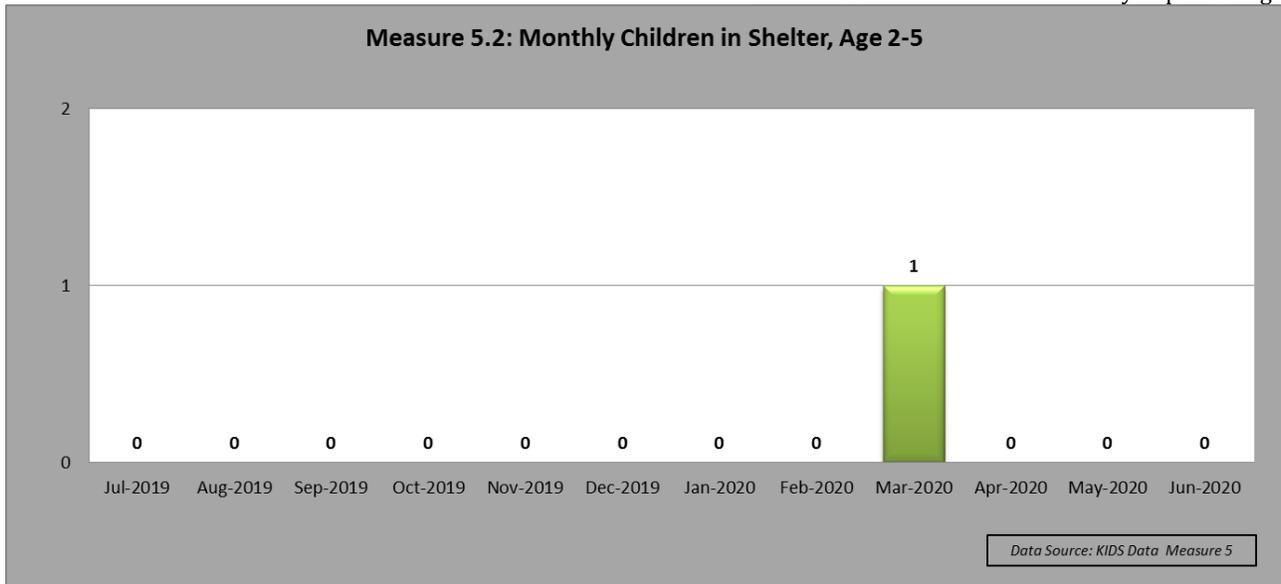
Section 2, Graph 5.2-3

Commentary

One child, age 2-5 years, spent one night in the shelter from 1/1/2020 through 6/30/2020. During this time, 3,020 children, ages 2-5 years, were in care and 99.9 percent of those children did not have a shelter stay. This one child met the sibling exceptions as she was part of a sibling set of five, and all five siblings were placed together in the shelter, for onw night, afterhours, during the begining of the COVID-19 pandemic.

5.3: Shelter Use—Children ages 6 to 12 years old

Operational Question

Of all children ages 6-12 years old with an overnight shelter stay from 1/1/2020 through 6/30/2020, how many nights were spent in the shelter?

Data Source and Definitions

Data shown is the total number of nights children ages 6-12 years old spent in the shelter during the time period from 1/1/2020 through 6/30/2020. The baseline for this measure was 20,147 nights with an interim target of 10,000 nights by 12/31/2013. An automatic exception is made when the child is part of a sibling set of four or more. Note: Children who meet an automatic exception are still included in the count of total nights spent in the shelter.

Trends

Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 6-12 years with an overnight shelter stay from 1/1/2012 – 6/30/2012	20,147 Nights
7/1/2013 – 12/31/2013	All children age 6-12 years with an overnight shelter stay from 7/1/2013 – 12/31/2013	23,127 Nights
1/1/2014 – 6/30/2014	All children age 6-12 years with an overnight shelter stay from 1/1/2014 – 6/30/2014	22,288 Nights
7/1/2014 – 12/31/2014	All children age 6-12 years with an overnight shelter stay from 7/1/2014 – 12/31/2014	18,631 Nights
1/1/2015 – 6/30/2015	All children age 6-12 years with an overnight shelter stay from 1/1/2015 – 6/30/2015	13,867 Nights
7/1/2015 – 12/31/2015	All children age 6-12 years with an overnight shelter stay from 7/1/2015 – 12/31/2015	10,188 Nights

1/1/2016 – 6/30/2016	All children age 6-12 years with an overnight shelter stay from 1/1/2016 – 6/30/2016	4,158 Nights
7/1/2016 – 12/31/2016	All children age 6-12 years with an overnight shelter stay from 7/1/2016 – 12/31/2016	5,052 Nights
1/1/2017 – 6/30/2017	All children age 6-12 years with an overnight shelter stay from 1/1/2017 – 6/30/2017	6,232 Nights
7/1/2017 – 12/31/2017	All children age 6-12 years with an overnight shelter stay from 7/1/2017 – 12/31/2017	8,048 Nights
1/1/2018 – 6/30/2018	All children age 6-12 years with an overnight shelter stay from 1/1/2018 – 6/30/2018	7,085 Nights
7/1/2018 – 12/31/2018	All children age 6-12 years with an overnight shelter stay from 7/1/2018 – 12/31/2018	5,453 Nights
1/1/2019 – 6/30/2019	All children age 6-12 years with an overnight shelter stay from 1/1/2019 – 6/30/2019	4,581 Nights
7/1/2019 – 12/31/2019	All children age 6-12 years with an overnight shelter stay from 7/1/2019 – 12/31/2019	5,063 Nights
1/1/2020 – 6/30/2020	All children age 6-12 years with an overnight shelter stay from 1/1/2020 – 6/30/2020	3,915 Nights
Target		0 Nights

Section 2, Table 5.3-1

Section 2, Graph 5.3-1

Measure 5.3: Monthly Shelter-Nights, Age 6-12

Section 2, Graph 5.3-2

Measure 5.3: Monthly Children in Shelter, Age 6-12
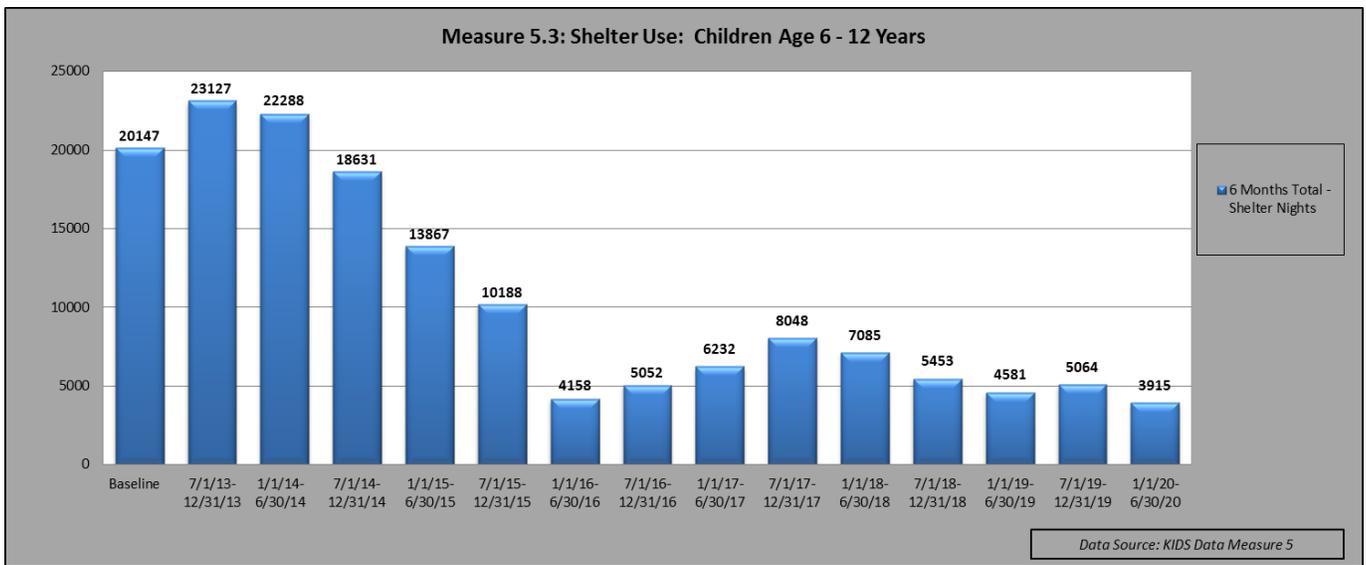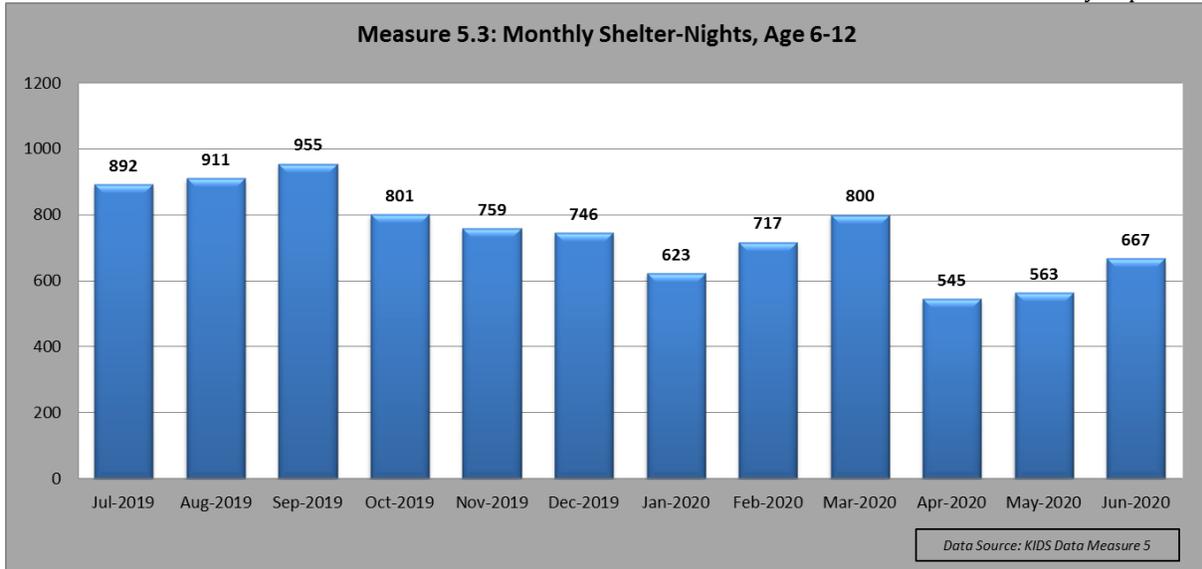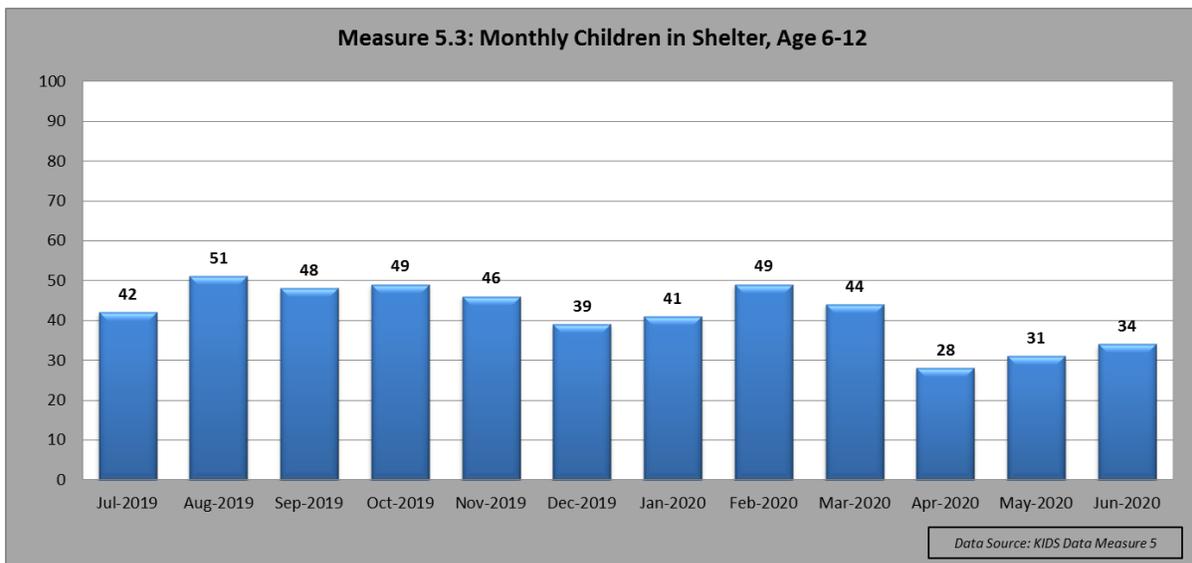
Section 2, Graph 5.3-3

Commentary

A total of 99 distinct children, ages 6-12 years old, spent a total of 3,915 nights in the shelter from 1/1/2020 through 6/30/2020. Section 2, Graph 5.3-3 identifies 227 children spending time in shelters from January through June 2020. In some cases, the child's shelter stay extended across multiple months, thus the child is included in the count for both months. During this time period, 3,131 children, ages 6-12 years old, were in care and 96.8 percent of those children did not have a shelter stay.

5.4: Shelter Use—Children ages 13 and older

Operational Question

Of all children ages 13 years or older with an overnight shelter stay from 1/1/2020 through 6/30/2020, how many nights were spent in the shelter?

Data Source and Definitions

Data shown is the total number of nights children ages 13 years or older spent in the shelter during the time period from

1/1/2020 through 6/30/2020. The baseline for this measure is 20,635 nights with a target of 13,200. Of the children 13 years and older placed in a shelter during this period, the target is 80 percent of the children will meet the criteria of Pinnacle Plan Point 1.17. An automatic exception is made for children when the child is part of a sibling set of four or more. Note: Children who meet and automatic exception are still included in the count of total nights spent in the shelter.

Trends

| Reporting Period	Population	Result
Baseline: 1/1/2012 – 6/30/2012	All children age 13 or older with an overnight shelter stay from 1/1/2012 – 6/30/2012	20,635 Nights
7/1/2013 – 12/31/2013	All children age 13 or older with an overnight shelter stay from 7/1/2013 – 12/31/2013	25,342 Nights
1/1/2014 – 6/30/2014	All children age 13 or older with an overnight shelter stay from 1/1/2014 – 6/30/2014	24,935 Nights
7/1/2014 – 12/31/2014	All children age 13 or older with an overnight shelter stay from 7/1/2014 – 12/31/2014	25,108 Nights
1/1/2015 – 6/30/2015	All children age 13 or older with an overnight shelter stay from 1/1/2015 – 6/30/2015	24,552 Nights
7/1/2015 – 12/31/2015	All children age 13 or older with an overnight shelter stay from 7/1/2015 – 12/31/2015	18,277 Nights
1/1/2016 – 6/30/2016	All children age 13 or older with an overnight shelter stay from 1/1/2016 – 6/30/2016	10,478 Nights
7/1/2016 – 12/31/2016	All children age 13 or older with an overnight shelter stay from 7/1/2016 – 12/31/2016	12,048 Nights
1/1/2017 – 6/30/2017	All children age 13 or older with an overnight shelter stay from 1/1/2017 – 6/30/2017	14,893 Nights
7/1/2017 – 12/31/2017	All children age 13 or older with an overnight shelter stay from 7/1/2017 – 12/31/2017	14,021 Nights
1/1/2018 – 6/30/2018	All children age 13 or older with an overnight shelter stay from 1/1/2018 – 6/30/2018	12,058 Nights
7/1/2018 – 12/31/2018	All children age 13 or older with an overnight shelter stay from 7/1/2018 – 12/31/2018	10,178 Nights
1/1/2019 – 6/30/2019	All children age 13 or older with an overnight shelter stay from 1/1/2019 – 6/30/2019	9,118 Nights
7/1/2019 – 12/31/2019	All children age 13 or older with an overnight shelter stay from 7/1/2019 – 12/31/2019	11,427 Nights
1/1/2020 – 6/30/2020	All children age 13 or older with an overnight shelter stay from 1/1/2020 – 6/30/2020	11,425 Nights
Target		8,850 Nights

Section 2, Table 5.4-1
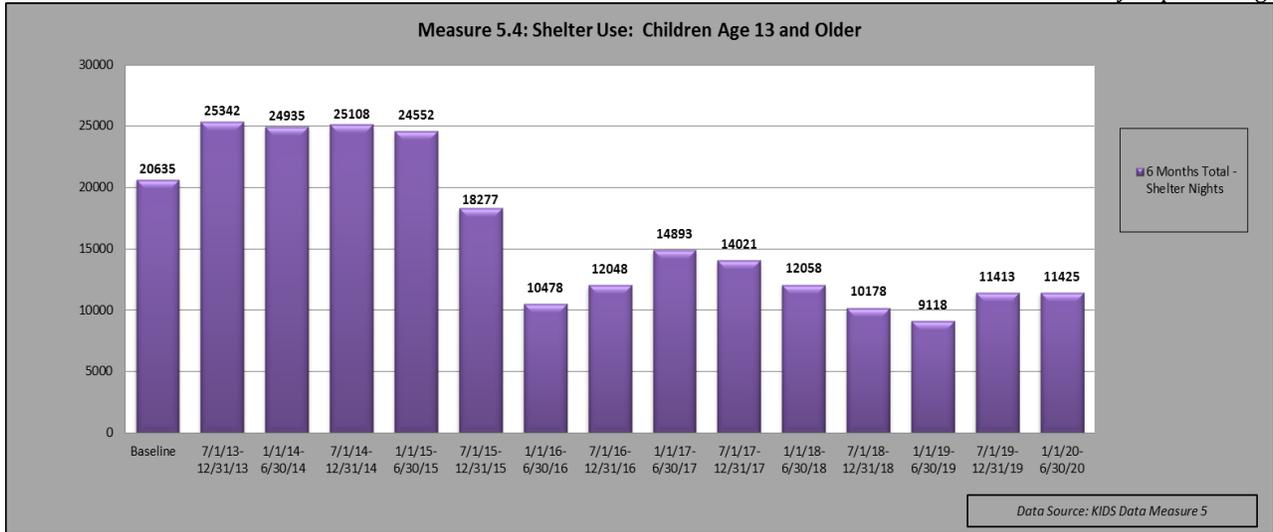
Section 2, Graph 5.4-1
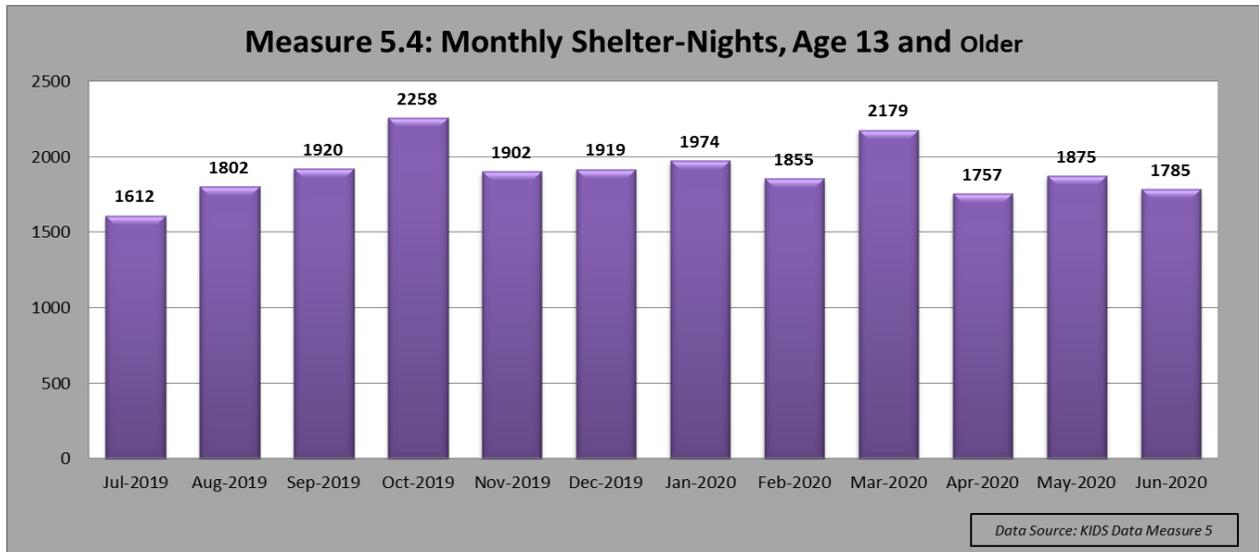

Section 2, Graph 5.4-2
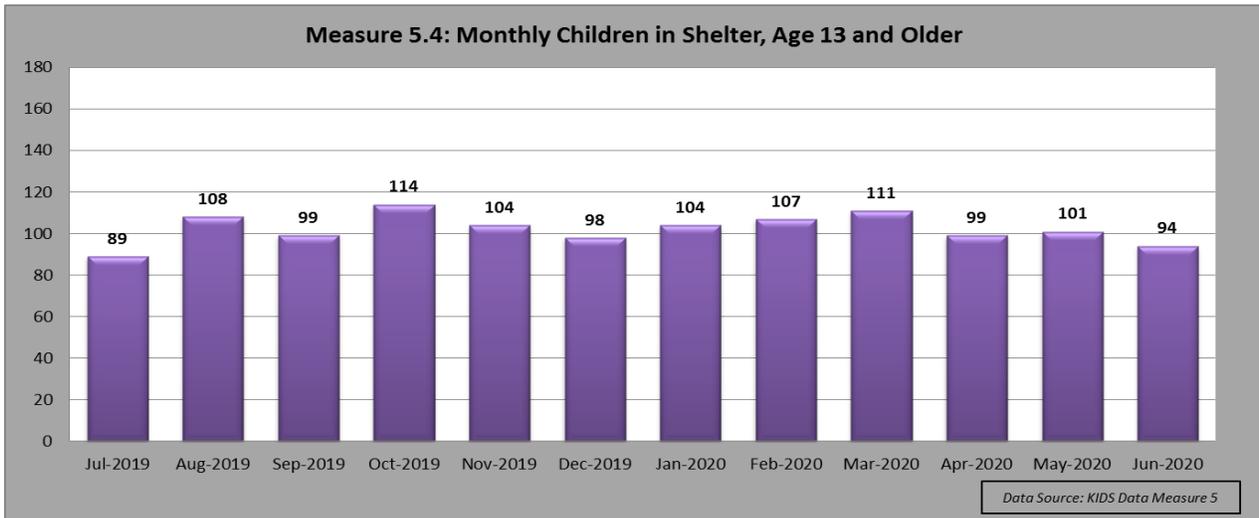
Section 2, Graph 5.4-3

Commentary

A total of 241 distinct children, ages 13 years or older, spent a total of 11,425 nights in shelter care from 1/1/2020 through 6/30/2020. Section 2, Graph 5.4-3 identifies 616 children spending time in shelters from January through June 2020. In some cases, the child's shelter stay extended across multiple months; thus, the child is included in the count for both months. During this time period, 1,510 children, ages 13 years or older, were in care and 84.0 percent of those children did not have a shelter stay.

Initiative 1.17: Youth 13 years and older not to be placed in a shelter more than one time within a 12-month period and for no more than 30 days in any 12-month period.
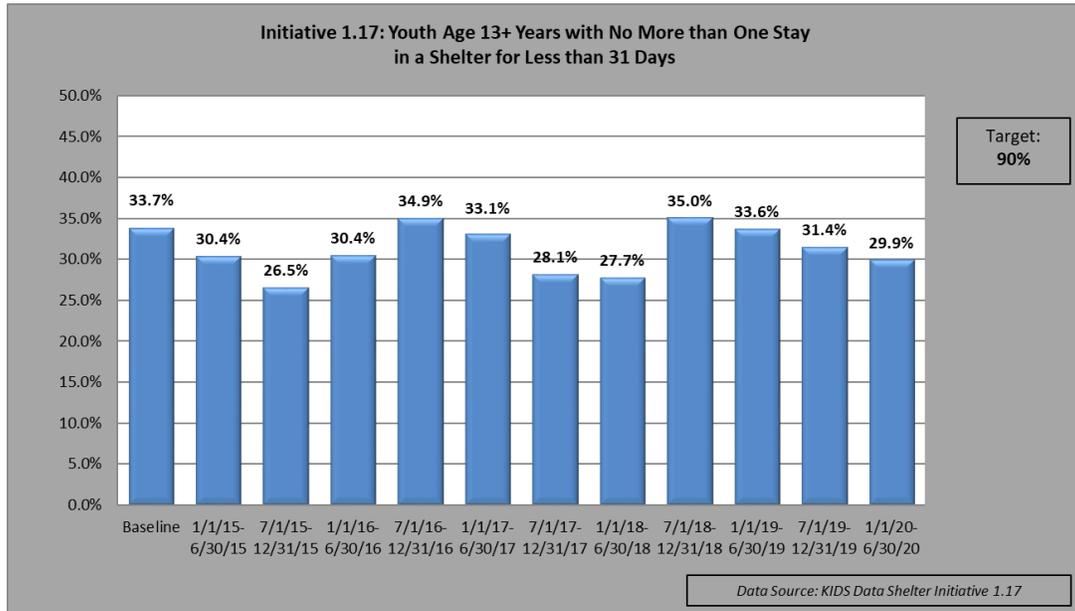
Section 2, Graph 5.4-4

Commentary

For the six-month period ending 6/30/2020, 29.9 percent of youth, age 13 and older, experienced no more than one stay in the shelter lasting less than 31 days. Of the 241 youth, age 13 and older, who had a shelter stay during the reporting period, 72 youth had one shelter stay lasting less than 31 days. Of the remaining 169 youth, age 13 and up, who had a shelter stay: 73 youth, 30.3 percent, had one stay that lasted longer than 31 days; 19 youth, 7.9 percent, had two or more stays that lasted less than 31 days; and 77 youth, 31.9 percent, had two or more stays that lasted more than 31 days in the shelter.

Summary of Data

Child Welfare Services (CWS) continues active engagement in the efforts defined in the Enhanced Shelter Reduction Plan, as well as other activities directed toward ensuring all children have access to safe, needs-based placements. For this reporting period, shelter utilization for children ages 0-1 continues to be completely eliminated. One night was used for children ages 2-5. This child was part of a sibling group of five that met the automatic exception; the removal happened late at night; and the younger children exited to a traditional foster home the following day.

For children ages 6-12, the number of shelter nights for this reporting period decreased by 1,049 total shelter nights from the previous reporting period, and remains less than the number of shelter nights, 566 fewer nights, for this cohort compared to the same reporting period in the previous year. This number was the fewest nights in shelter for children ages 6-12 since the beginning of the reform.

For youth 13 and older, a slight increase occurred in the number of shelter nights, 12 nights, from the previous reporting period. CWS reduced the number of shelter nights for youth ages 13-17 by over half in the last five years. However,

CWS recognizes much more work must be done to both prevent and decrease shelter usage for this age group. The slight increase in the number of youth served and number of nights utilized continues to highlight the need for CWS field leadership to work with both shelter and community partners to develop the appropriate capacity and continuum of care to further reduce the need for shelter care. For Initiative 1.17, which reflects youth who are not to be placed in shelter care more than one time during a 12-month period and with a shelter stay lasting no more than 30 days, this reporting period continues to see a similar percent of youth who exit shelter care in less than 31 days and did not return in the following 12 months.

The CWS Executive Team continued its focus on creating and supporting practices that keep children with families. This reporting period, all CWS programs and field staff leadership collaborated to initiate enhanced activities that impact shelter reduction while shifting from activities that are no longer effective.

Enhanced Shelter Reduction Plan Update
The Enhanced Shelter Reduction Plan aligns practices across regions to ensure all children have regular, meaningful staffing with support of CWS program staff and the region's leadership to identify the appropriate placements for children. This plan utilizes the uniform shelter staffing protocol and guide for documentation. The regional shelter leads continue to conduct a shelter staffing for all children every other week as a minimum standard. In this reporting period, enhancements to the shelter reduction plan included:

- Continued streamlining of regional efforts that occur prior to the elevated shelter staffing.
- A new program supervisor onboarded and began reaching out to resource family partner (RFP) and therapeutic foster care (TFC) agencies directly to discuss placement of youth with long shelter stays. Children needing family based placements are staffed weekly with RFP and TFC agencies as well as with CWS Foster Care staff. This effort was aided by the relationships this person had developed prior to coming to work for CWS.
- Program staff continued the process of building more strength-based narratives about youth when they are in shelter care and being staffed for foster family placements. It was observed that new youth updates with a focus on gathering information from current care providers was helpful in finding a placement and supporting the foster care search efforts.
- Development of a Shelter Discharge Support Planning Tool was developed for providing to specialists upon a youth's shelter discharge to the next placement. The Shelter Discharge Planning Tool supports youth exiting shelter care to be more stable in their next placement and divert them from further shelter care. The Shelter program field representative (PFR) and the regional shelter leads continue to work with Foster Care and Adoptions (FC&A) leadership to bolster efforts to present children and youth in the most transparent way possible with their history, behaviors, and experiences so that families can make informed decisions as to accepting placement.

Elevated staffings, scheduled and facilitated by the Shelter PFR, continue to be seen as a useful tool when children and youth spent an extended time in shelter care. In most occurrences, children and youth have extended shelter stays because of their unique needs that are not easily matched with a typical family setting and/or treatment program. The primary goal of the elevated shelter staffing continues to be eliminating barriers to an appropriate, needs-based family placement when possible. All regional leads continue to identify the elevated staffing process as useful in eliminating shelter care, specifically because of the unique needs of children and youth.

Many of the newly developed shelter prevention strategies focus on efforts to divert from or prevent shelter entry for youth ages 13-17. Additional efforts to develop regional MDT teams will likely impact the current shelter staffing process, through more involvement of regional leadership earlier in the child's shelter stay. As additional strategies are developed, streamlining and building efficiencies will be critical in identifying the needed supports for children and families, ultimately preventing and/or reducing the use of shelters.

Shelter program staff providing updates in regional leadership meetings each quarter was identified as a support by the district directors. The quarterly shelter leads meeting in February 2020 highlighted shared successes in moving youth

out of shelter care, discussion of gaps in the shelter staffing process, potential updates or modifications to the progressive shelter staffing tool, and the need to provide strength-based child profiles to resource and community partners when seeking placement.

A FC&A field manager was added to the ongoing attendance list to further facilitate communication between field staff in Child Protective Services, Permanency Planning and FC&A to identify more potential family-like settings for youth and children in shelter care where appropriate.

The Shelter PFR continues to review all shelter authorization forms and while it has not been seen to have an impact in preventing youth and children from entering shelter care, the review has value by highlighting opportunities to follow-up with potential placement options and identify the youth's best placement. Entering data from this form into the shelter survey database also helps to identify trends and needs for youth entering shelter care. The Enhanced Shelter Reduction Plan has positive impacts and continuous consideration will be given to making plan improvements for increasing its effectiveness to meet the metrics for children and youth in shelter care.

The next set of quarterly meetings with regional leadership will take place in July and August 2020 and include the shelter lead, regional program analyst, and regional deputy director along with the appropriate Specialized Placements and Partnerships Unit (SPPU) shelter team members and executive leadership. These meetings will be held by region and focus on the efficacy of current shelter processes, trends within each region, appropriate use and submission of the shelter authorization form, and further implementation of shelter prevention strategies for the upcoming reporting period. This reporting period, a process enhancement involved the shelter program teams sending weekly data updates to the CWS Executive team with identified areas for attention.

Direct Care Authorization and Other Supports
The contract with four Youth Service shelter providers continues; however, the utilization need decreased. The direct care per diem's goal was to be a short-term support while CWS worked to put into place the best-fit service array for children and youth who could not maintain safely with the typical shelter staffing ratios and services. During this reporting period, only two Youth Service Agencies (YSAs) accessed funding for one-on-one staffing. Additional supports include:
- The CWS team assigned to work with the Oklahoma Human Services (OKDHS) Developmental Disability Services division expanded. The assigned CW staff are instrumental in working quickly to offer support when a child or youth with known or suspected intellectual disability is served in shelter care.
- One-on-one training opportunities continue for shelter staff when appropriate, but the biggest support is the identification of necessary action steps to move children quickly to a more needs-based placement.
- The CWS Nursing team supports YSA shelters when questions arise. Nurses are assigned regionally throughout the state, thus allowing children or youth to be placed in the shelter that keeps them closest to their community or can best meet their specific needs.
- The shelter program has two PFRs who regularly attend the Oklahoma Association of Youth Services Agencies meetings. The shelter directors can contact either their assigned liaison or the two shelter PFRs to get any needed supports when caring for children in OKDHS custody.
- Intensive Treatment Services (ITS) is a seven-day crisis stabilization residential program for children and youth ages eight to 18. The program is designed to provide stabilization in an effort to prevent admission of children and youth to acute or residential psychiatric facilities and in some cases to transition children and youth being discharged from psychiatric acute care. The program provides short-term crisis stabilization services 24-hours a day, seven-days a week. Children and youth have 24-hour awake-supervision, a minimum of five hours of individual counseling, 10 hours of group counseling, and 24-hour access to in-person crisis stabilization as needed. This program can serve up to nine children and youth at a time; however, an average of five to six are placed in this program at the same time. Referrals for crisis stabilization come from the child or youth's assigned child welfare (CW) specialist to the SPPU program PFR or program administrator and the ITS program is one of the resources available. In February 2020, a monthly report was developed by KIDS program staff that provides

information about the children and youth who utilize ITS. The monthly information includes previous placements and discharges, as well as other details that assist in better understanding why these children and youth require ITS. One finding is that many children and youth enter ITS from shelter care because they have elevated behavioral health needs that the shelter is unable to meet. Understanding why children and youth need ITS assists in better discharge planning. Plans are underway for staff to use this report, along with the discharge planning tool, to begin discharge placement planning efforts the day after a child or youth is placed in a shelter.

Office of Juvenile Affairs (OJA)
Beginning 1/1/2020, OJA contracted with 23 YSAs for shelter care. The contracts now include a tier system for rates based on a child or youth's needs. The shelter PFRs and shelter liaisons are available to gather additional information for any YSA shelter and/or OJA when determining the most appropriate tier level for a youth in OKDHS custody. Continued collaboration occurs between CWS and OJA. Currently, three SPPU liaisons are assigned to the 23 youth shelters to provide support to the youth in shelter care, the youth's assigned CW specialist, and the shelter providers. CWS and OJA partners meet through quarterly conference calls; however, due to the COVID-19 pandemic, these calls are being held every four to six weeks to address any ongoing concerns, new protocols, and/or needs. When the pandemic restrictive protocols are lifted, these calls will return to a quarterly basis. The calls were previously shown to be effective in maintaining effective communication between the two entities and building the partnership between CWS and OJA.

Training
The primary goals of the shelter training are:
- Provide clear guidance on the purpose and expectations for the shelter authorization form and progressive shelter staffing tool.
- Review the role of the CW specialist and the shelter when a child is in shelter care.
- Provide detail definitions for other levels of care with program staff contact information.
- Answer questions related to shelter placements and gather ideas about how program staff could better support CW field staff.

This in-person training is now being modified to a webinar format with follow up meetings conducted via Zoom or Teams to complete transfer of learning activities. This training webinar will be completed early in the next reporting period and offered to all regional leadership. In the meantime, small group training is available to district directors and CW supervisors as needed.

Impacts of COVID-19
When the COVID-19 pandemic began to impact Oklahoma in March 2020, YSA shelters and OJA partners participated in weekly check-in support calls that later transitioned to bi-weekly and then ended in late May 2020. These calls focused on concerns around the COVID-19 pandemic and the impact on shelter staff and possible impact of new shelter placements. Through these calls, the need for a COVID-19 shelter was discussed, ultimately leading to a new contract for this service. This new 12 bed COVID-19 shelter contract was issued on 4/23/2020 and is specifically used for youth who test positive for COVID-19 or who are highly likely to have been exposed, with a purpose of reducing the spread of the virus.

CWS and OJA partners continue meeting by conference call every four to six weeks to address any ongoing concerns, new protocols, and/or needs related to the COVID-19 pandemic. CWS also provided tangible support to shelters such as tablets to ensure youth could have video contact with their CW team and their family members and through providing PPE and cleaning supplies as needed.

Conclusion
The CWS shelter program team, in collaboration with the CWS and the OKDHS Executive Teams, continues to focus on Reducing the use of shelter placements through building a robust continuum of care with family based placements to

best meet the needs of each specific child/youth in care.

The CWS Executive Team receives weekly updates on the status of every child and youth in shelter. OKDHS achieved the lowest number of shelter nights for children ages 6-12 since the reform began. Data indicates children enter shelter care for various reasons, including disruption of kinship or foster care placement, upon initial removal, discharge from higher levels of care, discharge from OJA custody/placement, etc. Additional strategies are being developed and implemented using the data at a district level to assist in reducing shelter usage statewide for all children and youth.

With the recent reorganization of the SPPU team, including designating staff to assist with shelter reduction strategies, additional efforts are underway to shorten the shelter stay through collaboration with the regional teams in finding the appropriate level of placement for each individual child and youth who enters a shelter. The shelter staff also engage with the child's assigned CW specialist to meet any specific needs, increase opportunities for visitation with people important to the child, and support the shelter in times of crisis. The CWS shelter team will continue to assess the interventions and supports available to CW staff and shelters so that the best outcomes can be achieved for children and youth.

6.2a: Permanency Within 12 Months of Removal

Operational Question
Of all children who entered foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within 12 months of removal?

Data Source and Definitions
Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively. This data is pulled from the Adoption and Foster Care Analysis Reporting System (AFCARS) files.

Description of Denominator and Numerator for this reporting period
Denominator: All children who entered foster care from 10/1/2018 through 3/31/2019.
Numerator: The number of children who entered foster care from 10/1/2018 through 3/31/2019 and exited to a permanent setting within 12 months of removal.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2011 – 9/30/2011			35.0%
10/1/2012 – 9/30/2013	All admissions from 4/1/2012 – 9/30/2012	856	2,692	31.8%
4/1/2013 – 3/31/2014	All admissions from 10/1/2012 – 3/31/2013	782	2,707	28.9%
10/1/2013 – 9/30/2014	All admissions from 4/1/2013 – 9/30/2013	818	2,901	28.2%
4/1/2014 – 3/31/2015	All admissions from 10/1/2013 – 3/31/2014	748	2,749	27.2%
10/1/2014 – 9/30/2015	All admissions from 4/1/2014 – 9/30/2014	764	2,705	28.2%
4/1/2015 – 3/31/2016	All admissions from 10/1/2014 – 3/31/2015	714	2,359	30.3%
10/1/2015 – 9/30/2016	All admissions from 4/1/2015 – 9/30/2015	840	2,741	30.6%

4/1/2016 – 3/31/2017	All admissions from 10/1/2015 – 3/31/2016	774	2,340	33.1%
10/1/2016 – 9/30/2017	All admissions from 4/1/2016 – 9/30/2016	788	2,512	31.4%
4/1/2017 – 3/31/2018	All admissions from 10/1/2016 – 3/31/2017	832	2,375	35.0%
10/1/2017 – 9/30/2018	All admissions from 4/1/2017 – 9/30/2017	847	2,372	35.7%
4/1/2018 – 3/31/2019	All admissions from 10/1/2017 – 3/31/2018	792	2,105	37.6%
10/1/2018 – 9/30/2019	All admissions from 4/1/2018 – 9/30/2018	795	2,247	35.4%
4/1/2019 – 3/31/2020	All admissions from 10/1/2018 – 3/31/2019	701	2,017	34.8%
Target				55.0%

Section 2, Table 6.2a-1
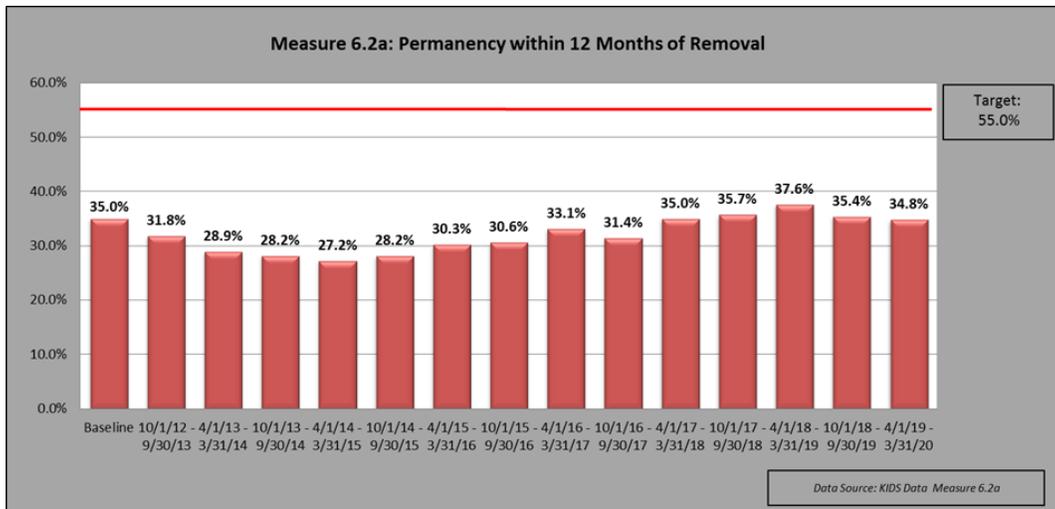
Section 2, Graph 6.2a-1

6.2b: Permanency Within 2 Years of Removal

Operational Question
Of all children who entered their 12th month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within two years of removal?

Data Source and Definitions
Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively.

Description of Denominator and Numerator for this reporting period
**Denominator:** All children who entered foster care from 10/1/2017 through 3/31/2018.
Numerator: The number of children, who entered foster care from 10/1/2017 through 3/31/2018, were removed at least 12 months, and exited to a permanent setting within 24 months of removal.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2010 – 9/30/2010			43.9%
10/1/2012 – 9/30/2013	All admissions from 4/1/2011 – 9/30/2011	667	1,626	41.0%
4/1/2013 – 3/31/2014	All admissions from 10/1/2011 – 3/31/2012	577	1,487	38.8%
10/1/2013 – 9/30/2014	All admissions from 4/1/2012 – 9/30/2012	669	1,787	37.4%
4/1/2014 – 3/31/2015	All admissions from 10/1/2012 – 3/31/2013	713	1,846	38.6%
10/1/2014 – 9/30/2015	All admissions from 4/1/2013 – 9/30/2013	780	2,008	38.8%
4/1/2015 – 3/31/2016	All admissions from 10/1/2013 – 3/31/2014	886	1,944	45.6%
10/1/2015 – 9/30/2016	All admissions from 4/1/2014 – 9/30/2014	821	1,865	44.0%
4/1/2016 – 3/31/2017	All admissions from 10/1/2014 – 3/31/2015	769	1,570	49.0%
10/1/2016 – 9/30/2017	All admissions from 4/1/2015 – 9/30/2015	961	1,793	53.6%
4/1/2017 – 3/31/2018	All admissions from 10/1/2015 – 3/31/2016	831	1,493	55.7%
10/1/2017 – 9/30/2018	All admissions from 4/1/2016 – 9/30/2016	891	1,640	54.3%
4/1/2018 – 3/31/2019	All admissions from 10/1/2016 – 3/31/2017	776	1,504	51.6%
10/1/2018 – 9/30/2019	All admissions from 4/1/2017 – 9/30/2017	781	1,472	53.1%
4/1/2019 – 3/31/2020	All admissions from 10/1/2017 – 3/31/2018	680	1,281	53.1%
Target				75.0%

Section 2, Table 6.2b-1
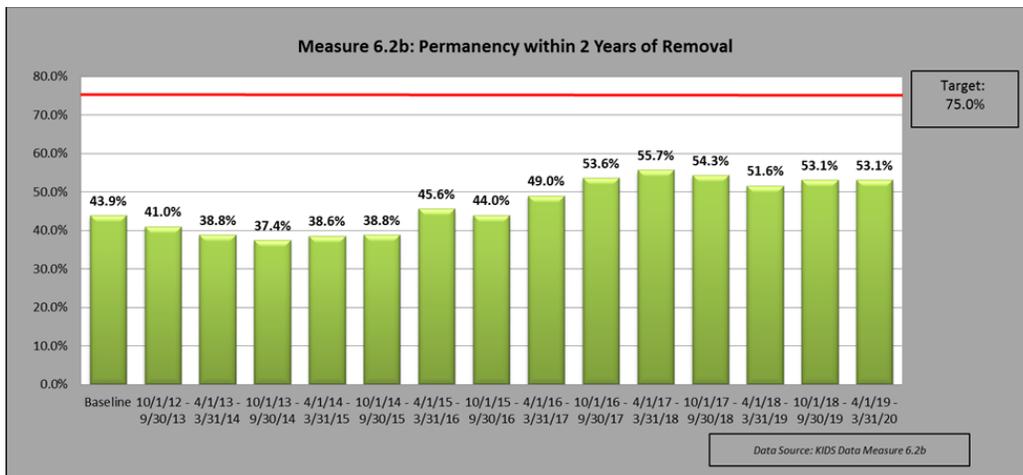
Section 2, Graph 6.2b-1

6.2c: Permanency Within 3 Years of Removal

Operational Question
Of all children who entered their 24th month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within three years of removal?

Data Source and Definitions
Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively. This data is pulled from the Adoption and Foster Care Analysis Reporting System (AFCARS) files.

Description of Denominator and Numerator for this reporting period
**Denominator:** All children who entered foster care from 10/1/2016 through 3/31/2017.
Numerator: The number of children, who entered foster care from 10/1/2016 through 3/31/2017, were removed at least 24 months, and exited to a permanent setting within 36 months of removal.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2009 – 9/30/2009			48.5%
10/1/2012 – 9/30/2013	All admissions from 4/1/2010 – 9/30/2010	350	746	46.9%
4/1/2013 – 3/31/2014	All admissions from 10/1/2010 – 3/31/2011	286	654	43.7%
10/1/2013 – 9/30/2014	All admissions from 4/1/2011 – 9/30/2011	346	924	37.4%
4/1/2014 – 3/31/2015	All admissions from 10/1/2011 – 3/31/2012	414	872	47.5%
10/1/2014 – 9/30/2015	All admissions from 4/1/2012 – 9/30/2012	552	1,094	50.5%
4/1/2015 – 3/31/2016	All admissions from 10/1/2012 – 3/31/2013	586	1,095	53.5%
10/1/2015 – 9/30/2016	All admissions from 4/1/2013 – 9/30/2013	653	1,174	55.6%
4/1/2016 – 3/31/2017	All admissions from 10/1/2013 – 3/31/2014	558	1,002	55.7%
10/1/2016 – 9/30/2017	All admissions from 4/1/2014 – 9/30/2014	633	989	64.0%
4/1/2017 – 3/31/2018	All admissions from 10/1/2014 – 3/31/2015	445	742	60.0%
10/1/2017 – 9/30/2018	All admissions from 4/1/2015 – 9/30/2015	443	781	56.7%
4/1/2018 – 3/31/2019	All admissions from 10/1/2015 – 3/31/2016	378	642	58.9%
10/1/2018 – 9/30/2019	All admissions from 4/1/2016 – 9/30/2016	405	726	55.8%
4/1/2019 – 3/31/2020	All admissions from 10/1/2016 – 3/31/2017	405	720	56.3%
Target				70.0%

Section 2, Table 6.2c-1
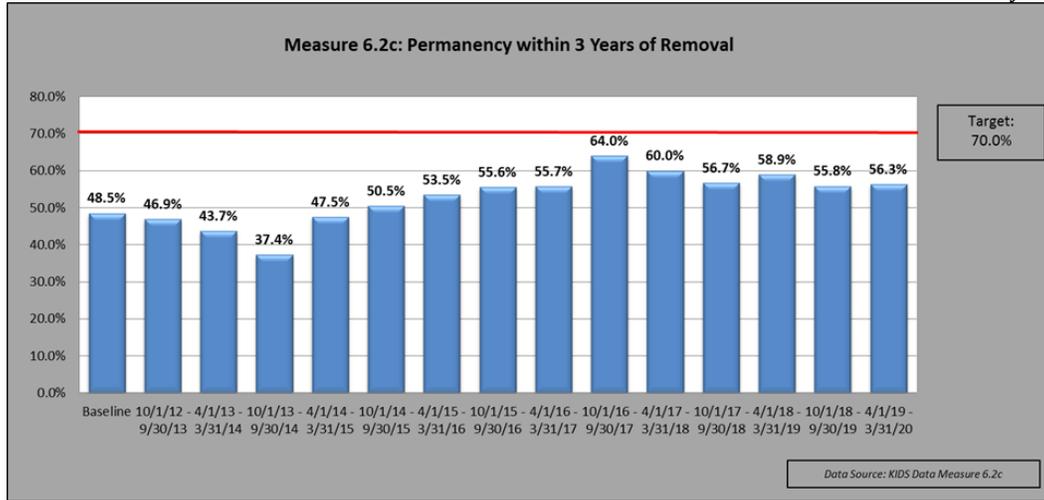
Section 2, Graph 6.2c-1

6.2d: Permanency Within 4 Years of Removal

Operational Question
Of all children who entered their 36th month in foster care between 12 and 18 months prior to the end of the reporting period, what percent exited to a permanent setting within 48 months of removal?

Data Source and Definitions
Measures 6.2a, b, c, and d cover the number and percent of children who entered foster care during a designated time frame from the removal date and reached permanency within 12, 24, 36, or 48 months respectively. This data is pulled from the Adoption and Foster Care Analysis Reporting System (AFCARS) files.

### Description of Denominator and Numerator for this reporting period
Denominator: All children who entered foster care from 10/1/2015 through 3/31/2016.
Numerator: The number of children, who entered foster care through 10/1/2015 through 3/31/2016, were removed at least 36 months, and exited to a permanent setting within 48 months of removal.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All admissions from 4/1/2008 – 9/30/2008			46.6%
10/1/2012 – 9/30/2013	All admissions from 4/1/2009 – 9/30/2009	128	264	48.5%
4/1/2013 – 3/31/2014	All admissions from 10/1/2009 – 3/31/2010	91	278	32.7%
10/1/2013 – 9/30/2014	All admissions from 4/1/2010 – 9/30/2010	141	359	39.3%
4/1/2014 – 3/31/2015	All admissions from 10/1/2010 – 3/31/2011	146	343	42.6%
10/1/2014 – 9/30/2015	All admissions from 4/1/2011 – 9/30/2011	285	556	51.3%
4/1/2015 – 3/31/2016	All admissions from 10/1/2011 – 3/31/2012	206	415	49.6%
10/1/2015 – 9/30/2016	All admissions from 4/1/2012 – 9/30/2012	278	503	55.3%
4/1/2016 – 3/31/2017	All admissions from 10/1/2012 – 3/31/2013	252	458	55.0%

10/1/2016 – 9/30/2017	All admissions from 4/1/2013 – 9/30/2013	264	482	54.8%
4/1/2017 – 3/31/2018	All admissions from 10/1/2013 – 3/31/2014	228	412	55.3%
10/1/2017 – 9/30/2018	All admissions from 4/1/2014 – 9/30/2014	190	330	57.6%
4/1/2018 – 3/31/2019	All admissions from 10/1/2014 – 3/31/2015	168	279	60.2%
10/1/2018 – 9/30/2019	All admissions from 4/1/2015 – 9/30/2015	192	321	59.8%
4/1/2019 – 3/31/2020	All admissions from 10/1/2015 – 3/31/2016	126	247	51.0%
Target				55.0%

Section 2, Table 6.2d-1
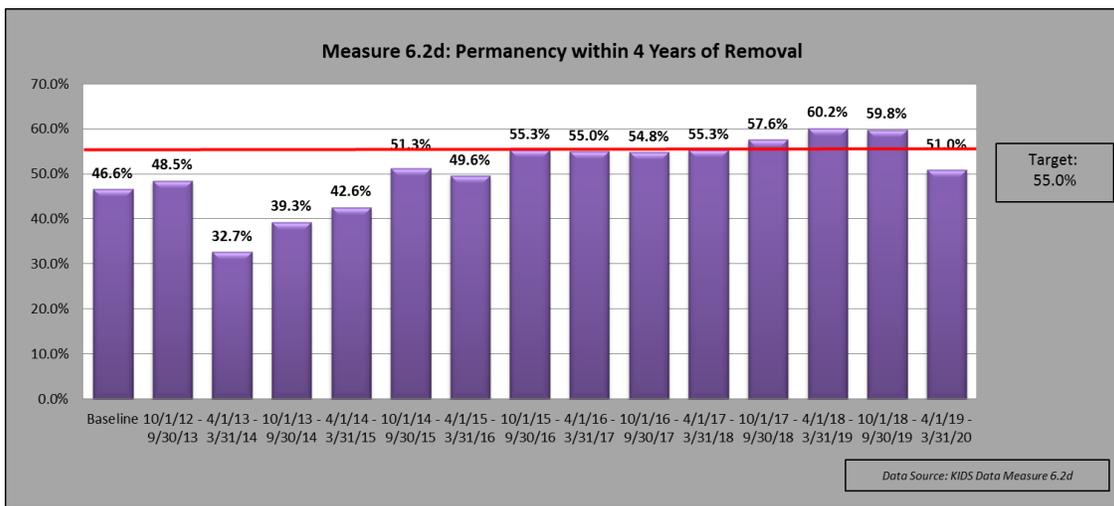
Section 2, Graph 6.2d-1
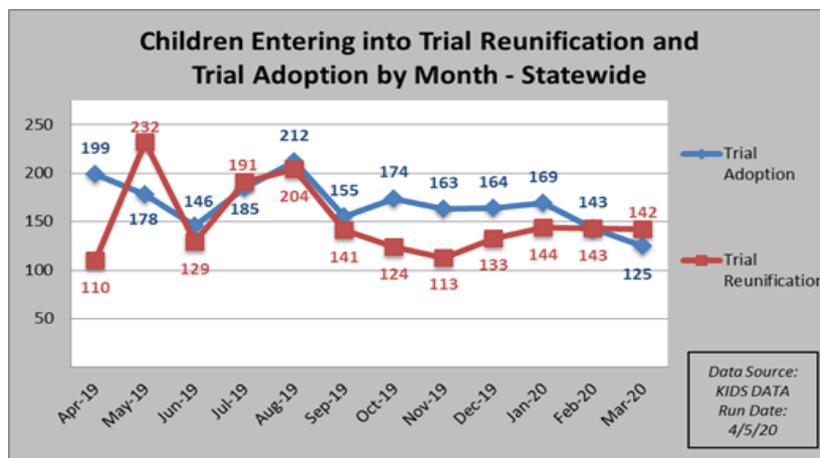
Section 2, Graph 6.2d-2

Section 2, Graph 6.2d-2 is an unduplicated count of children who entered Trial Adoption or Trial Reunification for each month during the last 12 months ending March 2020. This is not a summary count of all children placed in Trial Adoption or Trial Reunification during the month. Although not a Pinnacle Plan measure, Child Welfare Services (CWS) tracks performance in these two areas, as it is reflective of real time progress on moving children to permanency.

Permanency Safety Consultations of Children in Care on 3/31/20 with Goal of Return to Own Home	
Children in Care 90+ Days with Goal of Return to Own Home	3,120
Children with Permanency Safety Consultation	2,989
% with Permanency Safety Consultation	95.8%

Data Source: KIDS Data YI104; Run Date: 4/1/19

*Data only includes children that have been in care at least 90 days

Section 2, Table 6.2d-2

Permanency Safety Consultations (PSC) for Children with a Case Plan Goal of Return to Own Home Oct 2019 - Mar 2020				
Month of PSC	# of PSC	# of Children with PSC	PSC Recommendation Safe	PSC Recommendation Unsafe
Oct-19	373	725	182	543
Nov-19	402	708	151	557
Dec-19	361	635	173	462
Jan-20	463	872	235	637
Feb-20	388	695	173	522
Mar-20	322	572	158	414
TOTAL	2309	4207	1072	3135

Data Source: YI838-Permanency Safety Consultations; Run Date :11/13/19, 12/11/19, 1/9/20, 2/1/20, 3/11/20, 4/12/20

**Children in Trial Reunification are excluded from the population.

Section 2, Table 6.2d-3

	Number of Family Meetings (FM) Held	Unique Count of Children Included in FM's	Total Children Served in Care	% of Children with FM
4/1/19-3/31/20	5791	6867	12,556	54.69%

Data Source: KIDS Data- FTM Types Included, FTM FTM- Alt. Perm Plan, FTM- Concurrent Planning, FTM- ISP Development, FTM- Safety Planning, FTM- 6 Month, FTM- Reasonable Efforts NR Court Finding, FTM- Placement Stability, and FTM- Progress to Permanency.

Section 2, Table 6.2d-4

Commentary

During this review period, CWS improved in one of the four measures. Measure 6.2a had a decline by 0.6 percent. A total of 701 children, 34.8 percent, achieved permanency within the first 12 months in care. Performance Measure 6.2b remained the same as the last reporting period, at 53.1 percent. Performance in Measure 6.2c increased by 0.5 percent. Measure 6.2d decreased by 8.8 percent.

Of the 4,265 children included in all of the 6.2 measures, 1,912 children achieved timely permanency. An additional 356 children achieved permanency after the timeliness target dates. An additional 87 children exited to non-permanent exits. This left 1,910 children remaining in care of the original population of 4,265 that did not achieve permanency as of 3/31/2020. Of those 1,910 children, 186 children were placed in trial reunification and 167 children were in trial adoption for a total of 353 children close to achieving permanency.

As of 3/31/2020, 2,989 children had a Permanency Safety Consultation (PSC) completed out of 3,120 children who were eligible with the goal of return to own home. Forty-nine children were excluded from the population without a PSC as they were currently in trial reunification. During the review period of October 2019 to March 2020, a total of 2,309 PSCs were completed and those PSCs included 4,207 children. This number only includes children with a case plan goal of return to own home.

Permanency Safety Consultations

PSCs continue as a primary strategy to impact outcomes in Pinnacle Plan Measures 6.2a, b, c, and d. The initial PSC is completed for a child in out-of-home (OOH) care with a case plan goal of reunification 90-calendar days following removal. This set time frame permits Oklahoma Human Services (OKDHS) to fully assess the family in order to identify

and refer to the needed services and to also allow time for parents to initiate services. Within the first 90-calendar days following removal, the family will have participated in a case transfer meeting, initial meeting, and met with the Permanency Planning specialist to complete an initial Assessment of Child Safety (AOCS). In addition, the assigned specialist meets in the family home no later than 14-calendar days following removal and every month thereafter or more often as needed. Each contact consists of quality conversations surrounding the parent's progress on referred services for their ISP and a team approach to creative problem-solving for identification of barriers preventing the parent from engaging in services. Each interaction between the specialist and family in the first 60-calendar days builds upon one another so that the specialist is able to refer the family for the most appropriate services. The initial PSC allows time for the family to complete intakes or begin initial engagement in services to show needed behavior changes. It also allows additional time for the specialist to have more intentional opportunities of engaging parents prior to completing the initial PSC as well as time to obtain more information through the ongoing AOCS to present to the PSC team. At 90-calendar days, the PSC team is able to have a better understanding of how the family is initially doing with their services and behavior changes related to the safety threats identified in the AOCS. Subsequent PSCs continue to be held every 90-calendar days thereafter for each child in OOH care until the child achieves permanency through reunification or the case plan goal changes from reunification. Specific target dates to complete a PSC ensure that cases have regular ongoing safety discussions throughout the critical first 12 months of removal and thereafter to expedite safe, timely permanency.

Ongoing efforts continue to focus on the enhancement of the overall agency culture regarding the importance of listening to the parent's voice. Efforts include immediate referrals for services upon identification of needed behavior changes, frequent and purposeful Family Meetings (FMs), and parent/worker contacts. Training opportunities were provided to all regional staff in August 2020 to hear firsthand from parents who had previous involvement with CW, successfully overcame their challenges, and are now mentoring families whose children are currently in foster care. These parents provided insight regarding the use of mindful and respectful language when talking directly with parents as well as when talking about parents to others. These parents also provided feedback from the families they are currently mentoring whose children were recently removed. Additionally, statewide permanency data was broken out by regional districts and presented to leadership teams in August 2020. This provided district directors the opportunity to see how their own district performed related to permanency outcomes such as exits to guardianships versus adoption and average length of time in care. By presenting the data to the districts in this individualized manner, it allowed the directors to critically think of how to change local practice to better support timely permanency outcomes within their district. Due to the COVID-19 pandemic, beginning in March 2020, guidance was given to field staff to conduct PSCs virtually. The PSC Coordinator focused on site visits in Region 2 in February and March 2020. The PSC Coordinator shifted focus to Region 4 in late April through May to support the Supervisory Framework implementation as part of Oklahoma's Program Improvement Plan (PIP).

The site visit's primary focus remained the same, which was to help guide group conversation, as needed, when discussing current safety threats, barriers to permanency, and exploring and identifying action steps for the specialist to complete in working toward a child's permanency. Following the PSCs, team debriefings are conducted, which include the PSC Coordinator providing feedback to the group on observable practice strengths, as well as practice areas needing improvement. For the month of March 2020, the PSC Coordinator was still able to provide feedback to the group despite completing PSCs virtually.

During this reporting period, CWS continued initial efforts involving enhanced family engagement. The PSC process serves as a group-learning environment to educate and reinforce to staff the importance of quality parent engagement. From the fidelity reviews, it was noted that the action steps, which are to be completed at the end of the PSC, are not consistently measurable action steps. Guidance was developed to describe a good quality action step, as well as an emphasis on due dates. The guidance also includes suggestions for how and when a supervisor and district director can review the action steps for completion with the specialist to ensure case movement towards permanency and was disseminated to the regional leadership teams in July 2020.

The PSC Fidelity Review tool remains a critical piece in the debriefings that follow the PSCs. The fidelity review teams consist of the PSC Coordinator and regional Quality Assurance (QA) staff. QA staff attend PSCs in their region as they are able to. PSCs have been implemented statewide since 2015 with fidelity reviews being in place since 2016. The review team was initially very instrumental in providing feedback on the PSC process in order for districts to perform consistently. CWS appears to be in the maintenance stage of PSCs with updates made as needed, such as adding parent engagement to the PSC form. Oklahoma's PIP ended in May 2020, so the PSC Coordinator will again be able to attend PSCs in each region monthly. Due to holding PSCs virtually in March 2020, the tool's applicability varied at times. In some PSCs, it was more challenging to determine who the facilitator was and if all group participants were engaged in the discussion. The tool still allowed the PSC Coordinator to measure the quality of the safety discussion.

To sustain a feedback loop by providing fidelity review outcomes to regional directors, the reviews continue to be logged in Qualtrics, the online survey system, which was completed in May 2019. Additionally, Qualtrics has the capability to allow the user to filter down to districts to see the overall percentage of "yes" versus "no" for fidelity review questions. CWS leadership still has the ability to review the summaries of debriefing conversations that appear in paragraph form. This feedback loop, which is an online link, is sent to leadership monthly by the Permanency Planning program supervisor/PSC coordinator or assigned QA staff for review. QA staff continues assisting with fidelity reviews each month as they complete site visits for PSCs. Ongoing discussions occur between the PSC Coordinator and QA staff about the practices observed during PSCs, feedback given, and any quality improvements that need to be made or addressed regarding Qualtrics, the Fidelity Review tool, or the overall PSC process to ensure sustainability. QA staff and the PSC Coordinator specifically discussed changes to the PSC form to capture specific topics, such as guardianship, parent engagement, and more specific action steps.

The PSC online training remains in the Learning Management System for staff to access to use as a resource. The PSC online training was also compiled into a Word document as an additional resource for staff. The online training closely follows the materials outlined in the PSC Guidebook, which is still disseminated to staff in child welfare (CW) trainings and upon request. New CW specialists will also be required to complete the PSC online training as part of their Level 1 trainings. The PSCs continue to be included in the Permanency Planning (PP) Level 1 training for new CW specialists and the PSC Guidebook is now disseminated to those who attend this introductory level training.

Additional support is still given to district directors through PSC reports. The PSC Coordinator pulls and filters this monthly report to identify the children due for a PSC in the upcoming month, as well as which children are overdue for a PSC. This report received positive feedback from districts and assists the districts in keeping current on their required PSCs. The report also identifies children found "safe" at their most recent PSC 90+ calendar days ago and still not in trial reunification. QA staff now helps filter the report to their specific region and sends to their regional leadership teams. A heightened awareness exists for the children who had a safe recommendation 90+ calendar days ago and are still not in trial reunification. District directors are asked to review these children to identify what barriers to permanency exist and what can be done to move forward. A high correlation exists between the children found safe 90+ days ago and the overdue cases. The PSC Coordinator will begin sharing examples of PSC practice that were observed in districts with the other regional leadership teams to encourage new ideas for conducting PSCs. In an effort to support district directors with managing the various strategies and efforts, conversations are underway to explore creating a management tool specific to strategy work. The desired outcome will be to have multiple reports compiled in one location for district directors that mimics the current Permanency Planning dashboard. Points of focus on the dashboard could include the children who were found safe during a PSC but are not yet in reunification, parent engagement, and other strategy efforts. Allowing district directors to view all strategies in one location could support the need for a heightened focus on practice trends within districts.

The PSC Coordinator, Permanency for Teens Coordinator, and regional permanency leads continue monthly phone calls and quarterly face-to-face meetings to support each other, staff, and the work towards best permanency practices. The guardianship leads will be included in the monthly calls as guardianship efforts are now part of the permanency

strategies. QA staff continues to participate in the monthly calls and attend the quarterly meetings to further support their involvement with all permanency efforts.

Targeted Permanency Efforts
In the last reporting period, work continued in the following targeted districts to increase reunification within 12 months:
- Region 1: District 4B – Canadian County;
- Region 2: District 5 – Comanche County;
- Region 3: District 7, 55B, and 55H – Oklahoma County;
- Region 4: District 19 – Atoka, Bryan, Coal County; and
- Region 5: District 72G – Tulsa County

The targeted districts were focused on increasing permanency for children through quality contact with parents, as well as quality visitation between the child and parent. Each district implemented plans that were created in October 2018 when targeted efforts first began. At the September 2019 Permanency leads quarterly meeting, the CWS Executive Team participated in the group discussion where it was determined that to increase timely permanency, a statewide implementation effort focusing on parent engagement would be imperative to improve outcomes. Timely permanency directly affects the reduction of time in custody thus impacting the child's potential exposure to maltreatment in care, placement stability, performance in school, and overall well-being. CWS remains committed to continued progress and ensuring concerted efforts are implemented to increase parent engagement, as that alone can impact the success of other strategies. Through follow-up discussions with the permanency leads and CWS leadership, components and strategies were identified as key efforts that will enhance parent engagement and increase safe and timely permanency for Oklahoma children: parent/worker contacts, parent advocacy support, guardianship expansion, and court relationship improvement efforts. In April 2020, CWS submitted a revised document for final approval to the Co-Neutrals outlining Parent Engagement and Guardianship efforts as permanency strategies. Due to extenuating circumstances surrounding the COVID-19 pandemic, parent advocacy support and court relationship improvements were put on hold at the end of this reporting period.

Parent Engagement
In October 2019, four areas were identified by CWS leadership to enhance parent engagement and increase timely permanency.
- Worker/Parent Contacts;
- Parent Advocacy Support;
- Guardianship Expansion; and
- Court Relationships.

Each area was expected to outline specific activities to be completed by a target implementation date. Efforts made in the areas of Worker/Parent Contacts and Guardianships are described in this section. Specific activities and target dates for Parent Advocacy Support and Court Relationships remained under development for the majority of this reporting period and were ultimately put on hold in March 2020 due to the COVID-19 pandemic. However, virtual parent advocacy efforts remain in effect and are ongoing. Permanency programs created and oversees a specific email address inbox for parents to utilize for any questions they may have about their case or child. This email inbox was created as an additional support for Permanency field staff as Permanency programs will collaborate with regional staff when parents send questions to the inbox. Additionally, in August 2020 the first *Parent Newsletter* was launched. The newsletter will be emailed every month with specific topics to follow the calendar year as it relates to being a parent. August highlighted "Back to School" and included ideas or suggestions for parents to stay active in their children's education especially as some schools have elected to solely hold virtual classes. The newsletter is emailed to parents and the delivery system compiles a report of how many email addresses received it, bounced back, as well as how many opened the email and clicked on the newsletter. The parents email addresses are pulled from the KIDS system and are compiled in a newly developed parent contact information report. Field staff were notified of the creation of the new report in

July 2020 at which time they were required to enter all known contact information in the demographic screen. The report also captures parents phone numbers as CWS would like to explore the possibility of text message alerts.

Worker/Parent Contacts

The worker/parent contact report is still pulled twice a month and sent to staff. The first report was sent out in October 2019 detailing the number of completed worker/parent contacts documented to date for October. The report includes several different measures including percent of parents visited, percent of cases with all parents listed in the case receiving a worker visit that month, and attempted visits. Parents who are incarcerated or live out-of-state are also captured in the report as a completed worker visit even if only able to speak on the telephone with their assigned specialist. Awareness surrounding the importance of parent engagement, as well as the functions of the worker/parent contact report began in September 2019 and has continued through this reporting period. The report's function was reviewed several times to ensure all parents requiring a monthly visit are accurately depicted in the report. Since the first report was pulled in September 2019 and sent to staff, substantial improvement was made in documented parent/worker contacts.

In addition to the enhanced focus on completion of worker/parents visits, the overall quality of the visit or conversation with the parent is evaluated through other efforts such as the Supervisory Framework. The monthly case staffing guide is one of three tools provided to supervisors to better support their specialists through intentional supervision. Contact with the parent can be captured and explored during the case staffing with a specialist to ensure thorough conversations are occurring to continuously engage the parent and assess safety for the child returning home. The quality of worker/parent contacts can also be explored during PSCs as one of the discussion sections outlined on the form is person responsible for the child's progress. The section's guidance includes engagement with the parents to assess if behavioral changes occurred through monthly contact and revisions made to ask about "protective capacities."

Parent/Child Visitation

Parent engagement through frequent and intentional parent/child visitation was also identified as an area of focus. The current form for standard visitation plans, which staff uses when setting visits for families, was updated to be more intentional and user-friendly with the intent of engaging parents and families in the visitation process. Region 5 created a workgroup consisting of CW supervisors, CW specialists, and QA staff. The workgroup made the revisions to the visitation form in addition to creating curriculum for their regional staff to look at visitation as Family Time. Region 5 and Permanency Programs consulted with the states of Georgia and Texas to research Family Time best practices and created a process to assist staff in determining if unsupervised Family Time could be appropriate at the beginning of a case rather than supervised time. Region 5 staff will be trained on the new Family Time curriculum in June 2020.

PP program staff met with Design Services in November 2019 to draft a marketing tool with an emphasis on parent engagement. The tool will be provided to county offices statewide to display for staff visual awareness. This project was put on hold due to the COVID-19 pandemic, but will resume once staff return to their designated work locations. In March 2020, CWS began conducting face-to-face visits virtually due to social distancing guidelines. As CWS began interacting with biological parents virtually, the need for a virtual platform to deliver the most updated information to parents, including COVID-19 updates was identified.

A parent website will be available on the OKDHS website. The link will include information regarding what to expect on a parent's CW journey and focus on key components of timely permanency, such as kinship placements, engagement between a parent and CWS, as well as Family Time. The content was reviewed and feedback provided by parent partners who were previously involved with CWS. A centralized email was also created that will be on the website. Parents will be able to email questions or ask for clarification on content provided on the website which went live in August 2020.

Additionally, a newsletter will be created by PP programs and emailed to biological parents monthly. The newsletter will feature relevant content based on the calendar year, the first newsletter's target date is August 2020 for back-to-school

information and tips for how a parent can remain involved in his or her child's education. The newsletter will also spotlight parents who successfully had their children reunified and would like to share their story through a question and answer to give hope to parents currently involved with CWS. In an effort to make continued progress and change, ongoing feedback from parents about their experience with CWS is vital. As CWS remains committed to improving outcomes and experiences for parents, the need for ongoing feedback from parents is critical. In July 2020, conversations began with OKDHS Innovation Services regarding a Parent Exit Survey. Questions to be included in the survey will focus on experiences related to the court, child visitation, case worker visits, and services. A draft of questions has been compiled and will be shared with the permanency leads in September 2020 for feedback.

Guardianship Expansion
Following recent discussions with leadership regarding heightened efforts to increase permanency exits, the use of guardianships will become a larger focus. A conference call in September 2019 with the Adoption Timeliness Accountability Team (ATAT) leads and the Adoption Transition Unit (ATU) identified quite a few Quad 3 children, and as such they are not legally-free, but residing in an identified adoptive home. The children with a case plan goal of adoption are not eligible for a PSC or backlog call, nor are these children included in ATAT or ATU efforts, as they are not legally free for adoption. Guardianships are discussed during routine PSCs, as well as monthly Permanency backlog calls that staff children in care for 24+ months with a case plan goal of return to own home and currently not in trial reunification. Within the back-to-basics training of the Supervisory Framework, staff continued training on efforts to increase the use of guardianship to achieve timely permanency. Training on key principles related to achieving timely permanency and on expanding the use of guardianships as an exit type was conducted at the annual Judicial Conference in October 2019. The training, with court partners, detailed guardianship as a viable option for increasing timely permanency when a child is placed in a relative kinship home or a non-relative placement when it is in the child's best interest and funding is available.

The Guardianship Liaison also attends FMs as requested by phone or in-person to assist CW staff identify when a guardianship could be a permanency option for the child in question. The Guardianship Liaison responsible for approvals continues to pull reports to identify a specific set of children that might be appropriate for consideration by staff for guardianship as a permanency option, based on their age, length of time in OOH care, and placement type, such as kinship, and shares these reports with the guardianship leads. Additionally, the guardianship log, which tracks all submitted guardianship requests, was updated to better monitor targeted efforts for guardianship expansion.

A meeting was held in December 2019 with both Temporary Assistance for Needy Families (TANF) and Title IV-E program staff to discuss funding for guardianships to ensure all guardianships meet federal and state requirements for each funding source. An email was sent to all CW staff in October 2019 that included specific criteria and highlighted benefits for the different types of funding sources for guardianships, as well as the process of requesting a funded guardianship. This effort was to encourage staff to consider a guardianship rather than termination of parental rights. Response from CW staff was positive as guardianship requests doubled after the informational email was sent to all staff. Guardianship requests now occur at an average of eight per month versus a previous average of four per month.

In addition to ongoing communication with staff about the use of guardianships, an existing pamphlet was updated to clearly outline the different funding amounts and benefits between guardianship and adoption and also includes the new guardianship subsidies that match adoption subsidies and went into effect February 2020. The pamphlet was renamed *Planning for Permanency* and was disseminated to all CW staff. PP programs presented the new changes and focus on guardianships at the statewide leadership meeting during this reporting period. Additionally, PP Programs virtually presented CWS' focus on guardianships to Post-Adjudication Review Board (PARB) members as well as court partners. In May 2020, a monthly call was conducted that included both Guardianship and PP leads, as guardianship expansion is now a primary strategy for improving permanency outcomes. Merging the two lead groups will help facilitate quality conversations for strategy implementation. Guardianship requests continue to be processed despite the COVID-19 pandemic; however, finalizations were postponed by the courts. In June 2020, FM coordinators contacted staff, parents, and resource families to schedule FM in order to discuss if guardianship would be an appropriate

permanency option for Quad 3 children if a FM had not been held in the last six months. Following the FM initiative for Quad 3 children, guardianship requests increased per month as previously stated. Conversations with the permanency/guardianship leads and CWS leadership are ongoing to identify additional cohorts of children or criteria for expansion of guardianships.

Permanency Support Calls
Permanency support calls, implemented in January 2018, are an ongoing effort to increase oversight of permanency cases for children in OOH care for 24+ months with a case plan goal of reunification, and not in trial reunification. Each call's primary goal is to identify barriers that prevent the children in the case from returning home and then creating action steps with the specialist and supervisor to complete prior to the next month's call. The call's conversation is summarized, logged on a spreadsheet, and sent to district and regional directors monthly for follow-up, so permanency practices and outcomes are shared and used as a learning tool for improvement. The spreadsheet also highlights the barriers in achieving permanency, as well as other information related to timely permanency, such as concurrent case plans and date of last PSC, including the last safety recommendation. The majority of the cases that continue to require a call, based on the criteria, are for children who are in higher levels of care, on a subsequent removal, or close to reunification. Several cases are at a standstill due to external barriers and for these cases, the call facilitator gets an update from the specialist by email.

The most common identified barrier is the legal system, such as court partners not identifying safety in the same manner as CWS. This is another example of why enhancing court relationships will remain a primary focus for CWS. Additionally, feedback gathered from QA is that many specialists and supervisors who call in appreciate the additional support; however, they feel like the permanency support calls can be redundant due to ongoing PSCs. Both PSCs and backlog calls focus on reunification cases and explore action steps to complete to achieve permanency. Following a statewide leadership meeting in February 2020, it was determined that the permanency support calls may not be producing the same results as was initially seen after implementation. The majority of the cases are not able to move towards permanency due to barriers not within CWS' control or due to ongoing child and parent needs. Since PSCs and support calls focus on the same group of children, the decision was made that PSCs will ensure quality discussions with staff are held for this population. In May 2020, support calls were put on hold to allow for more program support to be dedicated to parent engagement efforts.

FMs
FMs continue to occur with each biological family as an effort to engage the family on an ongoing basis. The first FM takes place 60-calendar days after removal and at a minimum of once every six months thereafter. Additional meetings can be conducted to address changes in family composition, changes in case plan goals, individualized service plan (ISP) development, and reunification planning. During the current reporting period, 5,791 FMs were conducted involving 6,867 children. Region 4 developed and implemented a FM continuum protocol in September 2019 that was piloted in Districts 17 and 27. The enhanced protocol's goal is to improve outcomes for children and families, such as placement stability, reunification rates, and timely permanency through the valuable opportunity of family engagement that a FM provides. The piloted FMs are strength-based and safety-focused and the protocol includes more meetings to be completed in addition to the required six-month intervals. For this pilot, FMs also include Child Safety Meetings, Child Placement Meetings, Initial/Case Transfer, or any other FM as requested by CW staff, biological families, service providers, or any other case participants. The pilot also requires that one CW staff be assigned to one family and facilitate each of the different meetings. This same CW staff person has conversations during the meetings that are more informational as he or she is most familiar with the case and family dynamics. Region 5 will begin this pilot and assign CW staff to a family; however, until this Region 5 pilot starts, the region will use all of its facilitators to conduct FMs. Positive feedback about Districts 17 and 27 pilot has come in from staff, facilitators, and families. Communication increased between CW staff and meetings are being held more timely. This aligns with OKDHS' True North goals and the emphasis on customer service. Because of the positive feedback regarding the FM continuum, CWS is in the beginning stages of identifying current capacity and needed resources for a statewide implementation.

Supervisory Framework

The Safety through Supervision Framework was implemented as part of the PIP transformation zones. Initially, transformation zones undergo 90-calendar days of training. Supervisors were then provided an additional 90-calendar days of support through Transfer of Learning (TOL). Below is an update to the statewide roll out of the Supervision Framework.

- Zone 1: Region 1 – Completed trainings November 2018. Completed TOL March 2019.
- Zone 2: Region 3 – Completed trainings April 2019. Completed TOL July 2019.
- Zone 3: Region 5 – Completed trainings July 2019. Completed TOL November 2019.
- Zone 4: Region 2 – Completed trainings November 2019. Completed TOL March 2020.
- Zone 5: Region 4 – Began trainings January 2020. Completed TOL May 2020.

As of May 2020, Regions 1, 2, 3, and 5 fully implemented the three key strategies within the Safety through Supervision Framework. Region 2 began TOL sessions in January 2020 to further support the understanding and application of the framework strategies within daily supervision. TOL sessions continue focusing on quality versus compliance and the roles and responsibilities of supervisors in developing and supporting staff and improving outcomes. Region 2's PIP Implementation team developed the regional charter that outlines the sustainability plan for ongoing utilization of the framework strategies. Region 4 is the final PIP transformation zone and began the Safety through Supervision training series in January 2020. Due to delays from the COVID-19 pandemic, trainings 3 and 4 of the framework series are being completed virtually. Training 4 is solely focused on the utilization of the framework strategies and Region 4 was given a deadline of 5/8/2020 for full completion. Region 4 is also participating in TOL sessions and completed the final session by the end of May 2020. Region 4 will then begin full implementation of the framework strategies.

All five regions have developed separate Regional PIP Charters to provide accountability for implementation and sustainability of PIP and Safety through Supervision Framework activities. Recently, the Child and Family Services Review team provided regional practice profiles that identify specific regional practices which resulted in poor outcomes during AFCARS period 18B. Regions are currently analyzing the quantitative and qualitative data to further develop regional charters to ensure that practice deficiencies are addressed through strategies outlined within the PIP, Core Strategies, and the Safety through Supervision Framework.

The Continuous Quality Improvement (CQI) Statewide Implementation Team developed a Safety through Supervision Framework survey that was administered through the annual Employee Feedback Survey deployed in March 2020. The survey was administered to supervisors and specialists in Regions 1, 2, 3, and 5. The survey's purpose was to gather information about the frequency of use, fidelity to the Framework, and opinion on its usefulness. Additionally, a survey was administered to a small sample of supervisors in the same regions to gather specific information on implementation, usability, and sustainability efforts. The data from both of these surveys is currently being analyzed and will be utilized to support ongoing sustainability.

CWS also implemented other efforts that further support timely permanency, such as Actively Seeking KINnections (ASK). As part of ASK, an online diligent search training was created and is set to deploy in late summer or early fall 2020. The diligent search training will focus on the importance of finding connections for children beginning at the first contact made with the family. Placement stability efforts will also be included in the training as kinship placements are instrumental in the stability of the child's living arrangement and timely permanency. Timely permanency is also highlighted as a positive outcome to seeking connections for children throughout the duration of their time in OOH care. In November 2019, changes to Contacts screens in the KIDS system were made. The CW specialist now has the ability to enter parent and child contacts in specific screens to mimic the AOCS. The ongoing AOCS was released in KIDS in February 2020 and continues to support staff in writing quality safety assessments for visitation changes and reunification to promote safe and timely permanency.

Court Improvement Project (CIP)

Final analysis from the CIP joint project was completed in September 2019. The three jurisdictions that participated in

the project were Adair, Pottawatomie, and Canadian Counties. All three jurisdictions improved targeted permanency outcomes of reunification within 12 months. The three counties also showed higher rates of permanency within 12 months compared to the statewide data. In-depth analysis determining the impact of subgroups, such as sibling groups, children placed in kinship, children who were stable in placement, or age demographics, was completed and a report developed with plans to utilize the report for enhanced permanency strategy work. The lessons learned through the joint project were shared with leadership and CIP seeking to replicate the project within targeted permanency sites to enhance relationships with the deprived court system. The project's outcomes were presented at the CIP Statewide Judicial Conference in October 2019. Plans are underway for PP programs to partner with the three jurisdictions to present to the statewide leadership team in July 2020 on individual outcomes in their jurisdictions. As CWS and the judicial court system continue to navigate conducting virtual court hearings, CIP will be explored further with the hope that the CIP efforts could be completed virtually.

The Judicial Dashboards, an internal and external WebFOCUS data report, were created and provided to the districts that participated in the joint project. The judicial dashboards provide data on time to adjudication, first placement hearing, time to permanency exit, and termination of parental rights. Judicial dashboards can provide performance data for each jurisdiction. CWS worked with an external consultant, who was previously a deprived judge in Oklahoma, to modify and adjust the dashboards to be user-friendly to court officials. Both dashboards are now live and available internally and externally. A communications email will be sent to court partners regarding the functions of the dashboard and how to utilize it to look at their district outcomes. Following the communication email, district directors will reach out to their district judges in the hopes of identifying areas they can work on together to improve permanency outcomes and continue to facilitate positive court relationships.

The court expectation training was provided to supervisors, district directors, and field managers from March – May 2020. Key training components included relationship building with courts by utilizing data within the Judicial Dashboard and leadership's roles and responsibilities when adverse rulings are made. The training will in future have specific information as to court performance, court report language, and court engagement. The state permanency and CIP leads continue to meet quarterly with the CIP multi-disciplinary team to build relationships, team with external partners on ways to improve systemic barriers to permanency, and obtain feedback on the judicial dashboards. In April 2020, PP presented on the outcomes of the joint project to PARB members. PARB members are volunteers in the community who review CW cases and make recommendations to the judge based on their review and staffings with CW specialists assigned to the cases. Educating and training PARB members on CWS best practices will further support efforts in achieving timely permanency.

6.3: Re-entry Within 12 Months of Exit

Operational Question
Of all children discharged from foster care in the 12-month period prior to the reporting period, what percentage re-entered care within 12 months of discharge?

Data Source and Definitions
Re-entry within 12 months measures all children discharged to permanency, not including adoption, from foster care in the 12-month period prior to the reporting period and the percentage of children who re-enter foster care during the 12 months following discharge. This is the same as the Federal Metric and this data is pulled from Adoption and Foster Care Analysis Reporting System (AFCARS) data.

Description of Denominator and Numerator for this reporting period
Denominator: All children who exited foster care from 4/1/2018 through 3/31/2019.
Numerator: All children who exited foster care from 4/1/2018 through 3/31/2019 and re-entered care within one year of exit.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All exits from 10/1/2010 - 9/30/2011			10.3%
10/1/2012 – 9/30/2013	All exits from 10/1/2011 - 9/30/2012	234	2,334	10.0%
4/1/2013 – 3/31/2014	All exits from 4/1/2012 - 3/31/2013	223	2,375	9.4%
10/1/2013 – 9/30/2014	All exits from 10/1/2012 - 9/30/2013	225	2,638	8.5%
4/1/2014 – 3/31/2015	All exits from 4/1/2013 - 3/31/2014	230	2,682	8.6%
10/1/2014 – 9/30/2015	All exits from 10/1/2013 - 9/30/2014	223	2,756	8.1%
4/1/2015 – 3/31/2016	All exits from 4/1/2014 - 3/31/2015	218	2,869	7.6%
10/1/2015 – 9/30/2016	All exits from 10/1/2014 - 9/30/2015	238	2,822	8.4%
4/1/2016 – 3/31/2017	All exits from 4/1/2015 - 3/31/2016	207	2,828	7.3%
10/1/2016 – 9/30/2017	All exits from 10/1/2015 - 9/30/2016	187	3,004	6.2%
4/1/2017 – 3/31/2018	All exits from 4/1/2016 - 3/31/2017	185	2,879	6.4%
10/1/2017 – 9/30/2018	All exits from 10/1/2016 - 9/30/2017	165	2,622	6.3%
4/1/2018 – 3/31/2019	All exits from 4/1/2017 - 3/31/2018	155	2,482	6.2%
10/1/2018 – 9/30/2019	All exits from 10/1/2017 - 9/30/2018	181	2,486	7.3%
4/1/2019 – 3/31/2020	All exits from 4/1/2018 - 3/31/2019	201	2,576	7.8%
Target				8.2%

Section 2, Table 6.3-1
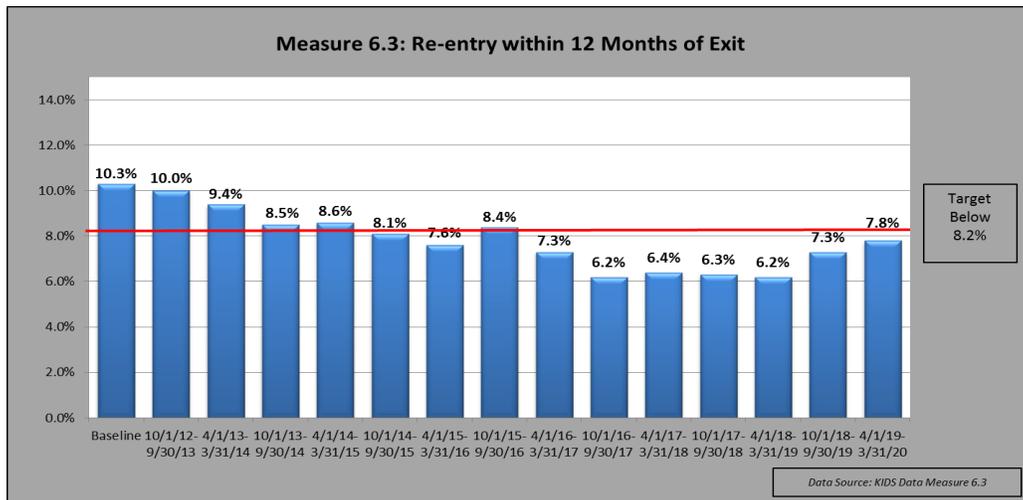
Section 2, Graph 6.3-1

Commentary

The number of children re-entering out-of-home care within a 12-month period is now at 7.8 percent, which remains below the set target of 8.2 percent. The measure remains 2.5 percent lower than the original baseline and exceeded the target by 0.4 percent.

Permanency Safety Consultations (PSCs) continue to be the primary strategy implemented to maintain reduced re-entry rates. PSCs with a safe recommendation still include the completion and documentation of an Assessment of Child Safety prior to reunification as an action step. Additional follow-up activities are developed and identified with the district director and PSC team to support safe family reunification, as needed. PSC action step guidance will be developed to assist districts in creating quality action steps. Quality action steps will further support the child welfare (CW) specialist in adequately assessing safety to determine if any safety threats are still present. PSCs remain a group safety discussion with the district director present to support more quality decision-making thus impacting re-entry into care. Additionally, services such as Comprehensive Home-Based Services, Intercept, and Systems of Care continue to be utilized to support families during trial reunification.

During this reporting period, Permanency Backlog Calls continued to ensure appropriate services are referred to meet the family's needs prior to reunification. This is an additional coaching strategy that instills the importance of making sure CW staff appropriately and accurately assess the family and are aware that needed services must be in place for successful reunification and thereafter following case closure. The backlog calls can expand upon action steps identified in prior PSCs. With the Program Improvement Plan completed statewide as of May 2020, the Safety through Supervision Framework is another supportive strategy identifying appropriate needs and services for families through intentional case staffings between the supervisor and CW specialist. Additionally, the enhanced parent engagement efforts encourage staff to be more intentional and frequent in contacts with parents, thus allowing the CW specialist more opportunities to ensure the parents have the appropriate services their family needs to prevent re-entry. This is the second reporting period this measure saw an increase. Child Welfare Services will continue to monitor the measure and engage in ongoing activities such as qualitative case analyses on re-entry causes to ensure children remain safely in their homes post-reunification.

6.4: Permanency for Legally-Free Teens

Operational Question
Of all legally-free foster youth who turned age 16 in the period 24 to 36 months prior to the report date, what percent exited to permanency by age 18?

Data Source and Definitions
Among legally-free foster youth who turned 16 in the period 24 to 36 months prior to the report date, Measure 6.4 reports the percent that exited to permanency by age 18. An "Exit to Permanency" includes all youth with an exit reason of adoption, guardianship, custody to relative, or reunification. "Legally free" means a parental rights termination date is reported to Adoption and Foster Care Analysis Reporting System (AFCARS) for both mother and father.

Description of Denominator and Numerator for this reporting period
Denominator: All children in care who turned 16 from 4/1/2017 through 3/31/2018 and were legally free at the time they turned 16.
Numerator: The number of children, who turned 16 from 4/1/2017 through 3/31/2018, were legally free at the time they turned 16, **and** reached permanency prior to their 18th birthday.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children in care who turned 16 from 10/1/2009 - 9/30/2010 and were legally free at the time they turned 16.			30.4%

10/1/2012 – 9/30/2013	All children in care who turned 16 from 10/1/2010 - 9/30/2011 and were legally free at the time they turned 16.	44	170	25.9%
4/1/2013 – 3/31/2014	All children in care who turned 16 from 4/1/2011 - 3/31/2012 and were legally free at the time they turned 16.	36	134	26.9%
10/1/2013 – 9/30/2014	All children in care who turned 16 from 10/1/2011 - 9/30/2012 and were legally free at the time they turned 16.	37	148	25.0%
4/1/2014 – 3/31/2015	All children in care who turned 16 from 4/1/2012 - 3/31/2013 and were legally free at the time they turned 16.	37	146	25.3%
10/1/2014 – 9/30/2015	All children in care who turned 16 from 10/1/2012 - 9/30/2013 and were legally free at the time they turned 16.	33	126	26.2%
4/1/2015 – 3/31/2016	All children in care who turned 16 from 4/1/2013 - 3/31/2014 and were legally free at the time they turned 16.	29	105	27.6%
10/1/2015 – 9/30/2016	All children in care who turned 16 from 10/1/2013 - 9/30/2014 and were legally free at the time they turned 16.	35	123	28.5%
4/1/2016 – 3/31/2017	All children in care who turned 16 from 4/1/2014 - 3/31/2015 and were legally free at the time they turned 16.	41	132	31.1%
10/1/2016 – 9/30/2017	All children in care who turned 16 from 10/1/2014 - 9/30/2015 and were legally free at the time they turned 16.	59	136	43.4%
4/1/2017 – 3/31/2018	All children in care who turned 16 from 4/1/2015 - 3/31/2016 and were legally free at the time they turned 16.	84	162	51.9%
10/1/2017 – 9/30/2018	All children in care who turned 16 from 10/1/2015 - 9/30/2016 and were legally free at the time they turned 16.	73	139	52.5%
4/1/2018 – 3/31/2019	All children in care who turned 16 from 4/1/2016 - 3/31/2017 and were legally free at the time they turned 16.	64	122	52.5%
10/1/2018 – 9/30/2019	All children in care who turned 16 from 10/1/2016 - 9/30/2017 and were legally free at the time they turned 16.	66	125	52.8%
4/1/2019 – 3/31/2020	All children in care who turned 16 from 4/1/2017 - 3/31/2018 and were legally free at the time they turned 16.	65	118	55.1%
Target				80.0%

Section 2, Table 6.4-1
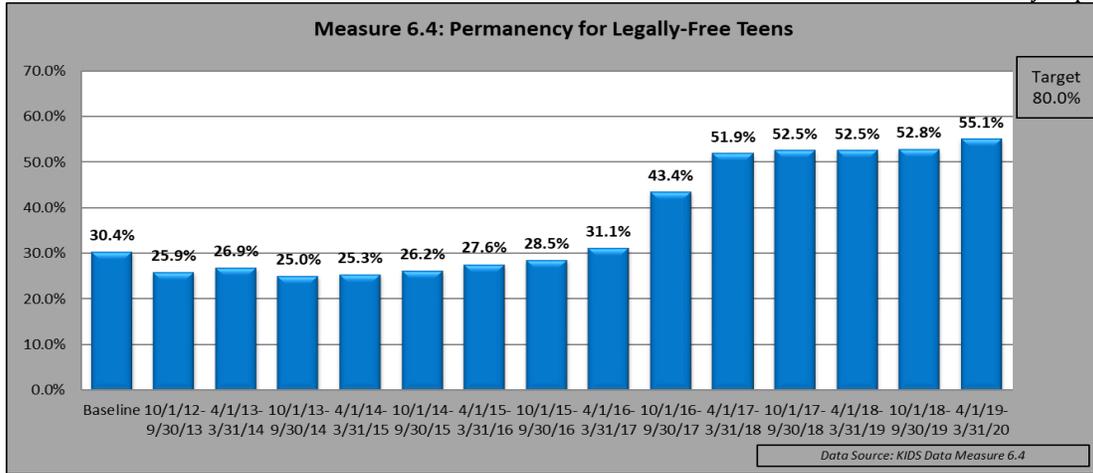
Section 2, Graph 6.4-1

Pinnacle Plan Measure 6.4 - Number and Percent of Children who Turned 16 while in Foster Care and Legally-Free													
Exit Reason	REGION 1		REGION 2		REGION 3		REGION 4		REGION 5		TOTAL	
ADOPTION	12		20		19		11		19		81	
REUNIFICATION	0	33.3%	0	36.7%	0	34.4%	0	34.1%	0	31.8%	0	34.1%
GUARDIANSHIP	3		2		3		3		2		13	
CHILD AGED OUT / OTHER	5	11.1%	4	6.7%	6	10.9%	1	2.4%	3	4.5%	19	7.2%
OTHER EXITS	0		0		1		0		0		1	
Still in Care	25	55.6%	34	56.7%	35	54.7%	26	63.4%	42	63.6%	162	58.7%
TOTAL	45		60		64		41		66		276	
Data Source: Totals include Measure 6.4 for reporting periods ending 9/30/20, 3/21/21, 9/30/21 and 3/31/22. Run Date: 1/5/2020													

Section 2, Table 6.4-2

Commentary

From 4/1/2017 through 3/31/2018, a total of 118 legally-free youth turned 16 years of age. Of these youth, 65 or 55.1 percent achieved permanency and 53 or 44.9 percent exited care prior to reaching permanency.

Achieved Permanency:
- 52 youth were adopted (44.1%);
- 12 youth were placed in guardianship or custody to relative (10.2%); and
- 1 youth exited to reunification (0.8%).

Exited Care Prior to Reaching Permanency:
- 52 youth exited care through emancipation/aging out (44.1%); and
- 1 youth exited for other reasons (0.8%).

During this review period, Child Welfare Services (CWS) showed an improvement by 2.3 percent for an overall performance of 55.1 percent. This performance is 24.7 percent above the baseline and the highest of all reporting periods. Efforts continue to be made statewide to increase the number of legally-free youth 16 through 17 years of age exiting care to permanency before their 18th birthday. Core Strategy 6.4 continues to include mandatory district director staffing of each young person over 13 years of age that could potentially be brought into state custody to determine if there is a true safety threat. Intentional multi-level staffing's continue to include the district director's presence, supervisor, and child welfare (CW) specialist, any tribal coordinators, Oklahoma Successful Adulthood (OKSA) program staff, permanency expediters (PE), or Adoption Transition Unit (ATU) specialists to address legal and relational permanency for legally-free teens starting at ages 15 and continue on at 15.5, 16, 16.5, 17, 17.3, 17.6, and 17.9 to ensure continued efforts and progress are made with focused efforts towards legal permanency. A monthly report was created to identify the young people that are due a monthly staffing and can be filtered down by each region and district director. All tracking tools for this strategy remain the same.

With the statewide reduction in youth with the case plan goal (CPG) of Planned Alternative Permanent Placement (PAPP), as well as the implementation of the Wendy's Wonderful Kids model, ATU duties now include working with youth with a PAPP goal. ATU staff in Regions 1 and 2 began working with youth with a PAPP goal in February 2020. ATU provides monthly updates to the Permanency for Teens Coordinator (PTC) to track the work done until all youth with PAPP CPG moved over to ATU on 6/1/2020. Beginning 6/1/2020, the PE in Regions 3 and 5 focus on permanency efforts targeting 15 year olds with the goal of adoption in Quad 4. Youth in Quad 4 are not legally-free and do not have an identified placement. Regional lines will be less important statewide in order for the PE to be assigned secondary responsibility for youth with PAPP CPG. The PE will continue several of the efforts utilized when working with youth with a PAPP goal to include:

- Facilitating monthly staffings for assigned youth with the primary CW specialist and CW supervisors to identify barriers to permanency and assign action steps.
- Coordinating with the Family Finding and Actively Seeking KINnections units to identify permanent connections that may lead to legal permanency for these youth.
- Modeling how to review a case with focused efforts towards legal permanency with primary CW specialists and exploring with them the potential solutions for barriers to legal permanency.

The PEs continue to support 6.4 efforts by assisting district directors with the multi-level staffing to ensure they take place and are documented at each critical point starting at age 15 through exiting care to legal permanency or until turning 18 years of age. The PEs still work with youth with the goal of guardianship and young people with more difficult circumstances as deemed appropriate by the regional lead. CWS recognizes the value of the efforts made by the PEs over the last several years in reducing use of the PAPP CPG, as well as the role they played in messaging the importance of legal and relational permanency to field staff. CWS will evaluate PEs' work and how it can continue to impact Core Strategy 6.4. The PEs track and report their efforts with the Monthly PE Tracking Tool. PEs' supervision and training remain unchanged. They are supervised by the permanency lead in each region, but receive weekly support and monthly training from the PTC. PEs are also up-to-date on all OKSA programming and funding to ensure they can provide information on transitioning services for young people ages 14-21 to support their permanency plan. Additionally, the work done by the PEs was monitored through the Program Improvement Plan.

The statewide Permanency for Teens face-to-face training is converting into an online training on the Learning Management System. The training will be mandatory for CW specialists with a teen on their caseload ages 13 and older and will include topics, such as the importance of legal and relational permanency for teens; how to engage teens in permanency conversations and their own search for permanency; how to review a case record with focused efforts towards permanency; and myth busting about the independent living benefits a youth will be eligible for when he or she achieves legal permanency before the age of 18. The PTC also started conversations with the field manager of the recruitment and retention program about developing a teen specific recruitment and retention effort to increase opportunities for teens to find relational and legal permanency. The premise of a Weekend Respite Foster Care for Teens program to expand foster parents' knowledge about teens in foster care was discussed and its feasibility will be explored.

The OKSA program is currently restructuring how it provides supports to the field to ensure transition planning for teens, starting at age 14, and include the participation of supportive adults in the young person's life and permanent connections. CW staff will be able to simultaneously include youth engagement to help young people achieve their permanency plan goals. Ensuring relational permanency is addressed early and often positively affects legal permanency rates. Oklahoma Human Services Innovation Services is developing a platform for OKSA that will also include an accountability tool to ensure tasks are completed timely.

Oklahoma was invited by the Children's Bureau to present at the national Adoption Call to Action Summit II held in Washington D.C. on 1/15/2020 – 1/16/2020. The presentation was shared with other states and provided information regarding the systemic changes that took place in Oklahoma to improve legal permanency rates for teens in care. Oklahoma offered information on: how to support staff with training and tools; how PEs were utilized to reduce the

number of youth with a PAPP CPG; how to incorporate legal permanency messaging into the Chafee program; and how to continually evaluate the work being done and make adjustments for continued improvements. As a result of this presentation, several states reached out to OKSA to discuss its work in Oklahoma with an interest in implementing similar efforts in their states.

As a result of Titles IV-E and IV-B of the Social Security Act (the Act) and Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351), on 8/1/2019 the Children's Bureau released Information Memorandum 19-03 (IM) on engaging, empowering, and utilizing family and youth voice in all aspects of child welfare to drive case planning and system improvement. The purpose of the IM is to demonstrate that family and youth voice are critical to a well-functioning child welfare system and to strongly encourage all public child welfare agencies, dependency courts, and Court Improvement Programs to work together to ensure that family and youth voice are central in child welfare program planning and improvement efforts. Through a competitive application process, Oklahoma was one of 25 states selected to participate in a two-day Youth Engagement Summit hosted in partnership with the Children's Bureau and the Annie E. Casey Foundation's Jim Casey Youth Opportunities Initiative. The objective of the summit is to operationalize the content of the IM by assisting Oklahoma in evaluating the current levels of authentic youth engagement and create a plan to infuse youth voice throughout all areas of the child welfare system. The Youth Engagement Summit was originally scheduled to occur face-to-face on 4/30/2020 – 5/1/2020; however, due to the COVID-19 pandemic, the summit will occur virtually on 8/26/2020 – 8/27/2020. After the summit, the OKSA program will partner with Foster Care and Adoption's Recruitment and Retention program to engage young people currently in care with recruitment and retention efforts aimed to increase the availability of safe and affirming foster and adoptive families willing to take in teens. By including authentic youth voice at all levels and most specifically within recruitment and retention, these efforts have the potential to increase legal and relational permanency options for legally-free teens in OKDHS custody.

Conclusion
While there is no indication the COVID-19 pandemic caused a decline in the outcomes for the current reporting period or will for subsequent reporting periods, the potential is there for a decrease in legal permanency rates if: court hearings are postponed or delayed; current Strategy 6.4 efforts do not occur as required; or information regarding the importance of legal permanency is not provided regularly to staff. It will be important to work closely with the court system to ensure the COVID-19 pandemic does not negatively impact the timeliness of reunifications, adoptions, and guardianships, not only for Strategy 6.4, but with the overall work CWS does with children and families. One pandemic affected area was the 2020 legislative session. House Bill 233 was amended during the 2020 legislative session to allow Chafee funds to be utilized for young people ages 16-17 years old that were reunified. This proposal is one objective of the 2020-2024 Child and Family Services Plan and has the potential to increase legal permanency rates when passed. However, due to the COVID-19 pandemic, the legislative season stopped abruptly. The bill's subject matter will most likely be revisited in the 2021 legislative season. CWS continues to look for ways to improve legal permanency outcomes for teens with Office of Juvenile Affairs involvement, youth in congregate care, and runaway (AWOL) youth.

6.5: Rate of Adoption for Legally-Free Children

Operational Question
Of all children who became legally free for adoption in the 12-month period prior to the year of the reporting period, what percentage were discharged from foster care to a finalized adoption within 12 months of becoming legally free?

Data Source and Definitions
All children who became legally free for adoption in the 12-month period prior to the year of the reporting period with the percentage who were discharged from foster care to a finalized adoption in less than 12 months from the date of becoming legally free are reported in Measure 6.5. "Legally Free" means there is a parental rights termination date reported to Adoption and Foster Care Analysis Reporting System (AFCARS) for both mother and father. This measure is federal metric C 2.5.

Description of Denominator and Numerator for this reporting period

Denominator: All children who became legally free for adoption from 4/1/2018 through 3/31/2019.

Numerator: The number of children who became legally free for adoption from 4/1/2018 through 3/31/2019 **and** were discharged from care to a finalized adoption in less than 12 months from the date they became legally free.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children who became legally free from 10/1/2010 - 9/30/2011			54.3%
10/1/2012 – 9/30/2013	All children who became legally free from 10/1/2011 - 9/30/2012	898	1,474	60.9%
4/1/2013 – 3/31/2014	All children who became legally free from 4/1/2012 - 3/31/2013	857	1,540	55.6%
10/1/2013 – 9/30/2014	All children who became legally free from 10/1/2012 - 9/30/2013	839	1,618	51.9%
4/1/2014 – 3/31/2015	All children who became legally free from 4/1/2013 - 3/31/2014	935	1,797	52.0%
10/1/2014 – 9/30/2015	All children who became legally free from 10/1/2013 - 9/30/2014	1,200	2,099	57.2%
4/1/2015 – 3/31/2016	All children who became legally free from 4/1/2014 - 3/31/2015	1,459	2,304	63.3%
10/1/2015 – 9/30/2016	All children who became legally free from 10/1/2014 - 9/30/2015	1,567	2,355	66.5%
4/1/2016 – 3/31/2017	All children who became legally free from 4/1/2015 - 3/31/2016	1,754	2,558	68.6%
10/1/2016 – 9/30/2017	All children who became legally free from 10/1/2015 - 9/30/2016	1,886	2,734	69.0%
4/1/2017 – 3/31/2018	All children who became legally free from 4/1/2016 - 3/31/2017	1,770	2,577	68.7%
10/1/2017 – 9/30/2018	All children who became legally free from 10/1/2016 - 9/30/2017	1,674	2,395	69.9%
4/1/2018 – 3/31/2019	All children who became legally free from 4/1/2017 - 3/31/2018	1,669	2,319	72.0%
10/1/2018 – 9/30/2019	All children who became legally free from 10/1/2017 - 9/30/2018	1,634	2,208	74.0%
4/1/2019 – 3/31/2020	All children who became legally free from 4/1/2018 - 3/31/2019	1,596	2,129	75.0%
Target				75.0%

Section 2, Table 6.5-1
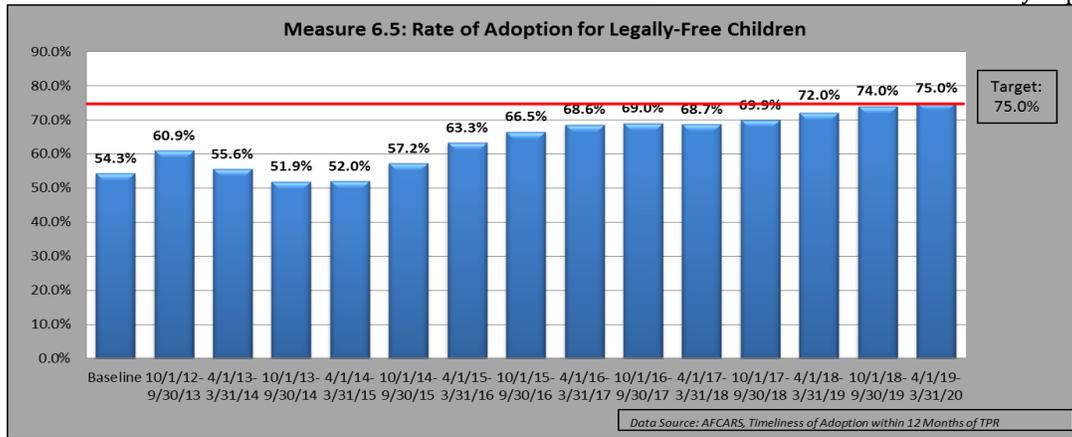
Section 2, Graph 6.5-1

Commentary

During this review period, Child Welfare Services (CWS) showed an increase of 1.0 percent to achieve the 75.0 percent target. This is the first time the target was met. Overall improvement is 20.7 percent since the baseline was established.

In each regional monthly Adoption Timeliness Accountability Team (ATAT) conference, the following staff participate: regional deputy director, when available; regional program analyst; field managers; district directors, when the barrier is a Permanency Planning specialist issue; all Resource/Adoption supervisors; and the Interstate Compact on the Placement of Children (ICPC) compact administrator, when available. Regions 1, 2, 4, and 5 staff the following cohorts of children:

- Legally free 60–calendar days but not yet authorized;
- 14-calendar days authorized but not in trial adoption; and
- 30-calendar days in trial adoption not yet finalized.

Children that meet the criteria in each cohort are staffed monthly by conference call until the barrier is resolved and the child is moving forward towards permanency.

Region 3 staffs all Quad 1 children monthly and its total of children finalized within 12 months from becoming legally free appears to be higher than the other regions. Region 3 consists solely of Oklahoma County. One of the major factors contributing to Region 3's high efficiency is because Region 3 has one of the most involved court system in the state. Once parental rights are terminated in Region 3, the court sets and holds adoption hearings for finalization of Quad 1 children. Region 3 courts hold weekly adoption finalization hearings. In counties outside of Region 3, adoption finalization hearings are not held as often and the court review process to set the finalization date may take longer. CWS and the strategy lead have acknowledged this and are exploring actions to move children in other regions to permanency in a more timely manner.

As ATAT continues to move forward, the regional leads report that the teams are committed to this process for moving children to permanency. Regional leads provided the following updates:

Quad 1 children adopted between January 1, 2020 and June 30, 2020					
Region	Region 1	Region 2	Region 3	Region 4	Region 5
Total	127	198	151	178	118

Section 2, Table 6.5-2

- In this reporting period, the Region 1 team finalized the adoption of two brothers who spent most of their time in custody in shelter care prior to finding their adoptive family. A foster home converted to become an adoptive home to provide the brothers a forever family. The ATAT process assisted with accountability and helped prioritize tasks to make this adoption a success story.

- Region 2 incorporated Oklahoma Human Services (OKDHS) adoption attorneys into the monthly ATAT call to help address identified legal barriers with sibling separation. In this reporting period, Region 2 finalized 136 adoptions, of which 65 met their projected date of finalization.
- Region 3 continued to lead the state with achieving timely adoption finalization at a target rate of 54 percent. Since Region 3 is solely Oklahoma County, their team previously met face-to-face monthly to staff children. The ATAT team adapted to virtual and teleconference meetings to conduct their monthly staffing.
- Region 4 ATAT calls are running smoothly and finalization dates are being set again as the state begins to re-open during the COVID-19 pandemic. Region 4 had several courts closed to any hearings that were not considered to be emergency or mandatory; therefore, during this reporting period, Region 4 had more children than normal in trial adoption and unable to finalize. The number of children in trial adoption waiting to finalize is now decreasing as dates for finalizations are being set and children are exiting care via adoption.
- Region 5 had many children awaiting court hearings for finalization get adopted or get a finalization court date set in Tulsa, even amidst the COVID-19 pandemic. The quarterly meetings between CWS and Tulsa County courts continue and have assisted with setting dates for finalization and moving children to permanency.

Across the state, Foster Care and Adoption (FC&A) field managers and the ATAT regional leads now co-lead the monthly ATAT calls. Several regions had already transitioned to co-leading meetings when CWS leadership decided to implement co-leading as a statewide effort. Co-leading improved CW specialists according to field managers and regional leads that made anecdotal reports of an increase in the timeliness of responses to completing action steps. CW specialists are more proactive in response and follow-up, which eliminates the need for the field managers or regional leads to follow-up and prompt the specialists into action. Regional ATAT leads complete follow-up with district directors, as needed, when barriers are related to Permanency Planning or Child Protective Services (CPS). Field managers set accountability and timeframes for Resource specialists when barriers are related to FC&A. When barriers are outside of CWS control, CW specialists communicate regularly with applicable partners for barrier updates.

In June 2020, the OKDHS adoption attorneys began attending each ATAT call for the region they represent. Adding the adoption attorneys to the call assists with legal questions that arise regarding legal barriers. The OKDHS attorneys also discuss the options of adoption versus guardianship as well. An OKDHS adoption attorney informational pamphlet was provided to OKDHS and resource family partner (RFP) resource parents in May 2020 to remind them that OKDHS adoption attorneys can finalize adoptions. The pamphlet emphasized the knowledge and requirements for what is needed for OKDHS Legal Services (LS) to finalize an OKDHS adoption. While CW specialists cannot give advice on attorney selection for a family, CW specialists can provide families with contact information and the pamphlet when adoption is the goal. The families can then choose to inquire with OKDHS LS when they desire. Resource specialists were provided with the contact information cards and pamphlet for OKDHS LS in June 2020. As part of the June resource reminder, CW specialists reviewed the adoption attorney information services with OKDHS and RFP resource parents.

The KIDS enhancement to track barriers was scheduled to release in November 2020. However, due to the COVID-19 pandemic and priority projects, the barrier tracking for Quad 1 children was rescheduled to an anticipated February 2021 release date. With the enhancement delay, CWS evaluates monthly documentation in KIDS Contacts to assist in monitoring barriers. This documentation does not identify or track trends as will the February 2021 release, but it allows for case specific documentation and searching within each individual case for status updates for a Quad 1 child. The regional lead notes barriers for each child staffed in either a Word document or in a column on the YI818 Excel spreadsheet. These notes on barriers and action steps are detailed differently by each lead. See **Barrier Logs**. The monthly documentation would allow barriers and action steps for each individual child to be documented in KIDS Contacts by the Adoption specialists assigned to the case and reviewed as needed by supervisors, field managers, regional leads and any other CWS.

The Quad 1 dashboard enhancements that the strategy lead discussed with KIDS is dependent upon the release of the KIDS barrier tracking enhancement for release in February 2021. Until the release, the strategy lead will continue to

collect the YI818, Ongoing Quad 1 report, logs from each regional lead for the children staffed on the monthly ATAT calls and the identified barrier/action steps.

The Resource File Request for Adoptions (RFRA) process assists in the timely retrieval of needed documents to move the adoption forward. Even though the RFRA can sometimes be a barrier to adoption timeliness, it is rarely a common barrier as the process is now the natural standard and practice for CW specialists. Overdue annual updates are improving and remain below 100 even through the COVID-19 pandemic. As of June 2020, the backlog was reduced to 79 overdue annual updates or reassessments.

Post-Adoption Services and the FC&A programs team is working to create updated tip sheets and an updated statewide virtual training for Adoption and Resource specialists assigned non-id homes. The trainings are to assist in bridging the gap and improving communication between Post-Adoption Services and the field. This training will focus on the process from completing the adoption assistance application (AAA) through the review process, and to receiving the final agreements. Training highlights will include discussion of common AAA errors and why delays occur. Post-Adoption Services provides a monthly log to field managers outlining the AAA with errors. Field managers will team CW specialists who consistently submit errors that require corrections, with a seasoned CW specialist who can coach and review the AAA prior to submitting to Post-Adoption Services.

In July 2020, the strategy lead plans to work with the OKDHS Tribal Unit and establish a Tribal program field representative (PFR) as the point of contact for ATAT concerns. The goal is for the Tribal PFR to have adoption process knowledge and assist with any identified barriers related to tribal delays. The strategy lead is proposing the idea of identifying a Tribal PFR as an ATAT liaison and participating in the monthly ATAT calls, when possible.

Children with an adoption goal, especially children in identified homes but not yet legally free, tend to be some of the children that take the longest to reach permanency. To move those children to permanency more timely, the ATAT strategy lead and the Permanency strategy lead collaborated on guardianship questions to incorporate throughout adoption staffings. When a case plan goal changes to adoption, a child is criteria staffed as part of this internal process where all parties to the case meet to discuss the case's legal status and if the child has an identified adoptive placement. The ATAT strategy lead is developing guardianship questions to incorporate in the criteria staffing. Specifically, if the child is in an identified kinship placement, the parties will discuss if guardianship might be an appropriate goal for the child. Another effort that the ATAT strategy lead and Permanency strategy lead are working on is developing specific guardianship questions to utilize during quarterly regional quad staffings held for all children with an adoption goal. This is an additional opportunity to address guardianship's appropriateness for children with an adoption goal.

6.1: Rate of Permanency for Legally-Free Children with No Adoptive Placement

Operational Question
Of children who were legally free but not living in an adoptive placement as of January 10, 2014, what number of children exited care to a permanent placement?

Data Source and Definitions
All children who were legally free for adoption as of 1/10/2014 and did not have an identified adoptive family with the percentage who have since achieved permanency, either through adoption, guardianship, or reunification, are reported in Measure 6.1. The target for this measure is that 90.0 percent of the children age 0-12 years, and 80.0 percent of the children age 13+ years will achieve permanency. "Legally free" means there is a parental rights termination date reported to Adoption and Foster Care Analysis Reporting System (AFCARS) for both mother and father or for one parent when the child was previously adopted by a single parent. In the KIDS system, these children are classified as "Quad 2" children, indicating that these children are legally free and have no identified adoptive placement.

Description of Denominator and Numerator for this reporting period
Denominator: All Quad 2 children with a case plan goal of adoption as of 1/10/2014.

**Numerator:**   The number of Quad 2 children with a case plan goal of adoption who achieved permanency.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Cohort Baseline 1/10/2014				292 Children
1/10/2014 – 6/30/2014	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	8	207	3.9%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	1	85	1.2%
7/01/2014 – 12/31/2014	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	47	207	22.7%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	8	85	9.4%
1/01/2015 – 6/30/2015	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	78	207	37.7%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	17	85	20.0%
7/01/2015 – 12/31/2015	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	119	207	57.5%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	23	85	27.1%
1/01/2016 – 6/30/2016	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	137	207	66.2%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	32	85	37.6%
7/01/2016 – 12/31/2016	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	156	207	75.4%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	34	85	40.0%
1/01/2017 – 6/30/2017	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	162	207	78.3%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	37	85	43.5%
7/01/2017 – 12/31/2017	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	167	207	80.7%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	39	85	45.9%
1/01/2018 – 6/30/2018	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	171	207	82.6%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	39	85	45.9%
7/01/2018 – 12/31/2018	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	174	207	84.1%
	All Quad 2 children age 13 or older as of 1/10/2014 with a case plan goal of adoption	42	85	49.4%
1/01/2019 – 6/30/2019	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	176	207	85.0%
7/01/2019 – 12/31/2019	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	178	207	86.0%

1/01/2020 – 6/30/2020	All Quad 2 children age 0-12 as of 1/10/2014 with a case plan goal of adoption	181	207	87.4%
Target		90.0% (Age 0-12)		80.0% (Age 13+)

Section 2, Table 6.1-1
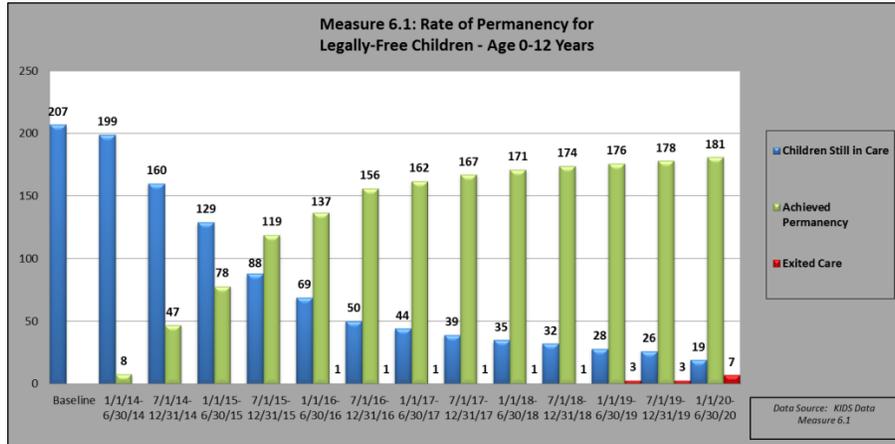
Section 2, Graph 6.1-1
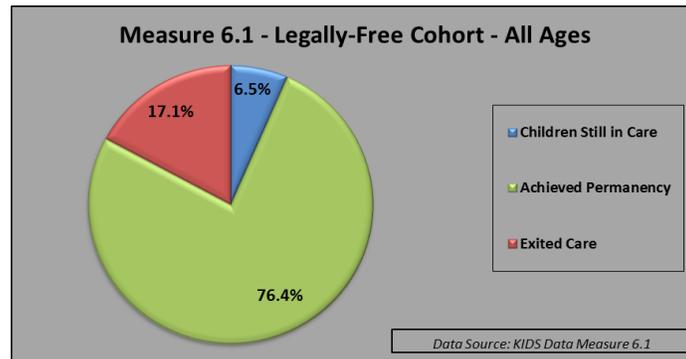
Section 2, Chart 6.1-1

Commentary

Of the 292 children in the original cohort from 1/10/2014, a total of 223 children or 76.4 percent achieved permanency, 50 children or 17.1 percent left care to non-permanent exits, and 19 children or 6.5 percent remain in care.

As of 6/30/2020, for the cohort of 207 children, age 0-12 who were legally free without an identified placement, 181 or 87.4 percent reached permanency. The remaining 19 children in care, age 0-12, all have a case plan goal of adoption.

During this reporting period, seven youth from the baseline cohort left care:

- Two youth exited care via finalized adoption;
- One youth exited care via finalized guardianship; and
- Four youth exited care via emancipation at age 18.

The Adoption Transition Unit (ATU) implemented the evidence-based Wendy's Wonderful Kids (WWK) child-focused model. During this reporting period, ATU implemented WWK for use with all youth with a goal of planned alternative permanent placement (PAPP). During this reporting period, 685 children and youth were served under this model.

Ongoing Permanency Efforts

ATU engages in a variety of permanency efforts individualized for each youth, but primarily follows the WWK model. Permanency efforts undertaken within this model include diligent search and case record review; network building; child-specific recruitment planning; building a strong relationship with the child; and assessment of adoption readiness

for both the child and any identified families. Direct practice work with youth involves helping youth understand the importance of permanency; the long-term impact permanency will have on their life; and how to live within a family unit using the new ATU booklet and WWK tools, as well as permanent connections group meetings. Ongoing efforts discussed previously and implemented during this reporting period:

- ATU dashboard in KIDS and ongoing development of reports as needed;
- Development of the virtual Permanent Connection Meeting (PCM) for teens;
- Finalized development of a disclosure protocol for children with intellectual disability (ID), developed by ATU, in collaboration with Education Services and Developmental Disabilities Program; and
- Expansion of ATU's work to include all youth statewide with a goal of PAPP.

As of this reporting period, ATU achieved one full year of only families presented at the monthly statewide family staffings (SWS), meaning 278 non-unique families were considered for children. A slight increase occurred in the percentages of children authorized with a SWS source compared to the same time period in 2018, when only children were presented. However, the majority of families presented did not have child preferences that fall within Resource Family Model parameters for non-ID adoptive families. A solution to this situation is under discussion within management and programmatic teams.

ATU continues its partnerships with the Oklahoma Successful Adulthood (OKSA) and Permanency Planning (PP) programs to increase the likelihood of permanency for children and youth in care. Enhanced partnerships between ATU, Foster Care and Adoption (FC&A), Recruitment staff, and PP at all levels, as well as with community partnerships, resulted in a significant number of inquiries on youth publically featured on partner sites. As part of the WWK model and ATU work, specialists continue partnering with Resource staff on discussions with kinship and other resource parents of Quad 2 children and youth about barriers to providing permanency. These intentional and customized team conversations with relatives and kinship families are to barrier bust any hesitancy articulated by families and explore other family who may provide legal permanency.

Continuing ATU and other partners' efforts to further identify important people in the youth's life will be incorporated into new programmatic processes currently in development to increase permanency possibilities for Quad 2 children and youth. Adoption Transition specialists continue to use the *Let's Talk! My Path to My Future* booklet to better reach and engage with older youth in care. Designed by ATU lead specialists using youth focus groups, this booklet was designed for older youth, regardless of case plan goal. When staff cannot visit youth in person due to the COVID-19 restrictions, they distribute the booklet's electronic version or mail a copy to the therapist or youth, and discuss the topics during phone or live video visits.

Since October 2019, a Quad 2 ATAT review was completed on all remaining children in the Quad 2 baseline cohort. Participants included any PP staff involved in the case, including district directors, as well as Resource staff, the Adoption specialist, and Specialized Placements and Partnerships Unit (SPPU) staff, when appropriate. Quad 2 ATAT calls for each child take place every other month, with some flexibility; older youth are reviewed more frequently. Beginning in April 2020, children with an impending permanency plan are staffed monthly to ensure action steps are completed. Due to the COVID-19 pandemic, new barriers arose and some tasks were paused, but an ongoing review helps staff process through barriers. Children on a bi-monthly review schedule are monitored monthly by ATU supervisors who provide monthly updates on their team's remaining baseline children. To ensure efforts remain under strict scrutiny, the monthly update and Quad 2 ATAT information are synthesized into one report for full review by the ATU leadership.

Another function of these calls is to help track the WWK work and progress on these children. The program field representative (PFR) ensures that WWK efforts on these children are a priority by following up on established target dates and due dates. Since inception of this process, nine children exited from care: three via a finalized adoption, two via finalized guardianships, and four via emancipation. Progress is made through ongoing follow-up on action steps and assigned tasks for other children to eliminate barriers. This progress is also assisted and supported by participants from other programs.

Seeing the effectiveness of the Quad 2 ATAT process, Quad 2 children residing at SHIELD, a non-OKDHS operated facility, were added as they are staffed for possible discharge, and the PFR has some flexibility to add other children as situationally needed. More children will be added through attrition from both the baseline and SHIELD cohorts. During this reporting period, 32 children were staffed via the Quad 2 ATAT process: 25 from Measure 6.1 baseline cohort and seven from SHIELD.

As ATU is working within the WWK model, generalized recruitment efforts are slowly being scaled back. During this reporting period:

- Oklahoma Heart Gallery activity: One photo and video production event was held, March 2020, photographing and videoing 26 children and youth.
- Oklahoma Heart Gallery/online presence: As of 6/30/2020, 370 children total were on the website, including 108 available, 60 listed as pending placement, and 90 listed as finalized.
- AdoptUSKids.org: 50 additional children were registered.
- AdoptEx.org: 45 additional children were registered.
- News Media features: Three news stations feature waiting children in Oklahoma. Due to COVID-19 restrictions, new videos of children were not featured during the quarantine months, starting mid-March through June.
  a) KFOR, an Oklahoma City station, videoed and featured four new children from January to mid-March. From mid-March through the remainder of this reporting period, due to the quarantine, the station re-featured videos on 10 children who are still available.   KFOR also featured two stories about adoption and interviewed the adoptive families, which included a relative family and a couple who adopted a teenager.
  b) KTUL, a Tulsa station, videoed and featured one new child each in January and February. KTUL's Waiting Child features were paused during the quarantine.
  c) KSWO, a Lawton station, videoed and featured three new children from January to mid-March. From mid-March through the remainder of this reporting period, the station re-featured videos on one available child.

From January through June 2020, the Foster Care and Adoption Support Center received 2,146 inquiries. The numbers for Inquiry Channel, Specified Interest, and Referral Source are represented in Section 2, Table 6.1-2. Referral Source was specified on 1,790 inquiries or 83.41 percent.

Inquiry Channel			Referral Source		
Internet	1770	82.48%	Internet	409	22.85%
Hotline	184	8.57%	Other	332	18.55%
AdoptUSKids	97	4.52%	Foster Parent	184	10.28%
Direct Phone	65	3.03%	Adopt US Kids	121	6.76%
Email	26	1.21%	Relative	113	6.31%
Recruitment Event	3	0.14%	Faith Based	105	5.87%
Other	1	0.05%	TV	100	5.59%
			Adoptive Parent	96	5.36%
			Facebook	94	5.25%
Specified Interest			Life Church	76	4.25%
Adoption	881	41.05%	OKDHS Employee/Website	73	4.08%
Resource Parent	738	34.39%	OK Fosters Website	32	1.79%
Fostering	502	23.39%	Newspaper	23	1.28%
Kinship	11	0.51%	Informational Meeting	16	0.89%
Other	9	0.42%	One Church	6	0.34%
OK Fosters	3	0.14%	Private Recruiter	4	0.22%
Respite	1	0.05%	DHS Recruiter	3	0.17%
Kinship Adoption	1	0.05%	Radio	2	0.11%
DDSD	0	0.00%	ICPC	1	0.06%
			Total	**1790**	100.00%

Section 2, Table 6.1-2   *Data Source: Foster Care and Adoption Support Center*
Totals may not add up exactly due to rounding

In January 2020, ATU began accepting assignment of youth with a PAPP case plan goal from Regions 1 and 2, and in June 2020, accepted assignment of all other youth with this goal statewide. ATU staff received training on this new protocol and how the WWK model is applied to work for youth with a PAPP goal on 3/25/2020 and 6/24/2020. Direct practice work with youth includes helping youth understand the importance of permanency; the long-term impact permanency will have on their life; and how to live within a family unit through use of the new ATU booklet and WWK tools, as well as permanent connections group meetings. The field administrator will continue to assist staff and WWK in tailoring this work within the model. KIDS created a daily report, Planned Alternative Permanent Placement with Secondary ATU Assignment, YI132, reflecting all youth with a PAPP goal that have ATU assignments, which will assist staff and supervisors in managing workloads.

This reporting period began the shift from general recruitment adoption events to PCM across the state. These were scheduled to begin 3/16/2020, but this event as well as the 5/3/2020 event were canceled due to the pandemic. Amid ongoing concerns that restrictions would be long-term, ATU staff reached out to OKSA at the National Resource Center for Youth Services to brainstorm and collaborate. This highly successful partnership resulted in a virtual PCM, completed via Zoom. Similar to in-person PCMs, this event included games, competition for prizes, and fun, with a learning element included. Discussion topics included the importance of building connections, developing goals with the connections, and the ability to maintain connections, which allow the young person to be supported while learning to become more independent. The 44 attendees, including youth, felt the event was successful enough to use as a model for statewide implementation.

Personnel
During this reporting period, one ATU staff, a child welfare (CW) specialist II, promoted out of the program. ATU hired four new staff and promoted two, including three CW specialist II positions, one CW specialist III, and two CW specialist IVs. ATU currently has one CW specialist II vacancy. ATU's total staff capacity is one field administrator, PFR, eight CW specialist IV's, seven CW specialist III's, and 38 full-time CW specialist I and II's. ATU also has administrative staff consisting of one administrative assistant II, one part-time staff person serving as statewide internet liaison, and one part-time person in the role of statewide staffing coordinator, for a total of 59 staff.

Each of the eight full-time ATU CW specialist IV supervisors support a team of four to six staff. ATU continues to have one team without a CW specialist III; therefore, this team uses the shared responsibility approach and extends offers of additional duties to select CW specialist II staff that want to build leadership capacity. ATU may gain a CW specialist III position through attrition from other FC&A teams. ATU currently has zero staff on graduated caseloads, and during the majority of this reporting period, all staff met workload standards.

ATU staff participated in two full-day quarterly staff development meetings this reporting period. The March meeting was an overview of COVID-19 policy and protocol modifications, working with youth with a PAPP goal, and an activity to stretch the staff's idea of what adoption efforts are. The afternoon included training on adoption disclosures and the newly created Adoptive Family Service Plan. The June meeting included a discussion about racial issues; COVID-19 guidance; protocols around unpausing face-to-face visits; a discussion on the agency's Service First Model; working with youth with a PAPP goal of; review of the virtual PCM for teens; discussion around new protocols and processes surrounding Quad 2 adoptions; and *Guidance on WWK*. As part of the onboarding process and to aid with retention, all new ATU staff, whether or not new to the agency, are required to complete National Training Institute's Adoption Competency and Mental Health training through the Center of Adoption Services and Education, as well as attend a two-day WWK training. ATU hired one person during the COVID-19 pandemic who will partake in virtual WWK training.

Monthly adoption trainings for Adoption Transition and Adoption specialists who work with non-identified families occur monthly to assure staff are apprised of new processes and protocol to support and preserve Quad 2 adoptive placements. Child Welfare Services created the curriculum with the Statewide Coordinator for Adoption Preservation Services to create an adoption competent workforce, and this training evolved into the conduit by which new information is shared and trained.

Support

Upon review of past data, it was determined that the plan for the behavioral health consultants (BHCs) to participate in all disclosures for Quad 2 children and youth outweighed their capacity. During the past reporting period, FC&A and ATU program staff began to work with the Oklahoma Human Services Clinical Team to develop a new triage process to use the BHCs more effectively in assisting with transition planning and post-placement services for Quad 2 children and their prospective adoptive families. Staff was trained on this new process on 4/1/2020, and the process will be further detailed in 6.6 Trial Adoption Disruptions. Under the new triage referral system, the BHCs assisted with 12 Quad 2 Adoption Disclosures. The ongoing multi-level staffing of Quad 2 children and youth is helpful in getting them stepped them down from congregate or shelter care into family-like settings and supports permanency efforts. Additionally, Dave Thomas Foundation for Adoption staff is a constant, daily support to ATU staff in maintaining fidelity to the WWK model. Oklahoma's grant manager has direct contact with ATU specialists, supervisors, program staff, and administrator on a regular basis.

Conclusion

ATU has existed in its current structure for nearly four years. In October 2016, at the merge of Foster Care and Adoptions, ATU workload compliance was minimal, staff only worked with a select number of children, and piece-milled models guided the work. ATU has evolved over time from working only with Baseline 6.1 cohort children and youth, to all Quad 2 youth, to now including youth with a PAPP goal and consulting on other cases as needed. ATU has grown into a program specializing in youth needing permanency that maintains fidelity to the evidence-based WWK model, relies on data as a measure of programmatic health, and course-corrects to meet children's and youth's permanency needs. To-date, ATU takes a child-focused approach to advocacy and determining a customized permanency plan for each youth, regardless of case plan goal.

As an ever changing, self-correcting program, ATU continually strives to find effective ways to achieve permanency for children. Primary next steps include:

- Development of a semi-standardized format for virtual PCM format for use statewide;
- Engage in ongoing training and staff development for supervisors and staff working with youth with a PAPP goal;
- Continue discussions regarding the expansion of children staffed via the Quad 2 ATAT process to include children who experienced an adoption disruption in the previous six months;
- Conduct ongoing reviews of the statewide family staffing process and prospective non-identified families to determine effectiveness and identification of needed changes;
- Further explore technology usage to support our work with youth; and
- Explore possibilities for streamlining child profile updates and WWK assessments.

6.6: Trial Adoption Disruptions

Operational Question
Of all children who entered trial adoptive placements during the previous 12-month period, what percent of adoptions did not disrupt over a 12-month period?

Data Source and Definitions
A trial adoption (TA) placement is defined as the time between when a child is placed into an adoptive placement until the adoption is legally finalized. A trial adoption disruption is defined as the interruption of an adoption after the child's placement and before the adoption finalization.

### Description of Denominator and Numerator for this reporting period
Denominator: Number of children that entered trial adoption from 4/1/2018 through 3/31/2019.
Numerator: Number of children that entered trial adoption from 4/1/2018 through 3/31/2019 **and** the trial adoption did not disrupt within 12 months.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children who entered TA from 10/1/2010 – 9/30/2011			97.1%
10/1/2012 – 9/30/2013	All children who entered TA from 10/1/2011 – 9/30/2012	1,433	1,489	96.2%
4/1/2013 – 3/31/2014	All children who entered TA from 4/1/2012 – 3/31/2013	1,366	1,417	96.4%
10/1/2013 – 9/30/2014	All children who entered TA from 10/1/2012 – 9/30/2013	1,195	1,239	96.4%
4/1/2014 – 3/31/2015	All children who entered TA from 4/1/2013 – 3/31/2014	1,252	1,297	96.5%
10/1/2014 – 9/30/2015	All children who entered TA from 10/1/2013 – 9/30/2014	1,477	1,549	95.4%
4/1/2015 – 3/31/2016	All children who entered TA from 4/1/2014 – 3/31/2015	1,938	2,020	95.9%
10/1/2015 – 9/30/2016	All children who entered TA from 10/1/2014 – 9/30/2015	2,138	2,189	97.7%
4/1/2016 – 3/31/2017	All children who entered TA from 4/1/2015 – 3/31/2016	2,337	2,403	97.3%
10/1/2016 – 9/30/2017	All children who entered TA from 10/1/2015 – 9/30/2016	2,413	2,513	96.0%
4/1/2017 – 3/31/2018	All children who entered TA from 4/1/2016 – 3/31/2017	2,511	2,615	96.0%
10/1/2017 – 9/30/2018	All children who entered TA from 10/1/2016 – 9/30/2017	2,437	2,516	96.9%
4/1/2018 – 3/31/2019	All children who entered TA from 4/1/2017 – 3/31/2018	2,206	2,276	96.9%
10/1/2018 – 9/30/2019	All children who entered TA from 10/1/2017 – 9/30/2018	2,162	2,235	96.7%
4/1/2019 – 3/31/2020	All children who entered TA from 4/1/2018 – 3/31/2019	2,127	2,196	96.9%
Target				97.3%

Section 2, Table 6.6-1
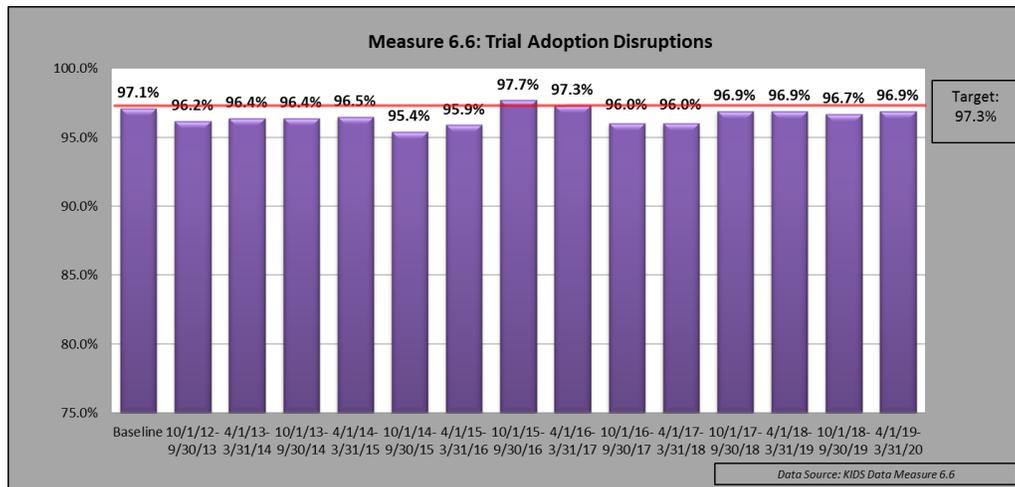
Section 2, Graph 6.6-1

Commentary

Child Welfare Services (CWS) slightly increased by 0.2 percent for this reporting period with 2,196 children entering into TA and 2,127 or 96.9 percent not experiencing a disruption while in TA placement.

Table 6.6-2 shows the breakdown of identified placement and non-identified placement children with a disruption during this reporting period.

Trial Adoption Disruptions						
Relationship of Adopting Placement	# of Disrupted Cases	Total Cases	% Disrupted	# of Kids Disrupted	Total Kids	% Disrupted
ID Placement	35	1328	2.6%	43	2073	2.1%
Non- ID Placement	22	96	22.9%	26	123	21.1%
Total	**57**	**1424**	**4.0%**	**69**	**2196**	**3.1%**
Data Source: Measure 6.6; Run Date: 6/10/20						
*ID Placement includes relationships of Non-Relative Foster Parent, Relative Foster Parent, and Relative Not Receiving Foster Care Payment. Non ID Placement is Other Non- Relative (highlighted pink on report detail) *There are 8 families counted in both Relationships for case types as they had children from ID and Non-ID adoptions.*						

Section 2, Table 6.6-2

Of the children placed with an identified adoptive placement, 43 of the 2,073 children experienced a TA disruption and 26 of the 123 children placed with a non-identified adoptive placement experienced a disruption. Additional factors contribute to the higher disruption rate in the non-identified resource homes, such as these children being older, possibly having increased special needs, and being placed with families with no previous established relationship. CWS continues to seek ways to better support these placements.

In the previous reporting period, CWS did not see sufficient progress in Quad 2 disruptions and conducted a deeper analysis to identify the contributing factors or trends leading to these disruptions. In October 2019, the Adoption Transition Unit (ATU) program field representative (PFR) began reviewing disruptions. All Quad 2 disruptions from July 2019 to October 2019 were reviewed and the ATU PFR continues to review all Quad 2 disruptions to date. As the reviews were completed by the ATU PFR and provided to the strategy lead and ATU field administrator, all three quickly noted the common trends that led to the disruptions. The strategy lead, ATU PFR, and ATU field administrator began brainstorming to improve the adoption process for Quad 2 children and non-identified adoptive families. In February and March 2020, the expanded strategies for adoption disruptions were developed to address the identified trends leading to Quad 2 disruptions. The three expanded strategies are as follows:
- Enhance the adoption disclosure process for Quad 2 children to provide structure and improve consistency and quality of the adoption disclosure process.
- Ensuring the CWS team is properly supporting the potential adoptive family and child during the pretrial adoption phase based on the family and child's needs.
- Enhance the supports to the adoptive family unit while in trial adoption.

Adoption Disclosure Process
The first expanded strategy is to enhance the adoption disclosure for Quad 2 children to provide structure and improve the consistency and quality of the adoption disclosure process. In March 2020, the strategy lead and ATU PFR collaborated to establish a list of required participants and optional participants to attend adoption disclosures for Quad 2 children and non-identified adoptive families.   Continuing enhancements related to improving the structure, consistency and quality of adoption disclosures, new guidance and several tip sheets were created for child welfare (CW) specialists to utilize. One tip sheet specifically outlined the roles and responsibilities of each participant. The tip sheet details the process for each specialist before, during, and after disclosure.

The behavioral health consultants (BHCs) and the Post-Adoptions Services field service workers continue to join adoption disclosures for Quad 2 children. The field service workers are able to attend all Quad 2 disclosures. At the

disclosure, the field service worker is introduced to the family to ensure the family knows CWS remains present and able to assist the family after finalization. The field service worker also provides information regarding the adoption subsidy payment and services after finalization. However, during the development of the expanded strategies, it was determined the BHCs do not currently have the capacity to attend all Quad 2 adoption disclosures. BHC capacity is limited due to the amount of time it takes for the BHC to conduct a thorough case review and the length of time for disclosure. Therefore, adoption disclosures were identified that are most important for the BHC to attend. These include:

- Children with removals of three or more;
- Children who have experienced a previous disruption/dissolution;
- Children with 10 or more placements;
- All Quad 2 baseline children; and
- Children with two or more behavioral health diagnoses.

While BHCs do not attend all adoption disclosures for Quad 2 children, they are available for consultation with CW specialists and families at any time on any case. To assist the BHC and ensure the correct requests are sent to them, the referral form was updated and a new email address was created specifically for adoption disclosure requests. The strategy lead and the ATU PFR monitor the newly created email box and send the BHC request for Quad 2 children who meet the requirements. For the 42 Quad 2 children authorized between April and June 2020, 35 adoption disclosure requests were sent to the email box. Of those, 12 met the requirements for BHC attendance at the disclosure, 21 did not meet the requirements, and two canceled or withdrew.

Training

The strategy lead and ATU PFR worked diligently this period to create and provide trainings related to the expanded strategies. These trainings better prepare CW specialists to assist Quad 2 children and non-identified adoptive families through the adoption process. Through the disruption reviews conducted for Quad 2 children, common barriers were identified and trainings developed and implemented on those specific barriers.

Training Date	Training Topics	Trainers
January 14, 2020	Trial Adoption Case Planning Call • Reintroducing the numbered memo, training on best practices, clarifying questions	Ashley Hairod, PFR Tracy Chaufty, PFR
February 11, 2020	Authorization Source Data, Discussion of General Recruitment Events • Review of the authorization source information • Discussion of the transition from adoption events to celebrations/training days and permanent connections events	Robin Gibson, FA
March 10, 2020	Overview of upcoming training topics and changes to come • Discussion of the creation of Adoptive Family Service Plan, visitation plan • Discussions of services for adoptive families • Elicit topics staff would like to cover	Ashley Hairod, PFR Tracy Chaufty, PFR Robin Gibson, FA
March 25, 2020 *Supplemental Training*	Disclosure Overview • Roles and responsibilities • Discussion during disclosure Trial Adoption Planning Call: Checklist • Continuing training on TA planning call	Ashley Hairod, PFR Tracy Chaufty, PFR
April 14, 2020	Adoptive Family Service Plan • Guide to implementing document • Attachment Trial Adoption Planning Call: Checklist • Roles and responsibilities • Services for the adoptive family and child(ren) • Timeframes Mental Health Consultant Process • Expectations of BHC and DHS • New Email Box and referral form for BHC attendance • Timeframes	Ashley Hairod, PFR Tracy Chaufty, PFR
May 12, 2020	Intentional Visitation, Q&A on new processes	Ashley Hairod, PFR

	• Importance of Family Time • Discussion topics for the first 3 visits • Attachment and bonding through visitation and trial adoption	Tracy Chaufty, PFR
June 9, 2020	Education Information for Adoptive Families Follow up training on Adoptive Family Service Plan • Feedback from specialist that piloted • Review of the Adoptive Family Service Plan • Importance of selecting adoption competent service providers	Julia Sterr, PFR Ashley Hairod, PFR Tracy Chaufty, PFR
July 14, 2020	Conducting and Documenting Quality Visitation • Quality contacts focusing on engaging the resource parent, discussion of well-being Adoption Competency Training Overview • Attachment • Practical application in our work	Lynette King, PFR Bonni Goodwin, PhD Ashley Hairod, PFR Tracy Chaufty, PFR
August 11, 2020	Step by Step Disclosure Process • Preparing for disclosure • During the disclosure • After the disclosure Adoption Competency Training Overview • Trauma & Child Development • Practical application in daily work	Bonni Goodwin, PhD Ashley Hairod, PFR Tracy Chaufty, PFR
September 8, 2020	Adoption Competency Training Overview • Grief & Loss • Honoring Biological History & Identity Formation • Practical application in daily work	Bonni Goodwin, PhD Ashley Hairod, PFR Tracy Chaufty, PFR
October 13, 2020	Adoption Competency Training Overview • Adoption Adjustment & Peak Challenging Times • Practical application in daily work	Bonni Goodwin, PhD Ashley Hairod, PFR Tracy Chaufty, PFR
November 10, 2020	Adoption Competency Training Overview • Adoption Competent Mental Health Services • Practical application in daily work	Bonni Goodwin, PhD Ashley Hairod, PFR Tracy Chaufty, PFR
December 8, 2020	Adoption Competency Training Overview • Formal & Informal Post-Adoption Services • Practical application in daily work	Bonni Goodwin, PhD Ashley Hairod, PFR Tracy Chaufty, PFR

ATU and non-identified Resource specialists complete these monthly adoption-related trainings to continue building adoption process and competency knowledge. These trainings are geared to improving the consistency of the CWS adoption process statewide. They also provide needed adoption competency information to ATU and non-identified Resource specialists. This equips staff to provide the disclosure information to the family and answer any questions from the family when the BHC is not in attendance.

In addition to the monthly trainings that CWS is providing, a mandatory training for all non-identified Resource specialists is provided by the Statewide Coordinator of Adoption Preservation Services. Four sessions of this training were offered in June and July 2020. This training, primarily focused on adoption competency and attachment, is geared specifically to the non-identified Resource specialists because their role is to lead the adoption disclosure and work with the adoptive family. A brief training overview will be provided to ATU staff in July 2020 during the monthly adoption training. The training discusses different attachment types and the bonding process through adoption; when behaviors may escalate and why; and assist specialists in answering questions from families, as well as provide a realistic timeline regarding attachment development, behaviors, and honeymoon periods. During this three-hour virtual training, the Statewide Coordinator for Adoption Preservation Services will also briefly discuss all of the National Training Initiative (NTI) topics and where to find helpful NTI resources related to specific topics. The BHCs took this same training from the Statewide Coordinator for Adoption Preservation Services on 7/6/2020 and dove deeper into the mental health side of the training.

CWS is incorporating NTI into CWS training to help all CW staff understand the combined issues of trauma, grief, loss, and adoption as a whole. An implementation proposal is being developed for all CW specialist II-IVs to complete NTI training. In the future, NTI will be added to the OKDHS online Learning Management System (LMS).

Adoption specialists were provided updated information regarding the adoption disclosure and the "My Support Team" training material, but due to the COVID-19 pandemic this training is not yet scheduled. The goal is to train Adoption specialists on the updated adoption disclosure process for Quad 1 children in the fall of 2020.

Pre-Trial Adoption Support
The second expanded strategy was to increase CWS support for the potential adoptive family and child during the pre-trial adoption phase based on the adoptive family's and child's individual needs. The TA planning calls prior to training in March were conducted; however, there was a misunderstanding on the documentation piece. For clarification, a process guide was created to ensure that documentation was completed. The process guide and training conducted in March reviewed the call's purpose, important information to discuss, and who is responsible for the documentation and implementation moving forward.

One element of the second expanded strategy is to develop a uniform process for pre-adoptive placement visitation plans to be created through a team approach. CWS currently utilizes a visitation plan for visitations between biological parents and children. This form was adapted and a new form was created for pre-adoptive placement visitations. Information was added to the form related to adoption and an additional guide was created discussing intentional visits, the importance of family time, and encouraging adoptive families and the child(ren) to discuss roles and expectations of all individuals who live in the house. Encouraging family time conversations helps to lessen anxiety and initiate the attachment process for both the adoptive family and child. CWS encourages the potential adoptive family to participate in the child's appointments prior to placement as well. Once a child is in trial adoption, CWS often does not know there are issues in the home leading to a disruption until it is too late. CWS may not be aware of issues arising in the home for several reasons. To increase awareness of potential issues in the home, the Statewide Coordinator for Adoption Preservation Services created *Developing Attachment* for a specialist to utilize while conducting the monthly contact. The specialist engages the adoptive parents and child separately to gauge how the attachment process is progressing. These questions and the responses from the adoptive parents and child are then shared with services providers when concerns are noted or new services need to be initiated.

Adoptive families continue to watch the designated trauma training webinars while initiating visits with a Quad 2 child and discuss their thoughts about the webinars with their specialist through the created guided questions. The webinars developed with National Resource Center for Youth Services (NRCYS) assistance are "The Impact of Trauma on Healthy Growth and Development" by Dr. Barbara Sorrels and "Trauma-Informed Caregiver Responses to Children's Problematic Behaviors" by Sara Coffey D.O. The responses from the adoptive family are discussed with the rest of the CWS team on the TA planning call to ensure the correct services and resources are provided to the adoptive family prior to placement.

To better serve adoptive families and children, an Adoptive Family Service Plan (Plan) was created and will be utilized prior to the child entering TA. Specialists were trained on the Plan on 4/14/2020 and a review with a question and answer session was held with specialists on 6/9/2020. The Plan will be used throughout the life of the TA case. This Plan is developed with involvement of all participants including: the adoptive child, adoptive family, ATU, child's CW specialist, and non-identified Resource specialist. This Plan includes steps for CW staff, the adoptive family, and the adoptive child. The Plan guides the specialist and adoptive family through the TA process and initiates open and honest communication. Most importantly, CWS and the family identify needed services and service providers, as well as attempt to initiate services prior to TA placement, when possible. An additional portion of the Plan includes development of "My Support Team" for the adoptive family during adoptive pre-placement visitations with the child. The goal of "My Support Team" is for the adoptive family to have all needed contact information easily accessible in one place. "My Support Team" includes the ATU, Permanency Planning, and non-identified Resource specialists and supervisors contact information, Mobile Crisis Response, the child's current placement provider, regional BHC, service

providers, Post-Adoption Services field service worker, and any other potential resource the family may need. The "My Support Team" is provided to the family when the visitation plan is created and will continually be updated with more services providers and resources as they are identified. The Plan was drafted and is pending release as an official OKDHS form.

All ATU and Foster Care and Adoption specialists and supervisors were provided with a website and list of service providers in Oklahoma that completed the NTI and Training on Adoption Competency trainings. With specialists having the contact information for adoption competent service providers statewide, CWS encourages specialists to contact these specific providers to provide virtual sessions with adoptive families, when needed. Specialists can also request specific service providers to work with local providers to assist in the adoption competent portion of sessions with adoptive families and children. The COVID-19 pandemic created several practice changes for CWS and service providers. As a result, most service providers initiated virtual sessions with their clients. This change is a positive outcome for some specialists with adoptive families in rural areas that usually have limited access to adoption competent service providers. Specialists are able to reach out to adoption competent service providers across the state and initiate virtual sessions for adoptive families and children.

Trial Adoption Support
The third expanded strategy is to enhance supports provided to the adoptive family while in TA. Through disruption reviews and research, CWS identified that a disruption is most likely to occur around two to three months after TA placement. Based on this information, it is critical that CWS remains a strong, involved team as a whole through the first three months of the TA period. Therefore, ATU will maintain a secondary assignment on the child's case and continue monthly visits with the child in addition to monthly visits conducted by the TA case's lead. When the child has been in TA status for 90-calendar days, CWS will evaluate what continued ATU involvement needs to be prior to ATU ceasing monthly visits with the adoptive family and child. In July 2020, a Permanency Planning PFR and the Statewide Coordinator for Adoption Preservation Services will train ATU and non-identified Resource specialists on the utilization of the Quality Contact Guide with adoptive parents and adults in the home. The questions will assist in assessing how placement is going and the progress of the adoptive family and child in the adoption attachment process.

The strategy lead is developing a process map for specialists that outlines all new processes developed as part of the expanded strategies. The process map will include all the guides and information that was provided previously in one booklet for easy reference. It will also include a completed guide for establishment of a family preservation check-in meeting to be completed approximately 45-calendar days after placement in TA. The TA check-in meeting is to bring together the adoptive family, CWS team, BHC, and service providers and create a safe environment where the adoptive family can openly discuss how TA is going and how all family members are adjusting.

Topics to Discuss with the Family at the 45-Calendar Day Check-in
- How is the family doing?
- What positive and more challenging behaviors is the family seeing with the child?
- How are all relationships in the home?
- Anything and everything else the family may want to discuss/need help with
- Attachment and bonding:
  - Parent(s) relationship with adopted child
  - Marriage/partner relationship
  - Adoptive child and biological children
  - Parent(s) relationship with biological children

A workgroup was initiated to create an interactive adoptive parent handbook, similar to a workbook created by ATU for working with youth in care. Workgroup participants include the strategy lead, the Statewide Coordinator for Adoption Preservation Services, and ATU and non-identified Resource specialists. Development of this new adoptive parent handbook is in the beginning stages and information is being collected. Some pertinent information identified includes:

- types of attachment;
- developing attachment through the adoption process;
- a graphic depicting the process and average timeframes for attachment development;
- a page for adoptive families and CW specialists to complete together specific to the child being placed in TA discussing specific triggers or times of the year that may be hard for a child based on past trauma; and
- Post-Adoption Services information.

Oklahoma continues its work with the National Training and Development Curriculum (NTDC) as a pilot site to help develop and then evaluate a state-of-the-art training program. This training program is to prepare foster and adoptive parents to effectively parent children exposed to trauma and to provide these families with the ongoing skill development needed to understand and promote healthy child development. The grant is currently in year three, which includes curriculum development with a plan to pilot the training in 2020. The implementation lead from Spaulding and adoptive parent co-facilitator from The North American Council on Adoptable Children came to Oklahoma to present the training of trainers for the NTDC curriculum. This training was held over five days in Oklahoma City, 1/27/2020 – 1/31/2020. In this training, the Oklahoma contract trainers were introduced to the NTDC curriculum and how the NTDC model is best facilitated. The state champions and the resource family training contractor, NRCYS, continue monthly conference calls with the implementation and evaluation leads to develop plans for the training pilot rollout. The rollout was originally set for late spring; however, due to the COVID-19 pandemic it was moved to late Summer 2020.

Throughout this reporting period, CWS conducted several trainings targeting specific areas that needed improvement. CWS also created several new training guides and practices in the hope of decreasing the disruption rate for Quad 2 children. CWS is considering providing non-identified adoptive families of Quad 2 children with a predesignated level of enhanced foster care or difficulty of care payment due to the disproportionately higher rate of disruptions for these children. This payment would be in addition to the adoption subsidy the family receives during trial adoption. The strategy lead is also working with the Statewide Coordinator for Adoption Preservation Services to create an ongoing survey to send to all adoptive families who experience an adoption disruption. The survey will gather demographic information from families to determine if the disruption was a Quad 1 or Quad 2 child and evaluate the process and support the family felt during adoption. The survey's goal is to create a quality assurance aspect regarding the process and allow CWS to continue to improve its support of adoptive families.

6.7: Adoption Dissolutions

Operational Question
Of all children whose adoptions were finalized over a 24-month period, what percentage of those children did not experience dissolution within 24 months of finalization?

Data Source and Definitions
A finalized adoption is defined as the legal consummation of an adoption. Adoption dissolution is defined as the act of ending an adoption by a court order terminating the legal relationship between the child and the adoptive parent. This term applies only after finalization of the adoption.

Description of Denominator and Numerator for this reporting period
Denominator: All children who had a legalized adoption during the 24 months ending 3/31/2018.
Numerator: All children who had a legalized adoption during the 24 months ending 3/31/2018 that did not dissolve in less than 24 months.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 10/1/2011 – 9/30/2012	All children with a legalized adoption from 10/1/2008 - 9/30/2010			99.0%
10/1/2012 – 9/30/2013	All children with a legalized adoption	2,969	2,979	99.7%

	from 10/1/2009 - 9/30/2011			
4/1/2013 – 3/31/2014	All children with a legalized adoption from 4/1/2010 - 3/31/2012	3,055	3,063	99.7%
10/1/2013 – 9/30/2014	All children with a legalized adoption from 10/1/2010 - 9/30/2012	2,856	2,865	99.7%
4/1/2014 – 3/31/2015	All children with a legalized adoption from 4/1/2011 - 3/31/2013	2,945	2,950	99.8%
10/1/2014 – 9/30/2015	All children with a legalized adoption from 10/1/2011 - 9/30/2013	2,846	2,849	99.9%
4/1/2015 – 3/31/2016	All children with a legalized adoption from 4/1/2012 - 3/31/2014	2,697	2,702	99.8%
10/1/2015 – 9/30/2016	All children with a legalized adoption from 10/1/2012 - 9/30/2014	2,737	2,741	99.9%
4/1/2016 – 3/31/2017	All children with a legalized adoption from 4/1/2013 - 3/31/2015	3,086	3,093	99.8%
10/1/2016 – 9/30/2017	All children with a legalized adoption from 10/1/2013 - 9/30/2015	3,647	3,655	99.8%
4/1/2017 – 3/31/2018	All children with a legalized adoption from 4/1/2014 - 3/31/2016	4,312	4,317	99.9%
10/1/2017 – 9/30/2018	All children with a legalized adoption from 10/1/2014 - 9/30/2016	4,721	4,727	99.9%
4/1/2018 – 3/31/2019	All children with a legalized adoption from 4/1/2015 - 3/31/2017	5,035	5,041	99.9%
10/1/2018 – 9/30/2019	All children with a legalized adoption from 10/1/2015 - 9/30/2017	5,109	5,119	99.8%
4/1/2019 – 3/31/2020	All children with a legalized adoption from 4/1/2016 - 3/31/2018	5,025	5,036	99.8%
Target				99.0%

Section 2, Table 6.7-1
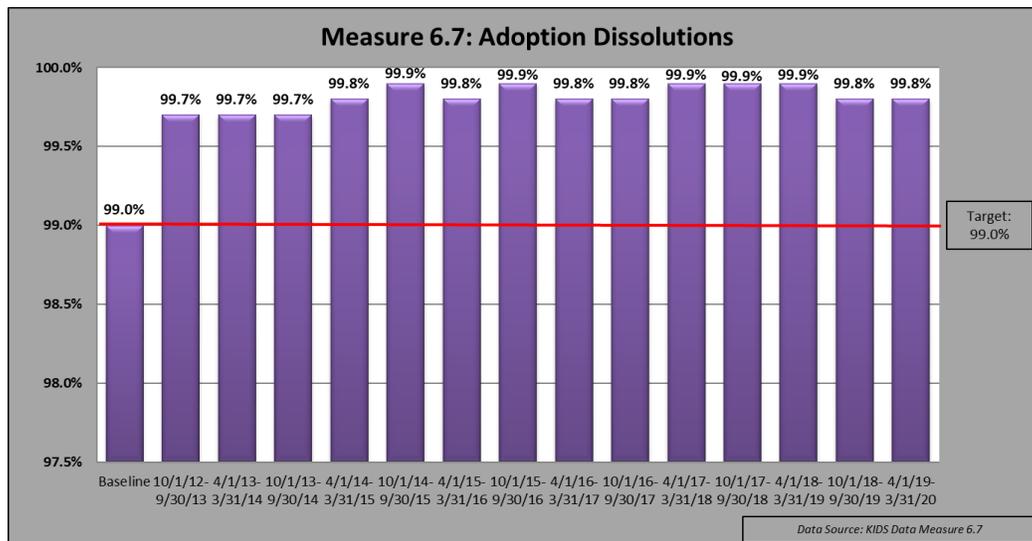
Section 2, Graph 6.7-1

Commentary

Child Welfare Services (CWS) continued to exceed the goal of a 99.0 percent success rate for adoption stability with less than 0.2 percent in dissolutions. There were 5,036 children with a legalized adoption during the 24 months ending

3/31/2018 and 5,025 or 99.8 percent of those adoptions did not dissolve within 24 months.

Post-Adoption Services is proactive in continuing to serve adoptive families through the COVID-19 pandemic and social distancing requirements. Post-Adoption Services specialists immediately reached out to families through phone, email, Microsoft Teams, and Zoom to assure them that the needed and deserved services and support for their family continues during the pandemic. Their goal is helping adoptive families feel connected to Post-Adoption Services during the pandemic and seize the opportunity to engage with families on a new level.

The challenges faced by families during this reporting period were different than those experienced in the past. Post-Adoption Services found there were more supportive communication with families and less crisis intervention. The number of FMs dropped to four. Post-Adoption Services participated in 15 disclosures through phone, Microsoft Teams, and Zoom. Director's crisis calls decreased to three and one legislative call was made. The uncertainty of the times fostered increased family connection that possibly contributed to the decline in crisis situations.

Post-Adoption Services continues to work in tandem with many external entities to seek resolutions for the adoptive families served. The behavioral health consultants, Oklahoma Health Care Authority (OHCA), Behavioral Health Unit, and the child's current and previous service providers work together with Post-Adoption Services to assess the family's needs. The field service worker (FSW) teams with the family's primary assigned Post-Adoption Services specialist through the crisis, unless the case becomes critical. At that point, the case is assigned to a FSW. Post-Adoption Services collectively works together at all levels to serve adoptive families. Post-Adoption Services continually seeks opportunities to support, educate, and engage with adoptive families.

In continuing efforts to promote family stability, Post-Adoption Services staff sought new and creative ways to help families feel supported, valued, and connected with CWS in a joint goal of preserving forever homes. Post-Adoption Services launched *Hope Lives* through the Post-Adoption Services quarterly newsletter as an opportunity for families to share the joys of their expanded families' aspirations and goals with one another. Post-Adoption Services received impressive submissions from families in this project. Thanks to a generous donation, a committee was able to select a winning family to receive a gift card. With the family's permission, Post-Adoption Services is publishing the winning family's journey in this quarter's newsletter. Post-Adoption Services maintains a line of communication with the Oklahoma Foster/Adoptive Coalition and participates in the Coalition's annual resource fair and any activities invited to. Post-Adoption Services is available to when adoptive families have questions or are in crisis. Participation in these activities builds relationships with families and offers tangible support when families are in need.

In the past, Post-Adoptions Services provided two trainings per year for adoptive parents, one in Oklahoma City and the other in Tulsa. Families attended the training site closest to their home. During this training, information was provided about Post-Adoption Services' ongoing efforts, as well any recent changes. A motivational speaker spoke at each meeting, a community partner in education shared information regarding Individual Education Plans, and an OHCA representative gave an update on SoonerCare. Post-Adoption Services staff also answered questions that families felt most comfortable about asking in-person. Families provided verbal feedback that the training was helpful and provided input on the post-training surveys. Due to budget cuts, the trainings were stopped. Post-Adoption Services plans to provide these trainings again when the budget and the COVID-19 pandemic restrictions allow.

SECTION 3. Capacity Indicators

2.1: New Family Foster Care Homes

Operational Question
How many new foster homes, including Foster Family Homes and Supported Foster Homes were opened during State Fiscal Year (SFY) 20?

Data Source and Definitions
Total count of new foster homes includes all Foster Family Homes and Supported Foster Homes by the month that the family assessment was approved using the agreed upon criteria. As of 7/1/2014, this measure does not include Kinship, Contracted Foster Care (CFC) Homes, Emergency Foster Care (EFC), Shelter Host Homes (SHH), Adoptive, or Tribal Foster Homes.

Trends

Reporting Period	Population	Result	
SFY 20 Baseline		2016 Foster Homes open as of 7/1/2019	
7/1/2013 – 12/31/2013	All CFC, Foster Family Homes, EFC, SHH, and Supported Foster Homes opened during the first half of SFY 14	346 Homes	763 Total Homes opened in SFY 14
1/1/2014 – 6/30/2014	All CFC, Foster Family Homes, EFC, SHH, and Supported Foster Homes opened during the second half of SFY 14	417 Homes	
7/1/2014 – 12/31/2014	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 15	409 Homes	780 Total Homes opened in SFY 15
1/1/2015 – 6/30/2015	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 15	371 Homes	
7/1/2015 – 12/31/2015	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 16	387 Homes	1,080 Total Homes opened in SFY 16
1/1/2016 – 6/30/2016	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 16	693 Homes	
7/1/2016 – 12/31/2016	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 17	431 Homes	884 Total Homes opened in SFY 17
1/1/2017 – 6/30/2017	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 17	453 Homes	
7/1/2017 – 12/31/2017	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 18	365 Homes	728 Total Homes opened in SFY 18
1/1/2018 – 6/30/2018	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 18	363 Homes	
7/1/2018 – 12/31/2018	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 19	366 Homes	810 Total

1/1/2019 – 6/30/2019	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 19	444 Homes	Homes opened in SFY 19
7/1/2019 – 12/31/2019	All Foster Family Homes and Supported Foster Homes opened during the first half of SFY 20	410 Homes	832 Total Homes opened in SFY 20
1/1/2020 – 6/30/2020	All Foster Family Homes and Supported Foster Homes opened during the second half of SFY 20	422 Homes	
Target		898 New Foster Homes opened by 6/30/2020	

Section 3, Table 2.1-1
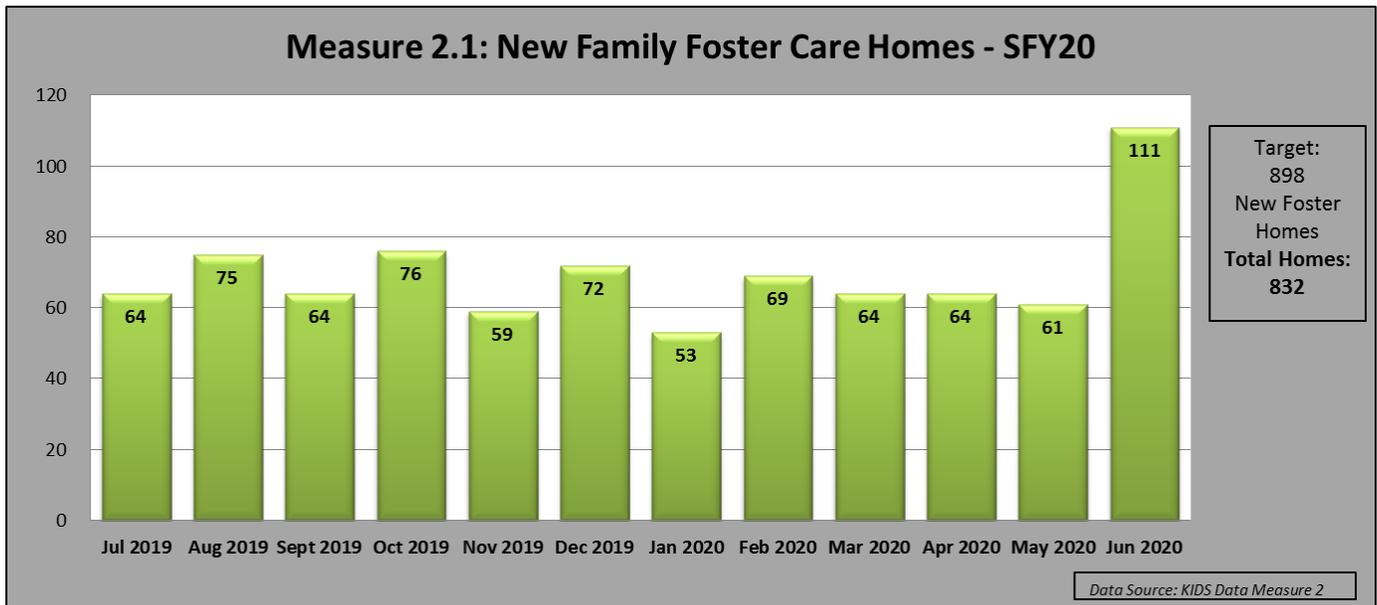
Section 3, Graph 2.1-1

Commentary

As of 6/30/2020, Child Welfare Services (CWS) opened 832 foster family homes and supported foster homes that were counted as new according to Pinnacle Plan criteria. The target for new homes by the end of State SFY 20 was 898 homes. CWS achieved 92.7 percent of the SFY 20 target for new homes. As of 7/1/2019, 2,017 homes were open. During SFY 20, 920 homes were opened and 829 homes were closed, leaving 2,108 homes open as of 6/30/2020 for a net gain of 91 homes. Net gain only counts unique homes even though a resource family may provide more than one type of foster care. This measure also excludes any out-of-state foster homes or homes open to provide respite-only care. Homes that move out-of-state are included through the end of the current SFY, but will be excluded for the starting baseline for the next SFY.

Recruitment and Retention

The organizational structure remains the same with one Foster Care and Adoptions (FC&A) Recruitment field administrator providing leadership for all 10 Recruitment units throughout the state.

Each CWS Recruitment unit prepared a SFY 20 recruitment plan that is updated quarterly with the final SFY update occurring in July 2020. In the updates, Recruitment supervisors and staff provide information on each completed activity and outcomes. Each unit carries out both recruitment and retention activities in their respective regions.

Current foster families continue to assist CWS Recruitment staff with recruitment efforts in multiple ways, including speaking engagements on the radio, presentations for groups and churches, and sharing fostering journeys at large-scale events. However due to the COVID-19 pandemic, Recruitment staff started brainstorming ways to continue to involve foster parents in non-traditional recruitment formats. In May 2020, CWS Recruitment staff videotaped interviews with several current foster families about how they have impacted children in Oklahoma Human Services (OKDHS) and families. The videos were shared on the OKDHS Facebook page and were well received. FC&A recognizes that current foster parents are excellent recruitment partners because they can speak from their own fostering experience. CWS Recruitment staff will continue to develop additional virtual recruitment options for current and former foster parents and staff to collaborate on in SFY 21.

In response to the COVID-19 pandemic, CWS Recruitment and resource family partners (RFP) both report looking for other ways to recruit families, such as using social media; contacting previous foster families to see if they want to re-open; and contacting families previously interested in fostering who did not follow through at the time. CWS continues to advertise for recruitment using coffee cup sleeves and flyers and are developing additional ideas for advertisements. CWS is reaching out to local community partners to see if newspapers will run fostering articles and if grocery stores, banks, and open restaurants will distribute flyers. CWS is also leveraging social media and the Oklahoma Fosters Facebook and Instagram accounts to keep a strong online presence. In addition, public service announcements for local radio stations are in development and families in the pipeline are being asked about friends or relatives who might be interested in fostering. In July 2020, CWS Recruitment staff will receive training from a national trainer and expert on youth issues regarding virtual recruitment trends and ways to implement those strategies in the coming SFY.

As of 6/30/2020, CWS Recruitment units opened 421 new foster homes, accounting for 88.6 percent of the CWS goal of 475 homes. FC&A leadership continuously monitored the progress of opening new homes along with the recruitment and retention activities throughout the state. The overall CWS recruitment goal was separated into smaller, regional goals. Region 4 surpassed their annual goal of 99 homes by recruiting 110 homes. Region 2 opened 125 homes, which was the highest number of new homes of the five regions. All CWS regions exceeded 70 percent of their set goals. In total, 833 new homes were opened, which is an increase of 33 homes compared to SFY 19. A decrease in overall recruitment numbers between March and June 2020 is due to the COVID-19 pandemic. Recruitment staff saw multiple events canceled that normally produce additional new homes and a reduction in the number of opportunities to directly engage with the general public.

Region 5 historically had low numbers of approved homes, but experienced its best quarter from April through June 2020. Region 5 hired a new supervisor in February 2020 after a long vacancy, as well as filled some of its long-term open positions. Region 3, also historically had lower numbers, yet matched its highest quarter during April through June 2020. Region 3 this year consistently had a supervisor and added a sixth recruiter to the unit this reporting period. Maintaining an appropriate number of supervisors and staff may have contributed to the overall improvements seen in the regions. CWS explored potential reasons for the consistently lower recruitment numbers in Regions 3 and 5. The Recruitment field administrator worked with both KIDS and the RFP liaison to calculate the percentage of CWS versus RFP-approved homes by region, as well as the number of RFP agencies that have a presence in each region. The data revealed that in Regions 3 and 5, over 60 percent of newly approved homes are opened by RFPs. Additionally, Regions 3 and 5 both have a high agency partner presence; however, when combining homes approved by agency partners and CWS, the total number of approved homes are similar to other regions in the state.

In April 2020, statewide performance-based contracts for agencies interested in recruitment, approval, and support of foster families increased from 14 to 15. A new RFP contract was signed effective 4/1/2020 with a new agency that was previously a subcontractor for another RFP. An abbreviated SFY 20 recruitment plan was finalized for this agency in May 2020. Because the agency did not have a contract in place until the fourth quarter of SFY 20, it was not included in SFY 20 recruitment goals. All other agencies continued to implement their previously finalized SFY 20 recruitment plans though some efforts were adjusted due to the COVID-19 pandemic. Second quarter recruitment plan updates were

received by February 2020 and third quarter updates were received by May 2020. Fourth quarter updates are in progress and are due in July 2020.

From January 2020 through June 2020, preliminary data indicated that RFP agencies opened 222 new foster homes bringing the total number of homes recruited by agency partners in SFY 20 to 412, which is 97.4 percent of the goal of 423. Seven agencies achieved or exceeded their recruitment goals while two other agencies met at least 85 percent of their goals. The remaining five agencies reached between 16.7 percent and 68.8 percent of their goals. The RFP field administrator and/or program field representative conducted additional meetings or calls at which recruitment efforts were discussed with seven agencies, including all five of the agencies that fell below 70 percent. In addition to assessment of recruitment efforts, a total RFP performance assessment is ongoing, and appropriate next steps are being determined. The enactment of stay-at-home orders, social distancing, and other restrictions due to the COVID-19 pandemic, necessitated that agency partners adjust their recruitment efforts and certification processes. All agencies continued using social media as a recruitment tool and alternatives or exceptions for a number of other requirements were explored. To further assist agencies in an unprecedented time, a regularly scheduled phone call to answer questions and provide information and updates with all RFPs was implemented. The calls occurred weekly in March and April 2020 and moved to bi-weekly in May 2020. In addition to the phone calls, a variety of tools and resources from forms with digital signatures to guidance on completing resource family assessments were also shared with the agency partners.

Follow-up contact continued with supported foster parent applicants who were in the approval process for over 90-calendar days. From January 2020 through June 2020, 80 families were surveyed. Of those surveyed, 32 reported no personal or agency-specific barriers. Many families indicated they were in the final stages of certification. One family reported they had both personal and agency specific barriers. Twenty-four families stated personal decisions or barriers were causing them to move slowly through the certification process. The most common personal reasons included schedules, medical issues, moving, or home renovations. Additionally, four families reported their application was closed due to personal reasons or because the RFP denied them. The remaining 19 families reported a variety of barriers with the most common reasons being paperwork issues or working through the resource family assessment process. Other barriers reported included: background checks, communication with the agency, training issues, and staff turnover. When a concern is reported through the survey, often the concern was already addressed by the agency; however, when a concern was not addressed, it is immediately reported to the identified or referenced agency to seek a solution. Surveys completed over the last year indicated no systemic issues; however, the surveys are ongoing and will remain a permanent part of the RFP process. The responses will still be used to focus on concerns reported by applicants on a case-by-case basis. When a trend or systemic issue is identified, it will be immediately addressed in a collaborative effort between the RFP staff and individual agency partners.

CWS Recruitment units continue to partner with RFP agencies, therapeutic foster care (TFC) recruitment, and Developmental Disabilities Services recruitment for events, when possible. Regional CWS Recruitment units are setting up ongoing collaboration meetings with agencies in their areas, with Regions 1 and 4 already having successful meetings in place. CWS implemented a quarterly meeting with agency partners, including TFC/Intensive Treatment Family Care (ITFC) and Tribes in March 2020, with the second meeting scheduled for July 2020. The quarterly meeting, held with all Recruitment staff, both internal and external, was fruitful in further exploring regional collaborative efforts, brainstorming ideas for recruitment and retention, and developing stronger relationships among Recruitment staff.

Recruitment units across the state continue to engage in retention activities. Recruitment staff routinely participate in FC&A support group meetings, and were productive in establishing several additional monthly support groups in the past six months. Recruitment staff work with local businesses to increase the number of community supports for families, offering assistance or discounted goods and services. In April 2020, CWS Recruiters partnered with the National Resource Center for Youth Services (NRCYS) to develop an online support group meeting in lieu of in-person meetings due to the COVID-19 pandemic. In May 2020, CWS recruiters interviewed current resource families to promote Foster Care Awareness Month that focused on stronger families. The interviews were posted to the OKDHS

Facebook page and for use as a recruitment tool. Recruiters across the state also continue to follow-up with newly approved families 90-calendar days post-approval to identify potential problems or issues the family may have encountered and to provide additional supports.

Communication and Supports

Actovos is a software communication tool CWS was beta testing. Actovos was intended to provide two-way communication between foster families and child welfare (CW) specialists when a placement for a child is needed. Budget constraints prohibit CWS from going forward with the Actovos contract renewal.

The OK Benefits project was previously put on hold as the new Oklahoma Human Services (OKDHS) director requested a work assessment by an outside consultant. OKDHS Leadership reviewed the consultant's report and moved forward with release of the OK Benefits Portal. The Portal's first phase was released in late February 2020 and the second phase is scheduled for release on 8/28/2020. The second phase includes significant changes for foster and adoptive parents. Foster and adoptive parents will now be able to apply online, upload documents, complete forms, and watch their progress as they move through the process. They will also have medical, educational, demographic, and child care information on children placed in their homes. CWS received feedback in the foster parent exit surveys that families are not always aware of all available information regarding the child in placement. CWS is hopeful that by having this information available in the Portal, foster parents will feel more informed about the children placed in their home. The Portal will continue to evolve as more features are added.

The CWS Community Partnerships team continues its collaboration with the faith-based community through the CarePortal in partnership with the non-profit 111Project in 20 counties statewide. Osage and Creek counties were added in March 2020. Through the Community Partnerships team, training and technical assistance is available to all OKDHS staff in an effort to strengthen and expand the program statewide. From 1/1/2020 to 6/30/2020, 1,442 custody children benefited from requests or needs that were met by churches. The estimated dollar value of these requests was $153,837. To-date, the CarePortal partnership has allowed 308 churches and 148 groups to serve a total of 9,281 children since 2015. The met requests have a total economic impact value of $3,539,037.

This quarter focused on technical assistance as all CW staff transitioned to teleworking and revising CarePortal norms to closely follow CDC guidelines for social distancing, while staying creative in how needs could be met by local faith-based organizations. One unit in Oklahoma County began piloting the CarePortal app. A review will be completed next quarter to give ample time to determine if it provided easier access to the CarePortal to advocate for the needs of their families while ensuring established processes and protocols are still followed. Through the Community Partnerships team, training and technical assistance is available to all OKDHS staff to strengthen and expand the program statewide. The Community Partnerships team will also assist in reaching out to local churches in counties identified as opened for the CarePortal for the remainder of 2020.

NRCYS supports and coordinates 24 Network Support Groups, serving 32 counties, in the five regions of the state. Network Support Groups are active and supporting resource families in the following counties: Adair, Bryan, Atoka, Coal, Carter, Love, Cherokee, Comanche, Garvin, McLain, Grady, Hughes, Seminole, Johnston, Marshall, Kay, Lincoln, Logan, Kingfisher, Murray, Oklahoma, Osage, Pawnee, Payne, Noble, Pittsburg, Pottawatomie, Sequoyah, Stephens, Jefferson, Wagoner, and two in Tulsa County. The Comanche County Network Support Group is operating through a partnership among NRCYS, CWS, and One Church, One Child. Development of additional Network Support Groups began in January 2020 in Muskogee and Rogers counties. A partnership of NRCYS, CWS, and One Church, One Child is being explored in the development of the Muskogee County group. All groups are open to CWS, contract, and tribal resource families serving children in OKDHS custody.

Network Support Groups, and the families that attend, benefit from a strong partnership between local CW staff and assigned NRCYS staff. Resource families play a critical role in the development and maintenance of each Network Support Group. Their input is sought in every area of planning, including meeting dates, time of day, and topics

presented. All Network Support Groups provide child care and a light meal. In many counties, community partners are providing these resources and in others, CW staff assumed responsibility for the light meal and/or for providing the child care. All Network Support Groups meet at sites provided free of charge within the community. The Network Support Group design includes a resource parent facilitator for each group. While most groups operate under this framework, a few decided to have FC&A staff facilitate.

Training is provided at Network Support Group meetings during at least eight of the 10 required meetings each year. Network Support Groups emphasize problem solving within a team framework, provide information to all groups and families on navigating the CW system, and training on topics relevant to caring for children placed in their homes. Training topics are selected based on input from the resource parents in attendance that complete a survey at each meeting's conclusion which evaluates the meeting and provides guidance for future meetings.

Prior to the suspension of all in-person events on 3/12/2020 in response to the COVID-19 pandemic, the program continued to operate. From 1/1/2020, through 3/12/2020, 857 adults attended a total of 49 Network Support Group meetings statewide. The average attendance at each meeting was 18 adults. Of those families attending who chose to share their family type, data indicates that 324 kinship parents, 373 foster parents, and 41 adoptive parents were in attendance. Additional support groups, provided by a variety of community partners, are present in local communities statewide and are often attended by FC&A staff to support the families.

In May and June 2020, CWS and NRCYS partnered to offer virtual support group meetings. Resource parents in each of the five regions had an opportunity to participate in a support group meeting via Zoom. Each group had the same trainer and topic. In April 2020 the topic was Surviving Coronavirus without Losing Your Mind, presented by a former Oklahoma State Foster Care Ombudsman. A total of 71 resource parents participated excluding the Region 3 Oklahoma County meeting which was cancelled due to weather. In May 2020, 112 resources parents participated in the virtual support group meetings. The May topic was Creative Strategies to Keep Your Family Running Smoothly During COVID-19. Participant feedback after each virtual meeting indicated that they liked both the virtual format and topics. Plans are to continue virtual support groups through the summer and early fall SFY 21. In April, NRCYS developed a newsletter that was sent out to all foster parents providing valuable information about resources for families and the virtual support groups. A second newsletter, **Network News You Can Use-May 2020 Issue 2** went out to families in May.

Prior to the State's stay-at-home order for the pandemic in mid-March 2020, potential resource families had the option to utilize either online or in-person training to complete their pre-service training requirements. From 3/12/2020 through 6/30/2020, online training became the only format available. This accounts for the substantial increase in online enrollments. From January through June 2020, 1,345 prospective resource parents enrolled in online training, 981 individuals completed the training, 215 withdrew, and 187 individuals are still in the completion process. The number of completions, withdrawals, and pending completions exceeds the number of enrollees due to carryover from earlier reporting periods. Feedback continues to be positive and families report that the training is interactive and useful.

Additional information was requested as to the reasons for withdrawal from online training. The following information was captured for the 169 individuals who withdrew between April and June 2020, regardless of enrollment date.
- 60 individuals: the trainer was never able to establish contact with them or contact ceased.
- 57 individuals: the children were either returned home or were moved from the home due to other reasons.
- 17 individuals: home closure or withdrawal of applications to become a foster or adoptive home.
- 15 individuals: internet availability or issues with technology.
- 20 individuals: variety of circumstances, such as health issues (including contracting COVID-19) and moving or working out-of-state.

Oklahoma, a pilot site for the National Training and Development Curriculum (NTDC) for Foster and Adoptive Parents, is currently in grant year three, which includes curriculum finalization. In January 2020, after curriculum finalization and

completion of the trainer's guide, the implementation lead and another national trainer came to Oklahoma to train the NTDC curriculum in a Train the Trainer (TTT) course. NRCYS staff, the state champions, and contract trainers attended the five-day training to prepare for training foster and adoptive parents. These individuals also attended follow-up trainings to the TTT course. These follow-up trainings hosted by NTDC help with trainer development. The state champions, along with NRCYS staff, currently have monthly conference calls with the national implementation and evaluation leads to develop rollout plans. NRCYS staff and their contracted trainers have worked since January on preparation to begin the pilot in Canadian, Cleveland, Lincoln, Logan, Oklahoma, Payne, and Pottawatomie Counties. The pilot was delayed due to the COVID-19 pandemic; however, NTDC training is expected to begin in August 2020. The pilot will run from August 2020 through September 2022.

Exit surveys with foster families that requested home closure are still facilitated by the Foster Care and Adoption Support Center. Foster parents closing their resource due to medical reasons or moving out-of-state or out of the country were not contacted. Exit surveys were completed by 56 of 133 foster parents (42.1%) whose homes closed between the months of December 2019 and May 2020. Of the received surveys, three were partial surveys not completed past the 90 percent mark, which excluded them from inclusion resulting in 53 submissions for this analysis.

Information Obtained from the Surveys
- 79 percent reported a desire to focus on his or her own family as part of the decision to no longer foster.
- 64 percent stated they would consider fostering after time has passed.
- 60 percent would recommend or consider recommending fostering/adopting with OKDHS or an RFP.
- 42 percent experienced issues with his or her agency or OKDHS that influenced the desire to no longer foster.
- 38 percent would consider fostering in the future if changes were made to the CW system.

Positive Aspects of Being a Foster Parent
- 49 percent identified giving back to those in need.
- 45 percent had a good experience with OKDHS or their agency.
- 32 percent reported positively impacting children's lives.
- 30 percent experienced support from their family, friends, and community.
- 6 percent said supporting a biological family through reunification.

Challenging Aspects of Being a Foster Parent
- 92 percent reported the adjustment to being a foster parent including attachment issues, working with biological parents, lack of support, and time commitment.
- 51 percent stated issues with a caseworker including a lack of information at placement, unable to reach caseworker in times of crisis, and a lack of response to telephone calls.
- 49 percent indicated issues with the CW system including general policies, court processes, inadequate training, and paperwork.
- 43 percent identified the foster child's needs including a child's specific needs related to medical, discipline, or behaviors.

Ways to Enhance the Experience as a Foster Parent
- 77 percent identified CW system improvements including better trained staff, lower staff turnover rate, streamlining requirements for foster parents, more lenient rules for foster parents, and changes to the court system or processes.
- 75 percent stated improved communication including communication between caseworkers, with parents, and providing all known information at the time of placement.
- 68 percent stated more support including access to resources, respite care, child care, foster parent education, and CW staff availability.

During this period, CWS took a deeper look at three areas identified by the foster parent exit surveys: families that had

issues with OKDHS or their agency; families that would consider fostering if changes were made to the CW system; and support needs identified by foster parents. Of the families that experienced an issue that influenced the desire to no longer foster, the top responses included: negative customer service experiences with an agency or CW specialist; not receiving adequate information at the time of placement; inadequate support from CW specialist; and inadequate knowledge of resources. FC&A is working on ways to further address each of these issues. Some initial ideas being explored include sending exit survey responses that specify customer service issues with CW staff to field managers, developing a foster parent support plan in each region, and encouraging foster parents to utilize the OK Benefits Portal to obtain more information about children placed in their home. Currently, a workgroup is tasked with revising the placement process of foster children, which includes changes to the tool used to gather information about the child needing placement. The goal is to develop a child placement tool that is more comprehensive and provides more information to share with families. CWS is also exploring what, if any, options there might be to providing the completed the placement tool to the family at the time of placement.

Families that reported they would consider fostering when changes were made to the CW system indicated the top three were better communication between workers and families, court process changes, and more family support. FC&A plans to emphasize communicating with other programs prior to monthly contact and to partner with Permanency Planning programs on other ways to increase communication. To address court issues, a new form, Resource Parent Report to the Court, is in development to provide foster parents with a voice in court proceedings. Additionally, FC&A Programs is preparing a court process publication for families that gives an overview of court processes and guidance on completion of the court report.

Regarding support, FC&A is highlighting peer-to-peer support through the HALO Project virtual support groups, as well as NRCYS support groups conducted virtually during the COVID-19 pandemic. Based on foster parent feedback, CWS is exploring ways to improve foster parents' interactions and connections with other foster parents. CWS is also working on ways to build and enhance foster families natural support network to assist them with respite and self-care needs. CWS continues monthly resource reminders to open resources that not only give foster parents training credit, but also highlight different areas noted in the exit surveys. Each year at least one monthly resource reminder is about in-service training opportunities, informal care providers, and emergency contact information that includes contact information for the assigned district director and field manager. Additionally, as training opportunities become known, such as the Trust-Based Relational Intervention training that was made available free of charge to families through the Karyn Purvis Institute of Child Development through 8/31/2020, they are shared with resource parents.

In addition to the six main survey questions, foster parents are invited to provide additional feedback or comments. Survey participants are also given the opportunity to request contact from OKDHS to discuss more about their experience as a foster parent. A representative of the FC&A program tries to contact each participant who requests it. This is another effort to provide a foster parent time for intentional conversation about his or her experience. The exit surveys will continue through an additional quarter, July – September 2020; thus, allowing the annual survey data gathering to overlap the previous survey process. The data and feedback obtained from the additional quarter of exit surveys will continue to be utilized to increase foster family satisfaction, retention efforts, and identify any systemic trends that may need to be addressed. Following the exit survey completions in July 2020 for June 2020 closures, FC&A will conduct an analysis of all exit surveys for SFY 20.

Through collaboration with the University of Oklahoma (OU) Center for Public Management (CPM), FC&A Programs staff developed an annual survey. The survey's themes center around burnout, congruency between CWS values and the family's values, satisfaction, support, training, and communication. The survey format is a hybrid of scaling and open-ended questions, which will allow for both quantitative and qualitative analysis. The survey will take approximately 10 – 15 minutes for a foster parent to complete. Each quarter, one-fourth of the current, approved foster parent population will receive the annual survey electronically from OU CPM. The types of foster care included are traditional, supported, kinship (relative and non-relative), therapeutic, contracted, and ITFC. FC&A Programs staff inquired with OU CPM about the possibility of resource specific questions, such as for TFC, ITFC, and EFC homes. At this time, it does not appear that

this is feasible based on the OU's feedback. The survey was designed as a high-level view of all foster care experiences, rather than resource specific experiences; therefore, this idea will need to be explored further to determine if the annual survey is the proper avenue for collecting this information.

OU CPM will analyze the survey data to identify trends in current foster families' level of satisfaction. Based on trends, FC&A will evaluate current practices and make recommendations to increase foster family satisfaction and retention. Data will also be used to measure the impact of changes in practice, policy, and training. Eventually, the use of predictive analytics will allow analysts to identify patterns, make predictions, and establish causation and correlation of foster families no longer providing services. Annual reports will be created by OU CPM and distributed by FC&A Program staff.

During this reporting period, a pilot of the annual survey was conducted with a larger sample size. Early signs indicate greater validity than the current exit surveys. The pilot was received by 544 families, of which 223 families started the survey. Of the 223 families that started, 162 completed the survey to 100 percent and 41 achieved less than 100 percent completion resulting in 203 surveys (37.3%) with all or partial results. Twenty families initiated the survey but did not complete enough of it to count towards the partial completion totals.

To retain quality foster families, FC&A supervisors or field managers call any resource home in good standing that requested home closure. This call identifies if barriers to their continued foster care participation could be resolved and offers thanks for their service as foster parents. CWS continues to use both the YI023 – Open Resource report and the YI035 – Closed Resource report to monitor retention contacts. For the months of January through June 2020, per the YI023 – Open Resource report, two homes received retention contacts and remained open. Per the YI035 – Closed Resource report, 24 homes received a retention contact and eventually closed. In an effort to understand the small number of calls, a PFR reached out to the FC&A supervisors to ask about their understanding of the retention calls. Overwhelmingly, supervisors reported that the assigned Resource specialist discusses possible conversion options with appropriate kinship homes and retention options with traditional homes when the family expresses their desire to close their home. Supervisors were then not completing a retention call with those homes since the Resource specialist had already discussed the information with the family and knew the family's response. It was clear that the original messaging did not convey that the retention call was not just about conversion but additionally about thanking the family for their willingness to provide care for children. FC&A Program staff determined that the original messaging about retention calls needs to be updated and provided to staff again in order to fully implement the proper protocol for completing the calls. The updated messaging will include guidance regarding kinship homes appropriate for conversion to a traditional home and a reminder about the protocol to follow when completing a conversion addendum. The target for message distribution to staff is September 2020.

COVID-19 Response
All CWS Resource staff made weekly contact with families when in-person visits were suspended during the initial outbreak to ensure any identified needs were addressed and to give support. Since the COVID-19 pandemic began, multiple resources were provided to resource parents to help support their families. The CWS Director sent a letter to all foster parents with an update on the COVID-19 pandemic and outlined what visits would look like during this time, including how to utilize technology for video conference visits between parents and children. Additionally, funding was secured to allow emergency relief payments for resource families including TFC families. Each resource home that had placement of a child for the entire month, beginning in March 2020, received an additional $250 payment the following month. The emergency relief payments were in effect through May 2020.

One barrier that took weeks to overcome was the lack of available fingerprint sites due to closures from the COVID-19 pandemic. As of 4/17/2020, CWS received guidance from the Children's Bureau that the Stafford Act applied to this situation and exceptions for fingerprints could be made, when necessary, as long as a national name-based criminal check was completed. CWS will keep track of the foster parents who are granted this exception and follow-up with fingerprints once the COVID-19 pandemic crisis subsides and fingerprint sites are more readily available. The fingerprint

exception is available for both internal OKDHS homes, as well as the RFPs.   To date, a total of 11 fingerprint exceptions have been given.

Most other areas of retention and support for foster parents remain in place and active at this time. NRCYS and CWS worked together to develop virtual support groups statewide using the Network Support Group model of training and support, which became available in late April 2020. Three community partners provided virtual weekly support groups led by a trained mental health professional. This training is provided at no cost to Oklahoma foster families.

Due to the COVID-19 pandemic, CWS anticipates additional challenges for the 20-21 school year, which typically begins in August. CWS is developing guidance for all specialists to have intentional conversations with resource parents about their plan for the school year and how they plan to address any potential barriers for education or child care. CWS is also collaborating with Child Care Licensing to allow relatives and non-relatives of foster parents to provide in-home child care for the children placed in the home if needed.

Conclusion
In SFY 14, 763 new foster homes were open and the number rose steadily to peak at 1,080 in SFY 16. At the same time, the number of children in OKDHS out-of-home care continued to decrease resulting in the need for fewer homes to be opened. CWS and RFPs recruited 832 new homes in SFY 20. Clearly, Pinnacle Plan measures and the Core Strategies that were implemented to recruit new foster parents for children in care were successful. CWS also put efforts in place to better support and retain foster parents, such as building strong collaborations with the RFP agencies and community partners, and increasing the number of quality foster parent support groups statewide. CWS streamlined both processes and forms to move families more quickly through the approval process, developed online training to assist in timely completion, and revised policies to allow for less burdensome yearly reviews. Additionally, more flexibility exists for using informal care, which includes implementation of reasonable and prudent parenting standards. CWS made significant efforts to improve the foster parenting experience. Exit survey results indicate the majority of foster parents would recommend fostering to someone they know. Another significant result is the net gain of 47 homes for SFY 19 and the net gain of 91 homes for SFY 20. Through these many collaborative efforts, recruitment and retention of foster homes continues on a more positive track since reform began.

2.3: New Therapeutic Foster Care Homes

Operational Question
How many new Therapeutic Foster Care (TFC) homes were opened in State Fiscal Year (SFY) 20?

Data Source and Definitions
Total count of new TFC homes includes all new TFC homes by month that were opened using the agreed upon criteria.
Trends

Reporting Period	Population	Result	
SFY 20 Baseline		97 TFC homes open as of 7/1/2019	
7/1/2013 – 12/31/2013	All new TFC homes opened in the first half of SFY 14	55 TFC Homes	107 Total TFC Homes opened in SFY 14
1/1/2014 – 6/30/2014	All new TFC homes opened in the second half of SFY 14	52 TFC Homes	
7/1/2014 – 12/31/2014	All new TFC homes opened in the first half of SFY 15	66 TFC Homes	137 Total TFC Homes opened in SFY 15
1/1/2015 – 6/30/2015	All new TFC homes opened in the second half of SFY 15	71 TFC Homes	
7/1/2015 – 12/31/2015	All new TFC homes opened in the first half of SFY 16	43 TFC Homes	105 Total TFC Homes

1/1/2016 – 6/30/2016	All new TFC homes opened in the second half of SFY 16	62 TFC Homes	opened in SFY 16
7/1/2016 – 12/31/2016	All new TFC homes opened in the first half of SFY 17	36 TFC Homes	59 Total TFC Homes opened in SFY 17
1/1/2017 – 6/30/2017	All new TFC homes opened in the second half of SFY 17	23 TFC Homes	
7/1/2017 – 12/31/2017	All new TFC homes opened in the first half of SFY 18	17 TFC Homes	36 Total TFC Homes opened in SFY 18
1/1/2018 – 6/30/2018	All new TFC homes opened in the second half of SFY 18	19 TFC Homes	
7/1/2018 – 12/31/2018	All new TFC homes opened in the first half of SFY 19	7 TFC Homes	16 Total TFC Homes opened in SFY 19
1/1/2019 – 6/30/2019	All new TFC homes opened in the second half of SFY 19	9 TFC Homes	
7/1/2019 – 12/31/2019	All new TFC homes opened in the first half of SFY 20	34 TFC Homes	63 Total TFC Homes opened in SFY 20
1/1/2020 – 6/30/2020	All new TFC homes opened in the second half of SFY 20	31 TFC Homes	
Target			106 New TFC homes opened by 6/30/2020

Section 3, Table 2.3-1
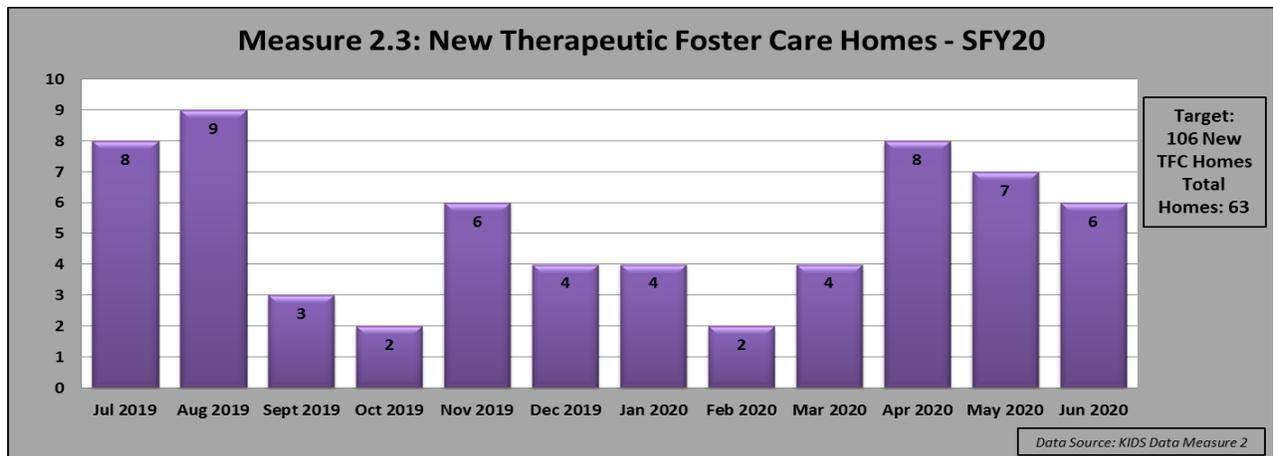
Section 3, Graph 2.3-1

Commentary

As of 6/30/2020, Child Welfare Services (CWS) opened 63 TFC homes that were counted as new according to Pinnacle Plan criteria. Of these 63 therapeutic homes, 29 homes were opened as TFC and 34 homes opened as Intensive Treatment Family Care (ITFC). The target for new homes by the end of SFY 20 was 106 homes. CWS achieved 59.4 percent of the SFY 20 target for new homes. As of 7/1/2019, 97 TFC homes were open statewide. During SFY 20, 55 TFC homes opened and 45 TFC homes closed, leaving 107 homes open as of 6/30/2020, for a net gain of 10 homes.

CWS continues to build a robust continuum of care (COC) through ongoing efforts to improve and expand the utilization of Therapeutic Foster Care (TFC) and Intensive Treatment Foster Care (ITFC). The TFC programs staff have continued to develop partnerships with agency providers focused on recruitment and retention of foster families skilled and ready to provide care to children with additional emotional, behavioral health and developmental needs.

In an effort to support the COC work, increasing communication and collaboration between the various placement programs, a reorganization of the placement programs teams was completed. Initially, TFC was merged with the foster

care and adoption team. Later the Specialized Placements and Partnerships Unit (SPPU) team joined the Foster Care and Adoption (FC&A) team, resulting in all placement programming being placed under one deputy director. This agency structure allows for more collaboration in building the COC, identifying problems, developing solutions while considering the impact to the various placement types.

Monthly meetings with OKDHS leadership, TFC program staff, agency partners and the Oklahoma Health Care Authority (OHCA) continue, in order to collaborate on further development of the program, ensuring children and youth in the custody of the state have access to and receive necessary therapeutic services without delay. In addition, representatives from the TFC agencies are part of the continuum of care collaborative, through participation in various workgroups.

During the monthly meetings with OHCA and TFC providers, discussion occurred regarding a reconsideration process for children denied for TFC/ITFC. When a denial occurs the TFC agency consults with TFC programs to determine if reconsideration is warranted. If warranted the agency will resubmit additional information to OHCA. If denied a second time, then TFC programs reviews for further consideration. If a determination is made that the denial needs further consideration, all information is provided and reviewed by a licensed behavioral health consultant. If there continues to be disagreement about the denial, a meeting is coordinated. The meeting is held with the licensed behavioral health consultant and the OHCA physician who will make a final determination.

The ITFC program was implemented in June 2019 and has now been in place for a full year. For this reporting period, the ITFC program served 17 children. Overall, the program has been successful in stabilizing and successfully discharging children into less restrictive placements and/or to permanency. The COVID-19 pandemic has caused the agencies to become creative in developing virtual alternatives in their daily practice of therapy delivery and safety assessments with families. When safe to do so, face-to-face interaction occurs; however, virtual options are utilized often due to the rapid spread of the virus. The agencies have reported opportunities for more frequent contact due to virtual options and see some benefits in being able to continue to offer some services through tele-med formats.

TFC and ITFC Waiting Lists
After significant collaboration with the OHCA during SFY 20, there has been an increase in the volume of children meeting medical necessity criteria for TFC and ITFC programs as indicated in Section 3, Table 2.3-2 and Section 3, Table 2.3-3. CWS continues to monitor the waiting list daily as well as ensuring daily communication with the TFC providers. Various methods have been attempted to staff children on the waiting list with agency partners. Weekly conference calls involving all agency partners have occurred, in addition to agency partners meeting in-person and on an individual basis. However, these activities did not result in the desired outcomes of eliminating the waitlist.

In late June 2020, the decision was made to partner with the SPPU program supervisor to staff children in congregate care settings with the TFC agencies. TFC/ITFC program staff discuss all beds that RFP, TFC, or ITFC have available through weekly Zoom calls held with each agency individually. Agencies are rotated weekly and staffings are conducted one-on-one with all staff an agency deems to be vital to the process, such as their RFP and TFC placement coordinators, the agency director, TFC and ITFC therapist, and recruitment staff to consider any available homes, homes in the pipeline and possible opportunities for child specific recruitment. Since late June 2020, this new process has shown to be productive as there have been six children placed and/or identified for placement ranging from RFP through ITFC that had not been able to be placed through previous efforts.

TFC Applications	January 2020	February 2020	March 2020	April 2020	May 2020	June 2020
Approvals	31	45	62	41	32	43
Denials	9	6	3	11	8	12
Total	**40**	**51**	**65**	**52**	**40**	**55**

Section 3, Table 2.3-2

ITFC Applications	January 2020	February 2020	March 2020	April 2020	May 2020	June 2020
Approvals	10	12	12	3	7	9
Denials	4	3	5	6	3	5
Total	**14**	**15**	**17**	**9**	**10**	**14**

Section 3, Table 2.3-3

Quality Services within the TFC Program

Treatment Team Meetings
All TFC/ITFC agencies continue to utilize the treatment team meeting guides previously developed and distributed in SFY 19. The agency forwards the signed and completed copy to the TFC/ITFC programs team. As previously reported, there were allowances which had to be made due to the COVID-19 pandemic. Virtual meetings were allowed for treatment plan reviews. CWS received feedback from the agencies that they liked conducting the treatment plan meetings virtually and would like to continue. TFC/ITFC program staff will be attending treatment team meetings on a regular basis when able to do so virtually. This will allow the program team to hear about the child's progress and provide an opportunity to ask questions to help support child welfare (CW) staff members who may not be as familiar with the TFC process or treatment plan itself. Currently TFC/ITFC program liaisons review the treatment team meeting guides received by the agencies and upload them into the KIDS file cabinet.

Behavioral Health Consultants (BHCs)
In December 2019, TFC Programs began implementing a follow-up process in regards to BHCs with the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) for all children that have "sounds like" and are on the waiting list or receive a "does not sound like" they meet medical necessity criteria. Both are referred to a BHC for consultation with the child's CW specialist. During this reporting period, 353 children were referred for a consultation with a BHC. TFC programs staff coordinates referrals and monitors the consultations between the BHC and child's CW specialist. Initially there was some difficulty in regards to ensuring that the consultations were occurring. As a result, TFC/ITFC programs implemented a process in which the BHC will forward a calendar invitation to the child's CW specialist requesting the consultation. Since the calendar invitation process was implemented in late May 2020 there has been an increase in the number of completed consultations. From the implementation of the new process until the end of SFY 20, 90 percent of consultations were completed. After the consultation, the BHC emails TFC programs staff and the CW specialist the consultation summary, which includes the BHC's recommendations discussed with the CW specialist. TFC programs staff enters this summary into a KIDS Contact. The CW specialist emails a follow-up summary of the consultation within seven-business days to ensure the consultation was completed and the services are in progress. This process was modified to include the documentation of the TFC/ITFC programs staff to track this information and, when necessary, provide follow-up to ensure this additional support is embedded into practice.

Recruitment Efforts
While recruitment continues to be a primary focus for TFC agencies in order to build capacity, the COVID-19 pandemic disrupted those efforts in April – June 2020. Much of the recruitment activities were limited to social media platforms exclusively which affected their recruitment numbers. Recruitment events scheduled April – June 2020 were cancelled due to the COVID-19 pandemic. Agency partners made adjustments to their recruitment efforts including using a bonus incentive to their current foster families that recruit a new foster family. They are also identifying RFP families that could potentially step up to TFC. CWS Recruitment staff continue to work with banks and other businesses to mail out recruitment information with statements.

TFC providers continue to participate in pipeline calls to ensure applicants are progressing through the certification process. These calls are in place so that identified barriers can be immediately addressed. When a barrier is identified TFC program and agency staff work together to effectively problem-solve. FC&A staff continue to actively assist in the

recruitment of TFC/ITFC homes. Additionally, FC&A staff have begun contacting families whose traditional or TFC resource home was closed within the last three years and who were in good standing at the time of closure. Discussions with these families are focused on reopening due to the need for TFC and ITFC homes.

The ITFC program relies on providers to continue to recruit families for ITFC, understanding the children qualified for this program exhibit a high-level of need, and require strong, established, highly skilled families to provide for their care. Experienced foster parents have been most successful in caring for children through the ITFC program.

During this reporting period 10,000 TFC and ITFC brochures were provided to recruiters for statewide distribution at recruitment events and meetings. TFC programs staff trained recruiters and RFP agency staff on the ITFC program. An additional 3,000 TFC and ITFC brochures were provided to TFC agencies to distribute.

TFC programs staff assisted in the development of a recruitment video with Region 2 FC&A supervisors. The video included TFC resource families. This video is available for use by recruiters and partner agencies as an additional tool for recruitment. TFC recruitment continues its efforts to locate professionals in the medical field to open their homes to foster children with special behavioral and medical needs. To raise awareness, TFC programs placed an advertisement in the Oklahoma Nurses Association (ONA) publication, which reaches over 54,000 registered nurses and licensed practical nurses.

TFC programs was approached by a Tulsa TV station about airing a news story featuring TFC with a resource parent and a recruiter. A TFC family was identified in Tulsa to participate in the interview. TFC programs provided a script for the TFC recruiter as well as TFC statistics for the interview.

After further discussions with RFP providers and other out-of-state providers, two agencies have been actively working on completing necessary requirements through child care licensure. The number of beds, treatment level, age, and gender is under discussion. These providers should be ready to sign a contract within the next few months. Recently, a third provider has taken an interest in obtaining a TFC/ITFC contract and has begun the process with child care licensure.

TFC programs continue to provide the Pressley Ridge training to TFC agency staff as necessary. Pressley Ridge in-person training of the trainers scheduled for April 2020, was cancelled due to the COVID-19 pandemic. The training was rescheduled and completed in June 2020 via Zoom with new agency staff.

Needs Assessment
In an effort to better understand the needs of children in care, improve connection to services, and inform the development of an improved continuum of care, CWS completed a needs assessment in November 2019 on a sample of children currently in OKDHS custody. CWS utilized the information to address system changes for the full population of children and youth in OKDHS custody in determining their needs and the array of services to meet those needs. The statewide multidisciplinary team (MDT) process was created to develop an avenue of focused staffing efforts surrounding placement, permanency, and overall well-being outcomes. This is discussed further in the MDT section.

Following completion of the needs assessment, CWS leadership held a three-day meeting facilitated by Casey Family Programs with the attendance of the Annie E. Casey team and leadership teams of three sister agencies, OHCA, ODMHSAS, and the Office of Juvenile Affairs (OJA) to identify ways to better collaborate on meeting the needs of children served by all of these state agencies. The meeting resulted in ongoing collaboration and enhancements in how children are being served in Oklahoma. CWS continues to work very closely with OHCA, ODMHSAS, and OJA to address systemic barriers impacting outcomes.

CWS recognized a need to further understand the needs of children in care and began taking a deeper dive into the data to further develop the overall needs analysis regarding placement for children with higher-level needs. The analysis that

was completed confirmed that CWS must continue efforts to address gaps within levels of placement and service array to create opportunities for children with complex needs to thrive in family-based settings.

Child and Adolescent Needs and Strengths (CANS) Assessment
The CANS is a multi-purpose tool developed to support decision-making, including level of care and service planning. CWS has put a team of clinicians, field staff, and program staff together to work with the CANS development team to determine how best to use the tool in conjunction with the behavioral health screener for children being served. Among other things, CWS plans to utilize the CANS to assist staff in determining the needed level of placement specific to Oklahoma's placement array.

In January 2020, an initial CANS implementation meeting was completed with representatives from the field and all programs. A representative from the Praed Foundation provided an introduction to the CANS application within the child welfare system. Both field and program staff made suggestions regarding CANS utilization for populations of children in OKDHS custody. Ultimately, participants believed that specific items within the CANS domains could be embedded into already established assessment processes, such as monthly worker visits, Assessment of Child Safety, and placement requests. From this meeting, a COC Workgroup was established to determine where to embed items into the placement request process and when a full CANS would be administered to a child. This workgroup began meeting in May 2020. The workgroup is currently assessing what items within the CANS would be most meaningful to the placement request process.

In July 2020, the Praed Foundation provided an initial CANS algorithm and an Oklahoma CANS training manual. The CW Clinical Team and Program Leads are reviewing the algorithm to assess for usability and effectiveness in determining the appropriate level of need. The initial algorithm is being cross-referenced with a population of children placed in congregate care to inform ongoing utilization. The final version of Oklahoma's CANS will be ready for use in October 2020.

CWS is committed to refocusing efforts regarding utilization of the Child Behavioral Health Screener (CBHS) so that staff not only know when to make referrals for needed services, they also use the information to identify the stressors and needs of children and families before a crisis occurs. CWS plans to utilize the CBHS assessment outcomes and other key factors, such as placement instability, to determine children in need of a full CANS Assessment.

This process will be embedded into the MDT process outlined in the MDT section. It has not been determined at this time what group will administer the CANS. Clear guidance will be provided to the regional MDTs regarding referral processes for a CANS assessment and a plan to utilize the outcomes to communicate the level of need a child or youth requires.

Continuum of Care Update
The 2019 needs analysis completed on the cohort of children with complex needs supported the development of key strategies to address themes discovered through the analysis. These themes included labeling of youth, placements that were unprepared to handle complex behaviors, lack of training on trauma, and gaps within the service and placement array. Outcomes of the needs assessment confirmed that significant practice, process, and programmatic changes were needed to build a CW system that timely and systematically assesses the therapeutic needs of children in care and ensures those needs are met, when appropriate, in a family-based setting. Eight key strategies were developed to address these areas and are outlined in the COC strategies. From these strategies, eight workgroups and a steering committee were created and are committed to ensuring positive outcomes for children with complex needs within the child welfare system. Annie E. Casey is heavily involved in supporting each workgroup through technical assistance and consultation.

Finance Streams and Contracts
This workgroup is committed to ensuring the appropriate finance streams are available to the work and that all

contracts are assessed and updated to meet the goals and objectives of the Continuum.

Communications and Stakeholders
This workgroup's primary focus is ensuring that internal and external voices are represented within the development of the Continuum and that all aspects of the COC are effectively and consistently communicated both internally and externally. The workgroup has recently developed a Communication template which is a link that takes Workgroup members to a survey to effectively communicate internally and externally regarding the Continuum development. The workgroup has also developed a **Continuum of Care Communication Plan** that clearly outlines how communication occurs throughout all levels of the agency.

Capacity Building and Service Array
This workgroup is committed to understanding and expanding the current service array within all parts of Oklahoma and supporting the ongoing program improvement of congregate care and TFC programs. A service mapping survey was provided to all behavioral health clinicians in Oklahoma to better understand the variety of evidence-based treatment modalities in Oklahoma. The workgroup will utilize the survey outcomes to assess what is actually being provided and how to address the identified gaps in services. This workgroup is continuing to work with the Building Bridges Initiative (BBI) to engage with group home providers regarding programming improvements and engagement with families. A survey was developed and administered to group home providers to better understand what the providers feel their greatest need is in addressing these efforts. ODMHSAS administered a survey to consumers of mobile crisis intervention. Overall, the data from the survey indicated that consumers reported mobile crisis to be an effective and helpful service. This workgroup will assess the data from these surveys in August 2020 and define focus groups and next steps.

Placement Request and Screening
This workgroup is focused on developing one unified placement request for all levels of care, including the child behavioral health screener outcomes and items within the CANS Assessment to support the information gathered about the child. Additionally, the group is identifying when the CANS will be utilized within the placement continuum.

Enhanced Foster Care
The goal of this workgroup is to embed EFC in the placement continuum and utilize the enhanced supports and services before a child is impacted by placement instability. The most recent update is provided in the EFC section.

Continuous Quality Improvement
This workgroup's primary goal is to ensure that all processes created are streamlined and have a clear assessment and evaluation process. All workgroups are committed to assessing and evaluating as the COC is being developed so that improvements to the program can be made in real time.

Dual Certification
This workgroup is focused on looking at ways to navigate placements for children so that there is a fluid movement among different levels of care, while maintaining the child in the same home. This workgroup includes RFP and TFC representatives and began meeting in July 2020.

Specialized Foster Care
This workgroup's primary goal is updating policy and procedures to recruiting, approving, supporting, and maintaining specialized foster care homes. A group of CWS and OKDHS DDS programs began meeting in 2019 to discuss these efforts. A workgroup will begin meeting in August 2020 to plan for transitioning these homes from OKDHS DDS to CWS.

Enhanced Foster Care
The EFC Program began in December 2019 and has since expanded significantly. EFC continues to support the complex needs of children in family-based settings. EFC is intended to support children who are having difficulties that could

result in placement instability, as well as children who have already experienced placement instability who may be on a waitlist for TFC or other higher levels of care. EFC can also support children ready to step down to a family-based placement from congregate care settings. CWS believes that providing EFC services and supports to children and families at the first sign of stress and need will prevent unnecessary moves to higher levels of care and will also support placement stability. Thus, CWS will now begin work to focus efforts on identifying children who have complex needs prior to requiring higher levels of treatment. Multiple avenues are being explored to identify populations in need, including utilizing the Move Report to identify children beginning to experience unplanned moves due to behavioral needs, children who receive mobile crisis intervention, and utilizing the results of the CBHS. The COC program continues to build this service array and is also focusing on identifying traditional foster homes to designate as EFC homes to accept placement of children exiting higher levels of care.

MDT
The MDT process was originally developed and began in December 2019, to staff the children in the initial needs analysis cohort that were identified to have complex needs and were placed in higher levels of care. The staffings are intended to gather information about the child's history, functioning and identified needs in order to support transition planning, build connections for the child, and secure placements in family-based settings. The goal of the meeting is to develop clear action steps to further support meeting the needs of the child, while focusing on the right level of care and permanency goals for the child being staffed.

The MDT process is now shifting from a centralized statewide focus to a regional process. Each region will have their own MDT staffing process to include children in shelters, higher-level placements, and those at risk of disrupting from their current family based placement. By moving this process to a regional level, program leads and key external partners will be identified on each region's team. This is intended to support staff through engagement of regional leadership and programs staff to streamline the process of identifying needed supports for children with complex needs.

From December 2019 – February 2020 a total of 46 children, placed in various levels of congregate care treatment, were staffed by the statewide MDT team. Of the total number of children staffed prior to March 2020, 12 have entered into a family setting placement such as a TFC home, kinship home, trial reunification, or traditional foster home. Six children were staffed again in April or May 2020 and are discussed later in this section. One child that was staffed initially passed away. This leaves 27 children from this population remaining in congregate care.

At the writing of this report, of the 27 children from this population that remain in congregate care:
- 14 children have pending placements with family, including impending trial reunification, pending Interstate Compact on the Placement of Children (ICPC), and/or have a foster or adoptive family identified for them.
- 12 children remain in congregate care with no identified placement.
- 1 child is currently AWOL.

Due to the COVID-19 pandemic, the statewide MDT process was moved to a virtual platform in April 2020. From 4/28/2020 – 5/12/2020, 19 additional children have been staffed. Of the 19 children staffed during this timeframe, five have entered into a family-based setting. Therefore, 14 children from this population remain in congregate care.

Of the 14 children from this population that remain in congregate care:
- 5 children have pending placements with family, a pending ICPC, and/or have a foster or adoptive family identified for them.
- 5 children remain in congregate care with no identified placement.
- 4 children are currently working towards trial reunification with a biological parent.

Since 5/12/2020 there have been a total of 21 children staffed through the statewide MDT, six children had a second MDT staffing that were identified from the above December – February population and are still placed in congregate

care. Evaluations of outcomes for these children are pending and will be provided to the regional MDT teams.

As discussed above, the MDTs will be moving to a regional process in an effort to prioritize outcomes and oversite at a regional level. Each regional MDT is composed of program leads from Permanency Planning, SPPU, FC&A, COC programs, the Clinical team, Community Partnerships, DDS, Education, Tribes, directors of RFP and TFC agencies, and other key external partners. The intent of the regional MDT is to streamline the many staffings that occur at a program level by allowing the region to identify and understand the complex needs of children and youth within the region and partner with programs to improve outcomes related to placement identification and instability.

Regions 4 and 5 implemented the regional MDT process in June 2020. The focus for the regional teams have been children placed in the shelter for more than 30 days and children currently in inpatient treatment at risk of shelter placement. The regional teams are utilizing the same tracking mechanism used in the Statewide MDT and are following up on action steps identified at 15, 30, and 45 days post-staffing. Regions 1 and 2 will implement the regional MDT process in August 2020, with Region 3 implementing in September 2020. By October 2020, each regional MDT will be fully implemented and staffing children and youth weekly.

Data collection has been completed to support and prioritize the population of children staffed during the regional MDTs. A key population identified will be children and youth placed in shelters. All new shelter admits will be staffed by the regional MDT within one week of placement which provides a swift review of the circumstances resulting in the shelter placement, in which the regional MDT can identify action steps to identify an appropriate placement for the child and create a transition plan. Other populations to be staffed by the MDT include youth in inpatient settings, youth in congregate care settings for six months or longer, youth in congregate care with a discharge date and no placement plan, and other populations as determined necessary by regions evaluating regional and district data. Data collection will be presented to regional leadership teams in August 2020. At that time, regional leadership teams will begin to prioritize these populations within the regional MDT weekly staffing process.

7.1: Worker Caseloads

Operational Question
What percentage of all child welfare (CW) workers meet caseload standards, are close to meeting workload standards, or are over workload standards?

Data Source and Definitions
Utilizing the standards set forth in the Pinnacle Plan, each individual type of case is assigned a weight and then the weights are added up in order to determine a worker's caseload. The consolidated workload tracking process allows Oklahoma to factor in the worker's "Workload Capacity." The chart below represents the consolidated workload tracking process. A snapshot is taken every morning at 12:00 am of the workload of all CW workers. The entire workload of workers with a qualifying case assignment of Child Protective Services (CPS), Permanency Planning (PP), Family-Centered Services (FCS), Adoption, and Foster Care are calculated and compared against the caseload standards. The workload is classified as meeting standards if it is 100 percent at or below a caseload. When the workload is over 100 percent but less than 120 percent of a caseload, it is considered to be "over but close"; otherwise, the workload is considered to be over the standard. The measure tracks each worker each day to determine if they meet the standard, and this is called a "worker day." Work performed by CW specialists is broken into multiple categories. This measure looks specifically at all CW workers (total), PP, FCS, CPS, Adoption, Foster Care, and Comprehensive workers. As of 12/31/2016, the Oklahoma Human Services (OKDHS) began using the YI768C as the data source for the Workloads reporting measure, which is a point in time number of workers who are meeting workload standards on the last day of the reporting period. All previous reporting periods were updated to reflect this data.

Description of Denominator and Numerator for this reporting period
Denominator: The number of all CW workers in Adoptions, Foster Care, FCS, CPS, and PP that were caseload carrying eligible on the last day of the reporting period with at least one assignment on their

workload.

Numerator: Number of worker days where workers met the standard carrying a caseload of 100 percent or less of their calculated workload capacity.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 1/1/2013 – 6/30/2013	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP			27.0%
1/1/2014 – 6/30/2014	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	359 Workers	1219 Workers	29.5%
7/1/2014 – 12/31/2014	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	419 Workers	1227 Workers	34.2%
1/1/2015 – 6/30/2015	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	658 Workers	1345 Workers	48.9%
7/1/2015 – 12/31/2015	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	912 Workers	1501 Workers	60.8%
1/1/2016 – 6/30/2016	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1176 Workers	1656 Workers	71.0%
7/1/2016 – 12/31/2016	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1274 Workers	1651 Workers	77.2%
1/1/2017 – 3/31/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1212 Workers	1644 Workers	73.7%
4/1/2017 – 6/30/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1299 Workers	1621 Workers	80.1%
7/1/2017 – 9/30/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1037 Workers	1562 Workers	66.4%
10/1/2017 – 12/31/2017	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1097 Workers	1555 Workers	70.5%
1/1/2018 – 3/31/2018	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1113 Workers	1546 Workers	72.0%
4/1/2018 – 6/30/2018	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1106 Workers	1545 Workers	71.6%
7/1/2018 – 9/30/2018	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	934 Workers	1490 Workers	62.7%
10/1/2018 – 12/31/2018	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1250 Workers	1451 Workers	86.1%

1/1/2019 – 3/31/2019	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1312 Workers	1487 Workers	88.2%
4/1/2019 – 6/30/2019	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1295 Workers	1490 Workers	86.9%
7/1/2019 – 9/30/2019	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1150 Workers	1486 Workers	77.4%
10/1/2019 – 12/31/2019	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1314 Workers	1516 Workers	86.7%
1/1/2020 – 3/31/2020	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1411 Workers	1572 Workers	89.8%
4/1/2020 – 6/30/2020	All caseload carrying workers with a worker type of Adoptions, Foster Care, FCS, CPS, and PP	1473 Workers	1570 Workers	93.8%
Target				90.0%

Section 3, Table 7.1-1
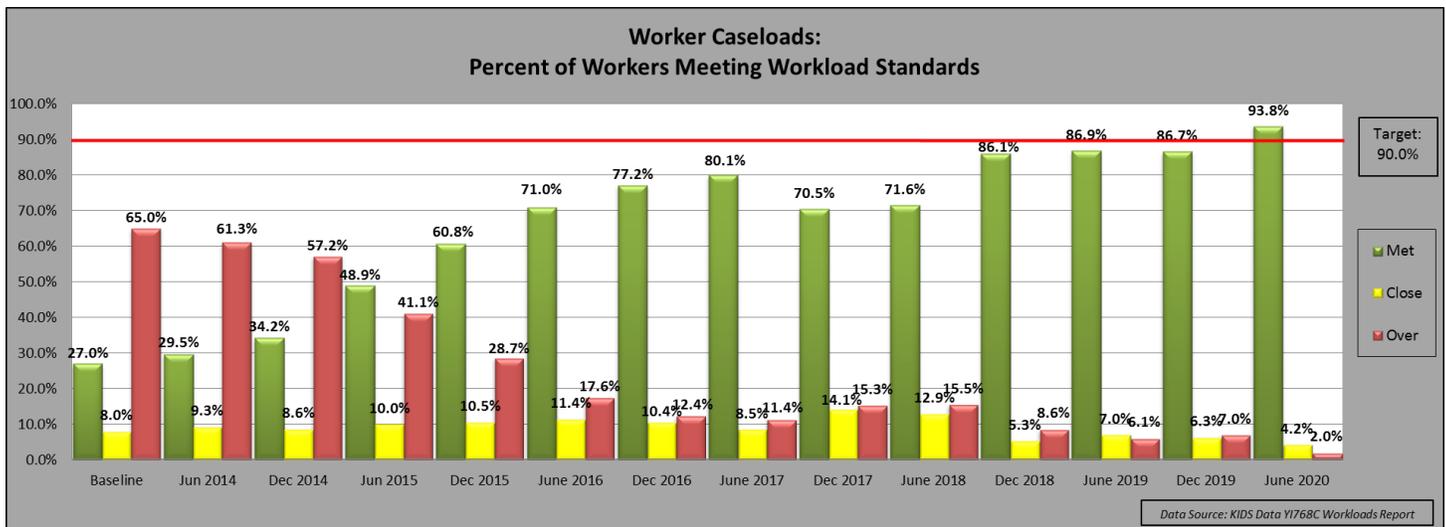
Section 3, Graph 7.1-1

Commentary

A one-day snapshot of the workload data is represented in Section 3, Graph 7.1-1. As of 6/30/2020, using the point-in-time YI768C Workload data report, the percentage of CW workers meeting the standard is 93.8 percent, with 4.2 percent close, and 2.0 percent over the standard. Of the 1,570 workers, 1,473 workers were meeting workload standards, 66 workers were close, and 31 workers were over the standard. This is the first reporting period where the target of 90.0 percent was achieved.

Section 3, Graph 7.1-2
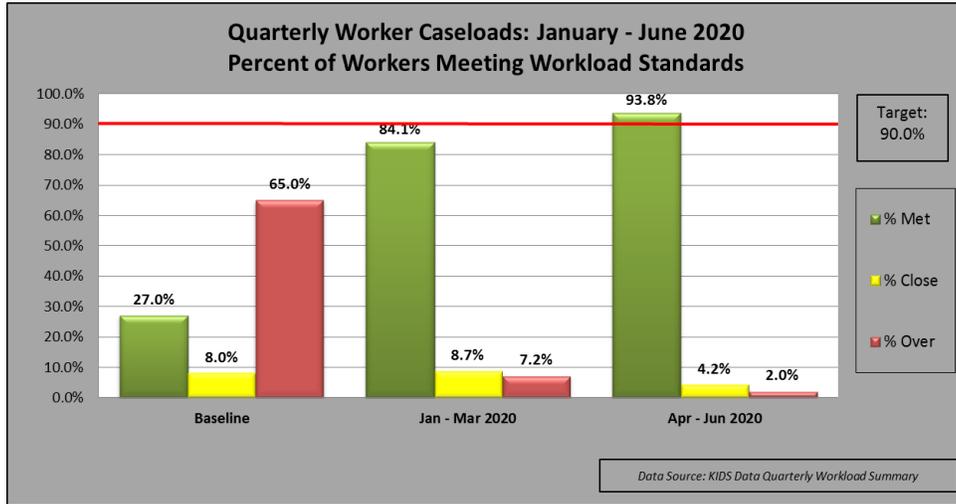
Quarterly Workload Standards Report				
April 1, 2020 - June 30, 2020				
Worker Type	**Worker Days**	**% Met**	**% Close**	**% Over**
ADOPTION SPECIALIST	4864	92.0%	4.9%	3.1%
RESOURCE FAMILY SPECIALIST	18520	88.9%	10.6%	.6%
COMPREHENSIVE	5562	88.6%	7.9%	3.6%
PERMANENCY PLANNING	57581	90.9%	5.2%	3.8%
PREVENTIVE/VOLUNTARY	6644	95.1%	3.5%	1.4%
INVESTIGATION	42998	96.8%	2.0%	1.1%
RECRUITMENT	3412	99.9%	.1%	.0%
ADOPTION TRANSITION SPECIALIST ATU	4067	99.2%	.8%	.0%
TOTAL	**143648**	**93.0%**	**4.7%**	**2.3%**
Data Source: Quarterly Workload Summary; Run Date: 7/7/20				

Section 3, Table 7.1-2

Commentary

In addition to the point-in-time reporting of workloads, a snapshot of each worker's workload is captured for each day during the quarter. The total days during the quarter that each worker met, close, and over workload standards is then reported in the Quarterly Workload Standards Report. This number differs from the point-in-time report taken from the YI768C, as this quarterly report reflects all days during the quarter. This report also counts the number of days workers met, were close, or over workload standards, whereas the YI768C report is reporting on the number of workers. For the quarter of 4/1/2020 through 6/30/2020, there were a total of 143,648 worker days. Of those days, workers met workload standards 93.0 percent of the worker days, workers were close to workload standards 4.7 percent of the worker days, and workers were over workload standards 2.3 percent of the worker days.

CASELOADS

Leadership Oversight of Caseloads

Establishing and maintaining manageable caseloads for CW) specialists is essential to child safety, well-being, and permanency. OKDHS remains committed to achieving the caseload standards for CW specialists and supervisors. During this reporting period, the Child Welfare Services (CWS) Executive Team continued to engage in weekly workload calls to focus on workload performance, barrier identification, and sharing management strategies. During the latter part of this reporting period, since the majority of the workloads were stabilized at greater than 90 percent across the state, the weekly focus and efforts remained on Region 2 and targeted districts/counties in the other regions as needed.

CWS still utilizes the Workload Trends Report, which is provided weekly to the OKDHS Statewide Leadership Team. The Workload Trends Report is the focus point of the CWS Executive Team's weekly workload calls. In addition, each deputy director communicates with their leadership teams weekly to discuss local progress and identify barriers. The Workloads Trends Report provides a variety of data to assist in workload management. The district specific data includes capacity percentage; compliance percentage; number of employees in the met, close, and over categories; total work percentage; eligible work percentage; number of staff who are not eligible to carry work; number of staff who will promote to the next graduated standard, 50% to 75% or 75% to 100%, and be eligible to carry cases; number of staff over 150 percent, 175 percent, and 200 percent; and eligible workloads leaving the agency due to employee separations.

In December 2019, CWS improved its Caseload Calculation Report to enhance leadership's ability to identify more accurately the number of positions needed in each district. The Caseload Calculation Report includes the number of employees who are 0 percent, 50 percent, 75 percent, and 100 percent caseload eligible, and a turnover rate. Additionally, the report provides each district's maximum workload, average workload, and capacity for the previous 12 months. A significant element of this report is its ability to predict future capacity based on how many positions are allocated to each district. By using this report, efforts were undertaken by the CWS Executive Team to address workload capacity issues.

- In Region 2, three vacant specialist positions were transferred from districts with greater capacity to District 20 Murray and Johnston Counties, and District 21 Cleveland County.
- In Region 2, PP cases, involving 23 children from District 23 Lincoln County and 43 children from District 21 Cleveland County, were transferred to Region 3, District 7 Oklahoma County PP specialists due to their greater workforce capacity.
- In Region 2, District 21 Cleveland County, District 23 Pottawatomie County, and District 20 Carter County, each changed two CPS vacant positions to PP positions to increase the workforce capacity.
- In Region 2, due to greater workforce capacity, District 6 was assigned an overflow of CPS referrals and PP cases from other Region 2 districts.
- In Region 4, due to District 15 Muskogee County's greater workforce capacity, PP cases involving 20 children were transferred from District 25, McIntosh and Okmulgee Counties, to Muskogee County.
- In Region 2 and 4, PP Overtime Plans were approved in June for District 21 Cleveland County and District 25 McIntosh and Okmulgee Counties.
- In Region 5, District 14 Tulsa County received 10 additional vacant positions, which were transferred from Regions 1, 3, 4, and rural counties in Region 5. In the previous reporting period, CWS reported the Tulsa County Child Protection Coalition received funding for a one-year pilot program responsible for recruiting new CW specialists for Tulsa County OKDHS with a possible commitment for two additional years. Unfortunately, this project is no longer funded and will not be moving forward.

From January into early April 2020, Region 2 remained as the region below at least 90 percent of workers meeting the caseload standard. Effective 3/25/2020, CWS leadership established a CPS "Buddy Partnership" for approximately 50 CPS specialists in Region 2, specifically, Carter, Cleveland, Comanche, and Lincoln Counties. Each of the 50 CPS specialists was assigned a "Buddy" from the other four regions or Program staff to assist in completion of CPS assignments. The goal was to increase CPS closure rate, support CPS specialists with higher workloads, and increase workload compliance in identified counties. Buddy responsibilities included conducting telephone interviews with collaterals and non-custodial parents, requesting medical records (when applicable), and conducting CW and criminal history searches and documentation. The Buddy could attend an in-person interview via telephone and transcribe the interview for the assigned specialist. A Buddy had a CPS courtesy activity assignment in KIDS. Assigned Buddy tasks were expected to be accomplished and documented as quickly as possible. For each district in Region 2, supervisors of Buddies and specialists were expected to schedule and conduct a weekly call to check-in on how the Buddy Partnership was progressing, and discuss items, such as Buddy assignments, assignment completions, transcribing interviews, and

communication. District directors, deputy directors, and an assistant CWS director were available for support and consultation, as needed.

The Buddy Partnership began 3/25/2020 and ended 4/30/2020 in most counties. It was very effective in reducing caseloads and CPS backlog, with only nine CPS specialists in Region 2 over 100 percent workloads, as of 5/12/2020. Of those nine, only two were over 120 percent. For example, Lincoln County increased workload compliance to 72.7 percent compliant, 18.2 percent close, only 9.1 percent over, with the highest workload at 126.67 percent. The three specialists over were in PP and all CPS staff in Lincoln County were meeting caseload standards after receiving assistance from the Buddy Partnership.

Net Gain/Stability

For this reporting period, CWS gained 17 CW specialist II's, a net loss of 3 CW specialist III's, and a net gain of 14 CW specialist IV's for a total net gain of 28 positions. CWS did experience a higher total net gain of 73 from July to December 2019, with 50 net gain positions in Oklahoma County. This was largely due to Oklahoma County increasing the speed of hiring and significantly decreasing the number of vacancies. Additionally, the increased speed of hiring was experienced statewide due to JazzHR, which is discussed further below. Due to OKDHS operating with fewer vacancies and improving the speed of hiring, the decrease in net gain for this reporting period is not unexpected.

The turnover rate for all CW specialists since State Fiscal Year (SFY) 13 is provided in Section 3, Table 7.1-2. For SFY 20, the stability rate for CW specialists I-IV was 83.4 percent with a turnover rate of 16.6 percent, which is the best performance since SFY 13. Additionally, for SFY 20 turnover decreased by 7.6 percent when compared to SFY 19 and decreased by 6.6 percent when compared to SFY 18. The highest turnover was among CW specialist I's that are in their first year of CW training and employment. The data further supports the Quality Improvement Center for Workforce Development (QIC-WD) project implemented by OKDHS and discussed in more detail below.

Child Welfare Specialist Turnover	SFY	Average Number of Employees	July 1 -June 30
Child Welfare Specialist I	**2020**	**322**	**36.6%**
	2019	259	37.5%
	2018	219	34.2%
	2017	281	24.6%
	2016	437	36.2%
	2015	412	38.3%
	2014	448	40.2%
	2013	204	53.4%
Child Welfare Specialist II	**2020**	**1,196**	**17.9%**
	2019	1,130	29.2%
	2018	1,223	28.5%
	2017	1,280	20.9%
	2016	1,098	20.2%
	2015	837	18.6%
	2014	693	21.5%
	2013	334	26.6%
Child Welfare Specialist III	**2020**	**414**	**10.4%**
	2019	368	14.9%
	2018	384	13.5%
	2017	406	10.3%
	2016	360	10.0%
	2015	287	7.3%
	2014	239	13.4%
	2013	109	18.3%
Child Welfare Specialist IV	**2020**	**413**	**3.4%**

	2019	369	8.9%
	2018	378	9.3%
	2017	430	5.6%
	2016	412	5.8%
	2015	359	5.8%
	2014	295	6.4%
	2013	143	7.0%
Child Welfare Specialist I through IV	**2020**	**2,345**	**16.6%**
	2019	2,126	24.2%
	2018	2,203	23.2%
	2017	2,396	16.8%
	2016	2,305	19.0%
	2015	1,894	18.8%
	2014	1,675	22.7%
	2013	790	28.9%

Section 3, Table 7.1-2   *Data Source: Human Resource Management – HRIS; Run Date: 7/21/20*

200 Percent or Greater Workloads
To address CW specialists at 200 percent or greater of the workload standard, a weekly report with the workload details is sent to every district director, regional director, and the assistant child welfare director of field operations. As a result, each regional director or district director responds weekly with an explanation for the excessive workload and a plan to reduce it below 200 percent by a specified due date. Additionally, report monitoring includes assessing the progress made on each identified specialist and ensuring timely action occurs to prevent additional specialists from reaching a 200 percent workload. CWS is committed to lowering the workloads from 200 percent to 175 percent; then reducing to 150 percent; and finally reducing below 150 percent.

Data collected on 10/4/2018 showed 40 specialists over 200 percent. On 11/8/2019, 34 specialists were over 150 percent of the standard, three were over 175 percent, and zero were over 200 percent. On 1/14/2020, a snapshot of data showed 22 specialists were over 150 percent of the standard, one was over 175 percent, and zero were over 200 percent. On 7/16/2020, a snapshot of data showed two specialists were over 150 percent of the standard, one was over 175 percent, and zero were over 200 percent. The significant decrease of employees over 150 percent is evidence that OKDHS has become a self-correcting agency as CWS identifies the need to develop concrete plans to support employees through caseload management and make adjustments when plans do not reach outcomes or new barriers are identified. Additionally, while certain districts have limited workforce capacity to meet caseload standards, it is important to note the average workload continues to decrease in these districts.

RECRUITMENT

Quality Improvement Center for Workforce Development (QIC-WD)
A workforce challenge CWS has experienced is having too many staff with a workload that exceeds the standards for their program area due to turnover. Through a competency-based selection intervention, CWS hopes to begin consistently hiring the right staff in the right places, and bringing parity to workload distribution.

To design the competency-based selection intervention, OKDHS conducted an in-depth job analysis to better define optimal performance and the characteristics required to perform the CW job well. The job analysis process included interviews and surveys with the job's experts – specialists and supervisors themselves. This analysis will guide development of a tailored selection strategy for the CW workforce.

The intervention will consist of two parts, both enhancing and creating a more robust selection tool. First, the interview questions and scoring criteria will be standardized and targeted at identifying the skills and competencies an individual

needs to bring to the job, in contrast to the skills and competencies that the individual will gain through training and on the job experience. A typing, writing, and computer literacy attestation portion also goes along with the traditional interview. The second part involves testing and validating individual difference measures through assessments, such as the Hope Scale, Public Service Motivation Scale, and Watson-Glaser Critical Thinking Appraisal. If, and when, these measures are validated they will be incorporated into the hiring process to better inform the selecting officials.

Since this project is a part of the QIC-WD work through the grant from the Children's Bureau, the stated expected results are:

- Traits and competencies that should be present at the time of hire for a job candidate to be successful in doing CW work.
- How competency-based and standardized selection procedures affect worker proficiency, confidence, job satisfaction, commitment to the agency, and intention to stay.
- How increasing the number of staff who are a better fit for their positions and more likely to stay could reduce stress on existing employees and agency wide turnover.
- How an increase in staff who are a better fit for CW work and a decrease in turnover can improve outcomes for children and families.

This project consists of a randomized control trial and a control group to evaluate the intervention's results. Section 3, Graph 7.1-3 and Section 3, Graph 7.1-4 show the randomized areas and controls groups for this project, as well as the projected timeline.

The project is underway and experienced some changes due to the COVID-19 pandemic affecting the implementation timeframes. The team completed the Standardized Hiring Protocols training in March 2020 and the three initial implementation counties began utilizing the new process. The COVID-19 pandemic began to affect the project mid-March when the CW workforce moved to teleworking and in-person meetings were discontinued. Upon learning teleworking will be long-term, the QIC-WD team began to explore transforming the intervention to a virtual process that can be utilized in different work arrangements. This virtual Standardized Hiring Protocols option will allow for greater flexibility in hiring under different work conditions.

The QIC-WD team is developing a refresher training that is scheduled to begin in the initial implementation counties in September 2020. After the refresher training and implementation in the initial counties, the team will begin training staff in the remaining full implementation counties.

Section 3, Graph 7.1-3   *Source: QIC-WD*

	2020				2021		
	Q1	Q2	Q3	Q4	Q1	Q2	Q3
Validation Study							
Initial RCT Study Rollout							
Full RCT Study Rollout							

Note. Initial Randomized Controlled Trial (RCT) Study Rollout includes Cherokee, Pottawatomie, & OKC 7A & B. Full RCT Study Rollout include the remaining intervention districts.

■ Installation (Training)
■ Implementation (Monitor and Assess)

Section 3, Graph 7.1-4   Source: QIC-WD

JazzHR – New Web-Based Applicant Management System & Expedited Hiring Process
In October 2019, the OKDHS Human Resource Management (HRM) launched a new web-based applicant management system and expedited hiring process. The new system significantly reduced the time it takes to fill vacant positions and drastically increased the ability to reach potential applicants. JazzHR is a real-time applicant management system that allows hiring managers to see qualified applicants immediately after they apply. All positions open to external candidates are automatically posted on over 20 job sites including: Indeed, ZipRecruiter, LinkedIN, Glassdoor, Google, Facebook, and more. There is no longer a need to wait for an announcement to close or receive an applicant list to fill vacant positions. Announcements stay open until the position is filled, which means no closing dates or re-announcements are needed.

RETENTION AND WORKFORCE DEVELOPMENT

Child Welfare Professional Enhancement Program (CWPEP)
In support of CW retention and workforce development, OKDHS continues its partnership with the University of Oklahoma (OU) to provide help for employee education through the Child Welfare Professional Enhancement Program (CWPEP). This program covers the cost of in-state tuition, fees, and required textbooks for participants who are interested in obtaining a Master of Social Work (MSW) degree and want to pursue a career in CW. Employees also may request authorization for up to 20 days of paid educational leave per calendar year through OKDHS. Annual leave may be approved when needed for additional classroom days. Individuals participating in this program are obligated to work after graduation in a Title IV-E reimbursable position in CW for 15 months per 30 credit hours of educational assistance. OKDHS staff that work outside of CW must be prepared to perform a practicum in CW and are under the same work obligations. Each individual signs a legally-binding contract with OKDHS and the OU School of Social Work.

CWPEP Student Payback Fund Grants Program: Board Approved Social Work Licensure Supervision for CW Employees
OU is requesting $40,000 to be utilized over an 18-month period to deliver board-approved licensure supervision for CW employees who are seeking licensure as a Licensed Clinical Social Worker (LCSW), Licensed Social Worker-Administrator, or Licensed Social Worker (LSW). The grant's goal is to assist CW employees in obtaining their licensure while simultaneously creating a pool of LSWs within CWS that two years post-licensure will be able to provide licensure supervision; therefore, eliminating the need for contracting with board-approved supervisors for future supervision.

This project will support CWS address the need for licensure supervision for CW employees seeking licensure as a LCSW or LSW. The current barrier is that very few OKDHS employees are licensed and able to provide supervision. A report received from the Oklahoma State Board of Licensed Social Workers in August 2019 listed five LCSW's are employed by OKDHS. Due to this limited number, a CW employee seeking to pursue licensure is unlikely to obtain their supervision

from a board-approved supervisor employed by OKDHS. Supervision is required from a board-approved LSW when no one in the agency has licensure and two years of experience post-licensure.

To determine interest in obtaining licensure by CW employees, a survey was conducted in January 2020. This survey found that many CW employees were interested in licensure. However, many of those interested individuals do not currently hold an MSW. Of those interested and eligible with an MSW, 44 who indicated they planned to pursue licensure in the next 18 months. At minimum, this grant could support at least seven CW employees if the employee's supervision began immediately upon the grant's approval.

Project's Benefits
- Enhancing the CW staff's knowledge through the licensure process by obtaining board-approved supervision.
- Creating a pool of LSWs who can provide supervision for other CW employees seeking licensure.
- Supporting CW professionalization by increasing the number of LSWs employed by CWS.
- Increasing CW staff retention of individuals with an MSW by providing support for their LSW pursuit.

Target Participants
- Current CW staff pursuing licensure as either a LCSW, LSW Administrator, or LSW.
- Met requirements to submit a supervision plan to the Oklahoma State Board of Licensed Social Workers.
- Submitted an application to OKDHS for this supervision.
- Approved by OKDHS to receive the licensure support.

Project's Success Measured by
- Number of applications by CW employees to become LSWs.
- Number of CW employees who complete supervision hours through a board-approved supervisor.
- Number of supervision hours completed during the project by CW employees.

Child Welfare Education Incentive
OKDHS implemented the Child Welfare Education Incentive on 7/16/2015, which includes a 5 percent incentive pay for CW employees with a Bachelor of Social Work (BSW) and a 10 percent incentive pay for those with a MSW. For SFY 16, e a total of 394 CW employees had BSWs and MSWs. For SFY 20, data ending 12/16/2019, there were 287, which is a 27 percent decrease. While the total number of employees with BSWs and MSWs decreased, in SFYs 16, 18, and 19 CWS experienced a lower turnover rate of employees with a BSW and MSW compared to all CW employees. In SFY 16, the turnover rate of BSW/MSW was 9.15 percent compared to the entire CW turnover rate of 19 percent. In SFY 17, the turnover rate of BSW/MSW was 22.22 percent compared to the entire CW turnover rate of 16.8 percent. In SFY 18, the turnover rate of BSW/MSW was 20.89 percent compared to the entire CW turnover rate of 23.2 percent. In SFY 19, the turnover rate of BSW/MSW was 18.53 percent compared to the entire CW turnover rate of 24.2 percent. In SFY 20, with data ending 12/16/2019, the turnover rate of BSW/MSW was 10.48 percent compared to entire CW turnover rate of 9 percent.

New CORE
Prior to the COVID-19 pandemic, CWS developed and was implementing an enhanced, refined, standardized, and comprehensive new CW specialist training program. The new training program is designed around identified competencies, grounded in evidence-based and trauma-informed practices, incorporated concepts, and accepted components of nationwide CW practice rooted in Oklahoma's needs and context. The new CORE was planned to occur through a blended learning approach of online training and in-person as historically, classroom training was mostly lecture-based, which is conducive to adult learning.

Anticipating that the COVID-19 pandemic would restrict in-person training, CWS began in February 2020 to explore how to conduct CORE virtually and to consider which aspects of the new curriculum would transfer virtually or if CWS would need to build off the previous curriculum. CWS decided to work from the new curriculum and use this time as an

opportunity to beta test certain aspects. CWS also chose to focus on provisional certification occurring virtually. The standardized actors used for simulation in the certification are within a more vulnerable COVID-19 demographic. Thus, to lessen uncertainty, the Training unit increased the frequency of communication to all CW staff.

On 3/13/2020, CORE and required level classes for new CW specialists were shifted to virtual attendance. CORE continued to utilize online content in the Learning Management System, an OKDHS online platform, and facilitated virtual learning and provisional certification. CW supervisors attended a virtual meeting to learn about the modifications to CORE and what they needed to prepare for to support CW specialists. Level classes after CORE at this time were focused on program specific policy courses. The Training unit provided support to facilitate the transition of curriculum to a virtual format. Prior to attending CORE, new employees were scheduled times to become more comfortable with virtual attendance to make the first day of CORE easier.

On 3/27/2020, to assist with the unique challenges of the COVID-19 pandemic, CWS suspended in-person observations related to new specialist certification until 6/1/2020. CW supervisors were encouraged to telephonically observe interviews in the field by CW specialists. CW specialists were asked to practice field interviewing with their mentor, as much as possible, when they were not participating in virtual meeting trainings.

The new CORE is based on the Experiential Learning Model and training virtually limits the ability to do Experiential Learning without time to evaluate and modify. Due to the COVID-19 pandemic, CWS moved quickly to virtual training without knowing for how long. CWS had a cohort of new CW specialists in CORE who lacked the ability to shadow select services and to observe practice being applied. These new CW specialists returned for in-person training for remediation focused on interviewing. The CW specialists in this cohort were encouraged while awaiting remediation to observe interviews and family meetings. These same CW specialists and supervisors also participated in a focus group to elicit feedback about virtual training.

CWS is transitioning all in-person curriculum to a virtual format. The CORE trainers were trained on *Best Practices for Transitioning to a Virtual Classroom*. The Training unit will be assisting all CW facilitators on how to make the transition to virtual learning and make online content more effective and interactive. Contract facilitators are offered support in transitioning their level trainings. CWS started with Motivational Interviewing, which performed well.

In June 2020 and moving forward, CORE will be a hybrid of virtual and in-person. The health and well-being of CW employees is of the utmost importance. Locations for in-person trainings now include protocols to protect CWS employees' health, which includes social distancing, daily health self-screening survey related to current known COVID-19 symptoms, use of PPE, staggered arrival and break times, box lunches vs. plated meals, and more.

CWS is also in the process of converting level classes to virtual format. CWS realizes not all training converts experientially as well as in-person and will continue to evaluate how to better adapt trainings. The plan is to identify the minimum amount of days CORE will occur in-person. The Training unit is reviewing each day of each module to identify the most critical components to occur in-person. This review will lead to an all-virtual option and a reduced in-person version. Each module will need to be reworked to transfer to virtual. The Training unit completed some elements in most of the modules to meet current training curriculum; however, a full transition to virtual will take additional time. Likewise, any reductions for in-person days will require time to create and prepare for new learning activities within the curriculum.

A key component to transitioning the knowledge gained in CORE into practice is the intentionality of the CW supervisor reinforcing and preparing the new CW specialist for learning through on-the-job activities. Since CW supervisors are also learning how to provide virtual supervision, the CORE Guidebook is being re-evaluated. The goal is to provide a structure for how time with a new specialist can be spent while he or she is in CORE. To ensure skills are incorporated into practice, CW supervisors must plan ahead by identifying learning opportunities for CW specialists to prepare them for each CORE module and to process each activity. How CORE and level classes are delivered to new specialists will be

evaluated continuously during the COVID-19 pandemic. How adjustments are made to balance employees' health, while providing the best learning environment possible, will be evaluated as well on an ongoing basis.

OKDHS Enterprise Leadership Development Program
OKDHS, in partnership with the OU Center for Public Management, offers various Enterprise Leadership Development Programs, depending on the level of the leader.

- *Lead Up* is for senior leaders, such as a deputy director.
- *Transform* for midlevel CWS leaders, such as district directors and field managers, includes five sessions: Leadership and the Art of Struggle; Lead Innovation: Human-Centered Design Thinking; Lead Across Boundaries; Influence and Negotiation; and From Good to Great Teams.
- *Reach* for local leaders, typically a pre-requisite for Transform, includes five sessions: Reach and Connect; Influence Team Performance; Inspire Full Engagement; Lead with Presence; and Cultivate a Culture of Resilience.
- *Thrive* for front line CW supervisors includes five sessions: Building Momentum; Building the Foundation; Engaging Your Employees; Teaming with Your Manager; and Total Leadership.

Lead Up, Transform, Reach, and Thrive are not traditional training programs where the participant receives a certificate by attending a series of consecutive workshops and completing a project. They are blended learning and development programs where in each session the participant spends one day in classroom, committed time in an online learning community, and extensive time practicing deliberately in his or her daily management and leadership. The participant will work collaboratively with peers to address specific leadership and management challenges and opportunities, and transform through strategic, innovative, and inspiring leadership. The participant receives 360-degree feedback from his or her peers, supervisors, and subordinates once enrolled in the program. The 360-degree survey questions are specifically designed for leaders based on a needs analysis. Six months after the participant completes the program, he or she will receive a post 360-degree feedback report to compare the results.

Transform and Thrive consist of five sessions throughout the year. Each session lasts approximately two months. In each session, the participant has the opportunity to learn and collaborate within a cohort group of 30 mid-level leaders both in classroom and online. Participants are provided with an online learning platform where they will be inspired by great articles and videos, discuss relevant management and leadership issues with their peers in OKDHS, and reflect on their own leadership practices. It is a learning community to help them thrive and transform through collaboration, interaction, reflection, and connection.

Promoting a Culture of Safety
OKDHS is concerned that the agency's current practice for responding to critical incidents, including fatalities and serious injuries of children involved in open cases or in families previously served by OKDHS, does not follow a consistent format and is viewed as threatening and punitive rather than oriented toward collective learning and improved outcomes for children and families. OKDHS requested Casey Family Programs to conduct a review of safety science literature, explore practices in other jurisdictions, and make recommendations for consideration in its efforts to respond more constructively both to the stress and risk inherent in CW work and to specific child fatalities or serious injuries when they occur. Casey Family Programs provided *Safety Decision Making and Response to Critical Incidents in Child Welfare: Brief Literature Review and Implications for Action* to CW Leadership in April 2019. This report reflected a brief review of the safety science literature pertaining to child protective services and provided provisional recommendations for steps to be considered to develop a safety culture within CWS. OKDHS piloted the recommendations in Region 5 first, with a focus on Tulsa County.

Casey Family Programs assisted OKDHS to explore practices in responding to critical incidents in other jurisdictions, both from the Casey Family Programs consultant and in Casey Family Programs' Knowledge Management team. On 9/4/2019, Casey Family Programs led a joint discussion between OKDHS and Tennessee CPS Leadership to explore their critical incidents. These additional findings enabled the formulation of more decisive next action steps.

Casey Family Programs, with OKDHS feedback, prepared a draft *Child Fatality and Serious Injury Review Protocol*. The draft protocol provides a guide to the agency's inquiry into child fatalities or serious injuries in open cases or cases previously known to OKDHS. The guide draws on the new field of safety science, which was developed in the professions of aviation, engineering, and health care which, like CW, are complex and high stakes. The intent is to enlarge post-incident reviews to consider the system and contextual factors relevant to staff performance and case outcomes. The traditional retrospective reviews center only on the actions of the case managers, supervisors, and other agency personnel involved in a case, and in hindsight have inherent biases. They did not serve to prevent future occurrences and arguably had a negative impact on the CW workforce by contributing to a culture in which actions are based on fear of blame, rather than on actual evidence related to child safety. An anxious, fearful workforce is not well-positioned to manage the complexities of CW work and the delicate balance between child safety and the infliction of trauma through family disruption and loss.

In the draft protocol, fatality and serious injury reviews consist of five parts: Part I, which elicits information about the case and case activities, and corresponds closely to the entirety of traditional reviews, forms only the beginning of the inquiry. Part II examines factors related to the performance of agency personnel, such as the circumstances and timing of the referral, workload, and training. Parts III and IV, respectively, assess factors in the broader system outside the agency, for example courts and service providers and those within the agency. Part V offers guidance in the evaluation of the information gathered. Some of the questions in the protocol are self-explanatory. Where needed, additional guidance in responding to questions is given immediately following the question.

OKDHS established its core team of reviewers, consisting of state leadership, regional leadership, and CPS Programs, for *Child Fatality and Serious Injury Review Protocol*. OKDHS and Casey Family Programs made adjustments to the original work plan dates that ranged from 4/25/2019 to 3/1/2020 due to process delays caused by the COVID-19 pandemic. In January 2020, OKDHS identified a case to field test the draft *Child Fatality and Serious Injury Review Protocol*. This initial field test is now completed. The field test process identified areas of the instrument needing clarification and some minor adjustments based on staff feedback. OKDHS and Casey Family Programs made adjustments to the review instrument and determined smaller review teams would be more effective going forward. On 6/10/2020, OKDHS began the second field test. The team is utilizing the revised review instrument and the process is focusing on core systemic issues. By 8/28/2020, OKDHS and Casey Family Programs plan to complete a third field test and finalize the protocol utilization plan based on additional staff feedback. By 9/1/2020, OKDHS and Casey Family Programs plan on full implementation in Region 5.

Internal Transfer Survey – Exit Survey Dashboard
Internally transferring employees take the Internal Transfer Survey while separating employees take the Exit Survey. Both surveys ask questions regarding perceptions of feeling informed, supported, and engaged while at work. To enhance data usefulness, survey responses are now tracked in an interactive Qualtrics dashboard. Users may select the filters located near the top of the screen to drill-down by variables, such as location, division, and year-quarter. Users may also click non-text responses to drill-down by responses, such as county, separation reason, or answer option. In addition to closed-ended responses, the dashboard also includes open-ended responses. While not "click-able," drilling-down the closed-ended responses can help to add context to the open-ended feedback. SFY 16 is the first fiscal year with data for the entire year.

Sample Perception Topics from Qualtrics Dashboard
- Reasonable amount of work required
- Necessary tools and resources available
- Employees recognized by management
- Culture promoted teamwork & collaboration
- Management was responsive to employees

Examples of Open-ended Questions

- What could your manager have done to improve communications?
- What training did you not receive?
- Please explain why your workload was unreasonable.
- Please explain why you feel you were not treated with dignity and respect.
- How can we better recognize our employees?

The Qualtrics dashboard is simply one of many tools used to better understand and track division/office climates. While CWS leadership had access, the CWS Executive Team established a uniform process to review the Qualtrics dashboard in December 2019. In January 2020 and going forward, the field deputy directors access the data quarterly and then discuss it with their leadership teams the following month. The purpose is for the CWS leadership teams to utilize the data/feedback as a way to monitor office culture and provide ongoing efforts to support, thus retaining CW employees, specifically front line field staff.

WORKFORCE DEVELOPMENT RESEARCH FINDINGS

National Research
In April 2020, CWS completed national research pertaining to CW workforce recruitment and retention strategies and efforts. On 4/22/2020, the research findings and recommendations were presented to the CWS Executive Team and OKDHS HRM. The research findings, recommendations, and implementation decisions are outlined below.

A 2017 study confirmed the importance of organizational support for the mental health and resilience of CW caseworkers. Using a sample of 2,302 caseworkers from three states, the researchers examined the causes and consequences of burnout in their sample population. While client-related burnout certainly existed, the researchers discovered work-related burnout—defined as burnout related to organizational factors—played the biggest role in causing CW caseworker burnout (Leake, Rienks, & Oberman, 2017). According to the study's authors, organizational solutions include creating and maintaining healthy work conditions for staff by instituting reasonable limits to caseload sizes; limiting administrative tasks and paperwork; working with staff to make sure they have the necessary resources to effectively do their jobs; and "fostering an agency climate of professional sharing and operational support" (Leake et al., 2017).

In clinical social work, supervision is as much about addressing the mental health and secondary trauma of the clinician as it is providing guidance about clients. Having a clinician available on the county level could be helpful in addressing secondary trauma of the field staff and enhancing their resilience. Implementation of mindfulness training or some other evidence-based intervention to address stress, improve focus, and help reduce "crisis mode" could embed self-care into agency culture.

Competency Based Hiring and Training/Comparison to QIC-WD
Research showed competencies should reflect personal characteristics most likely to demonstrate long term success on the job. Some may be identified as needing to be present prior to hiring. Others may be developed through training and development. Characteristics that correlate with case worker retention are: self-efficacy motivation, personal responsiveness to the needs of clients, and goodness of fit.

Comparison of research to the QIC-WD plan shows consistency between the plan's goals and objectives and what the most recent research indicates are evidence-supported workforce development programs. QIC-WD is being utilized as a research model through randomized control trials. Oklahoma has districts participating in the trial, as well as districts considered part of the control group. In addition to the in-state evaluation, data collected from Oklahoma will be compared to other states' data and used to determine the effectiveness of this type of hiring protocol. The theory and process of implementation science is being adhered to, with phases and guidelines consistent with the plan's identified theory.

The evaluation will be related to competency-based hiring, as well as gathering information about what leads to CW turnover. Competencies are to be developed by examining what competencies can be acquired on the job, through training, or should be present prior to hiring. In addition, selection tools were identified for use within the trial. These selection tools are consistent with those identified through research. Some of these selection tools are still undergoing evaluation for validity and collection of results to determine if there is a correlation between the tool scores and actual job performance and longevity. As such, they cannot be currently used in making hiring decisions. Areas related to turnover that will be assessed are consistent with those identified through research. However, the theory is largely based on the idea that hiring the right candidate will reduce turnover.

Recruitment Findings
CWS plans to evaluate the described research and give consideration to the ideas that will be realistic, legal, and cost effective to implement in regard to recruitment, screening and selection, and retention.

Recruitment:
- Update the job description to include key components of an effective job description.
    - Clarify the job's purpose/goals to include insuring safety of children and preservation of family.
    - Create job duties more reflective of the actual job. Common day-to-day activities and experiences need to be included, such as home visits, safety assessments, documentation, court appearances, family meetings, and supervising visits.
    - Identify technical skills necessary to perform the job.
    - Provide realistic work hours, including on-call requirements.
    - Provide transparency by including aspects of the job that current employees find satisfying as well as dissatisfying.
    - Include competencies required for the job when identified by QIC-WD team.
    - Include a Realistic Job Preview (RJP) specific to Oklahoma. Currently, a series of outdated videos are available from Indiana that use different terminology than OKDHS. CWS viewed videos from other states and is in discussions about updating Oklahoma's RJP.
- Create realistic recruitment materials.
- Develop a recruitment and retention specialist to present information about CWS at colleges, job fairs, and other opportunities.
- Facilitate community involvement by current staff members, which will help with creating a positive image in the community.
- Begin awareness campaign to change public perspective about OKDHS. Highlight positive impacts the agency has on community members and advocate for positive media coverage.
- Create a culture of internal recruitment

Screening and Selection:
- Create a realistic job preview specific to Oklahoma following the guidelines in the RJP Toolkit.
    - Needs to be up-to-date, include perspectives from workers, children, families, judges, and community partners, and have clips of field work, court, and intentional case staffing.
    - Provide an opportunity for self-selection following the RJP.
- Train supervisors serving on interview panels and other selecting officials about how to identify and measure competencies.

Retention:
- Explore why employees stay versus why they leave.
- Expand student loan forgiveness and educational tuition reimbursement programs.
- Incorporate merit raises or additional job levels with pay differentials. Staff perceives minimal opportunity for advancement due to limited lead worker and supervisor positions; thus, experiencing salary stagnancy. Additionally, some field staff may not want to move to supervisor positions because they like working directly

with families. Opportunity to increase salary with experience or based on job performance needs to be available to retain experienced employees.

- Increase positive perception among the public.
- Implement teaming approach.
- Implement alternative work schedules.
- Imbed self-care into culture and practice.
- Provide emotional support to address secondary trauma and burnout through tangible means, such as onsite or contracted counselors, mindfulness, or other ideas from staff.

WORKFORCE DEVELOPMENT IMPLEMENTATION EFFORTS

Casework Teaming for Child Protective Services

Casework teaming is a resource designed to support CPS specialists through the OKDHS Executive Leadership's True North Support Strategy E3 about becoming an "Elite Employer" by improving work life balance, cultivating talent, improving retention rates, and providing for the health and mental health needs of all employees. Teaming supports these goals by reducing caseworker isolation and workload, as well as strengthening casework decision-making and service-delivery by sharing the casework and family support responsibilities across a group of specialists with a shared vision of the supervision and teamwork required for success. Casework teaming has been shown to offer better support to families by ensuring they always have access to staff who understand their family, while also reducing caseworker stress and workload and increasing morale and productivity. CPS teaming design and processes guide was provided to the field teams in May 2020. Implementing a version of CPS teaming is not mandatory, but a resource should be available that offers flexibility and autonomy to each CPS team to determine how they complete their work and serve customers.

CPS teaming uses group supervision and teamwork to promote best thinking on how to serve a family, support each other, get all the work done, and share responsibility for the results. One process example is a CPS specialist completes required in-person interviews while a teleworking CPS specialist completes non-field interviews. The teleworking CPS specialist can attend in-person interviews virtually or on the telephone and document interviews for the field CPS specialist who is responsible for reviewing the final interview for accuracy. A second process example is two CPS specialists go to the field together to conduct in-person interviews and take notes in real-time or to split the interviews. The specialists share in documentation and safety decision-making. The team decides how many and what types of cases to team, and when to increase teamed cases or to de-team a case.

Team development requires monthly exposure to activities that support group decision-making, use of time, problem-solving, team-building, conflict resolution, productive communication skills, and leadership. Teaming CW supervisors are less focused on workload or task completion. CPS specialists have more autonomy, have higher acceptance of alternative perspectives, and are more likely to ask for help. Teaming accelerates the learning curve and engagement of new CW specialists. The team-based approach doubles collective efficacy and divides individual exposure. Group decision-making and team-building increase morale, relieve stress, and help unit members bond. Teaming strengthens the caseworker-supervisor relationship and makes it easier for specialists to challenge recommendations in healthy, productive ways. This process requires changes in habits, relationships, and roles. It can be difficult to make the initial investment of time in learning and development while simultaneously managing workload, but OKDHS believes the outcomes are worth it. CW supervisors, district directors, and the deputy director monitor CPS specialist caseloads, assignments, and closure rates. CW supervisors and district directors must provide ongoing coaching of new and existing teams and allow for model flexibility based on the type of team. The *Casework Teaming for Child Protective Services* guide is attached.

2020 OKDHS Employee Feedback Survey

All 2,976 total point-in-time CWS employees were invited via email to participate in the 2020 OKDHS Employee Feedback Survey between 3/11/2020 and 4/70/2020. A total of 1,313 responded to at least one question in the survey.

Scores are a simple representation of the way staff answered questions. Each answer choice is assigned a value on a four-to-eight-point scale with the most positive answer equaling the highest number in the scale and the most negative answer equaling one. All answer options within each question are averaged together to obtain the overall question score. Furthermore, all the responses in each category are averaged to obtain an overall category score. The goal for each question and overall category score is 75 percent of staff responding positively.

This survey is the primary mechanism OKDHS uses to gather feedback from employees about a variety of areas, including employee engagement, communication methods, and opinions on the way OKDHS operates. The feedback report is used to:

- Compare results to past Employee Feedback Surveys to understand change over time in employee perceptions;
- Identify opportunities for improvement as an agency overall and within each division;
- Monitor progress toward the agency True North Goals; and
- Inform how to improve and bring hope to the center of our services.

For more in-depth details pertaining to the survey, see *CWS Employee Feedback Survey Results.*

As part of the agency's efforts to become a "Hope-Centered Organization," questions were added to the survey about perceived organizational support, experiences with burnout and stress, and resilience and hope for the future. Hope is a known buffer to workplace stress and is the single best predictor of a nourishing workplace. Employees were given the opportunity to allow their survey responses to be used for an evaluation conducted by OU researchers. The researchers are using the responses to measure hope within employees and guide planning as OKDHS begins a project to nurture a hope-centered and trauma-informed organizational culture.

OKDHS Telework Survey
The COVID-19 pandemic thrust OKDHS into developing an immediate and robust telework plan in March 2020. A subsequent OKDHS Telework Survey was conducted between 5/14/2020 and 6/3/2020, with 58 percent of CW staff responding. The following results were captured from the 1,707 CW employees who responded.

- 95% preferred to telework some, most, or full-time;
- 83% felt their job duties are a good fit for teleworking ;
- 89% felt their supervisor was comfortable with them teleworking, with 10% unsure or 'somewhat' comfortable;
- 87% productivity stayed the same or improved;
- 85% job satisfaction stayed the same or improved;
- 78% work/life balance stayed the same or improved;
- 92% assignment timeliness stayed the same or improved;
- 84% focus stayed the same or improved;
- 96% responsiveness stayed the same or improved;
- 56% co-worker engagement stayed the same or improved;
- 94% agreed or strongly agreed they were adequately able to communicate with staff;
- 80% agreed or strongly agreed they were adequately able to communicate with clients;
- 80% of supervisors agreed or strongly agreed it was easy to adjust to supervising teleworking employees; and
- 51% (864 responses) felt frustrated, isolated, or stressed with the top reasons being:
  - 78% technology issues;
  - 68% felt disconnected;
  - 65% felt isolated from co-workers;
  - 56% do not have adequate space or equipment at home;
  - 53% felt more stressed;
  - 46% harder to focus;
  - 36% children at home/35% too many distractions; and
  - 27% less productive.

The top connectivity issues reported were the OKDHS network, home internet, and OKDHS cell phone hot spot. In order to support employees and remove the technology issues, cell phones with activated hot spots were issued to all CW employees. New laptops are being deployed to all CW employees, with a completion goal of 7/30/2020, which will be three months ahead of schedule. The online Statewide Automated Child Welfare Information System, KIDS, is 25 years old and is no longer able to remotely accommodate nearly 3,000 CW staff. A new system is under construction, but will not be available for some time. A temporary solution is being tested as of this report by creating a Virtual KIDS for faster speed with the newly deployed laptops.

Telework and Flexible Scheduling
Based on the above research findings and the telework survey, OKDHS fully shifted to *Teleworking and Flexible Scheduling*. This method of work and time management was considered a privilege prior to the COVID-19 pandemic. Telework and flexible scheduling is increasingly common for both public and private entities to lead their workforce. Working from home or alternate worksite arrangements supports OKDHS' Executive Leadership True North Support Strategy E3 about becoming an "Elite Employer" by improving work/life balance, cultivating talent, improving retention rates, and providing for employee health and mental health needs. It also eliminates commute times, reduces overhead costs associated with physical workspaces, and in some cases, streamlines workflow by enabling work to be completed in the field.

Telework means work is performed outside of the employee's assigned duty station/office. The duties, obligations, and responsibilities of a teleworking employee are the same as for employees that physically report daily to their assigned duty stations.

Flexible scheduling has the potential to increase morale and productivity through greater employee control and autonomy over professional and personal time. Employees experience greater work/life balance when able to take control of their own work schedules and engage in more volunteer, educational, and professional-development activities. OKDHS strives to be a family-friendly workplace where employees may have varying degrees of control over the beginning and ending of their workday while continuing to achieve CW goals.

Virtual Resilience Groups
To address secondary trauma and burnout, the CWS Clinical Team developed Virtual Resilience Groups, with district directors and field managers, in order to assist them in providing emotional support, leading their teams, and testing the curriculum. These six sessions will be led by a clinician in July and August 2020. A variety of topics to promote resilience will be discussed as well as the provision of safe space for participants to bring forward common challenges and concerns.

OKDHS Telework Survey results and virtual listening sessions across the state resulted in CWS leadership recognizing not all employees prefer to telework most or all of the time; therefore, OKDHS established a Virtual Engagement Workgroup. This workgroup is comprised of leaders from across all divisions to develop concrete steps and guidance for employees to remain engaged and connected with one another, customers, employees they supervise, and community partners in a more virtual and teleworking world.

COVID-19 Impact on Workloads and Workforce
On 3/12/2020, Oklahoma began experiencing the effects of the COVID-19 pandemic. During the middle of March 2020, the CWS Hotline saw a decrease in reports of child abuse and neglect. CWS believes the decrease in the number of CPS referrals received, accepted, and assigned was due to school closures and less community social contact. CWS leadership's communication to the field was to close as many CPS cases swiftly and safely to prepare for a projected uptick of CPS referrals when schools reopen and social interactions resume normal activity. Efforts to enhance the partnership between OKDHS and the school districts are outlined below.

On 3/16/2020, the Oklahoma Supreme Court issued an order to Oklahoma's district courts to only conduct in-person emergency hearings, such as emergency custody hearings, and allowed courts to postpone adoption, guardianship, termination, and permanency hearings. CWS anticipates permanency outcomes will likely decrease for a season due to these delays. Towards the beginning of April, some courts across Oklahoma began to establish virtual or telephone hearings as a way to progress children to permanency. When permanency outcomes decrease due to court delays, workload compliance may decrease as well. CWS strategies include partnering with the courts to conduct certain hearings, which could move children towards permanency, by live video, conference calls, or other communication. Additionally, CWS leadership asked each district director to make contact with local judges to encourage and support the use of virtual and telephonic hearings when not yet implemented by the court.

CWS is responsible for responding to concerns about child safety. This response must be balanced against the current public health crisis brought on by the COVID-19 pandemic. To reduce the risk of exposure to both families and staff, CWS implemented a reduction of in-person, face-to-face visits between CW specialists and foster parents, children, siblings, and parent-child visits. However, certain high-risk family situations require an in-person response. To accomplish this using a minimum number of staff, CWS established a Field Response Team (FRT). The FRT consisted of CW specialists that responded to in-person family visits. FRT members initiated CPS investigations and completed in-home visits to families with Family-Centered Services cases and children in trial reunification, while the specialist assigned as primary completed the majority of case functions that did not require in-person interaction. The FRT also provided the in-person components of initial placements and placement moves.

The FRT's were comprised of CW staff that volunteered to serve in this role.   In addition to their monthly salary, FRT staff received incentive pay of $1,000 for working 4/13/2020 – 5/13/2020 and $500 for working 5/14/2020 – 5/31/2020. Employees were outfitted with personal protective equipment as it was available to the department. CWS resumed in-person worker visits with children and families on 6/1/2020 and dissolved the FRT. CWS leadership is involved with COVID-19 temporary operating procedures specific to an employee, case, or county. Personal protective equipment continues to be provided to staff and customers are encouraged to wear masks as well.

During the onset of the COVID-19 pandemic, CWS continued hiring. To limit the spread of COVID-19, CWS leadership recommended temporary changes to the interviewing process to include virtual or telephone interviews, reducing the interview team to one interviewer, and one designated person to onboard new employees. CORE shifted to virtual trainings and meetings. This shift allows training to continue but limits the number of employees in attendance; therefore, it may reduce the rate at which new hires move from CORE training to carrying caseloads. CWS leadership was innovative with learning activities for new employees, which includes less shadowing in the field and more reading materials and shadowing through live video and telephone calls. CWS anticipates that it will not lose ground hiring. CWS may receive additional applicants if the economy continues to suffer from the COVID-19 pandemic, resulting in more unemployed individuals applying for CW vacancies. However, CWS leadership received anecdotal feedback that some employees may separate from the agency due to concerns of field work and potential exposure to COVID-19. CWS leadership is committed to being flexible with employees while ensuring the needs of children and families are served during a global pandemic.

CWS Partnership with Schools
CWS realizes that schools gather insight into the functioning of children and families and are an important safety net in recognizing and addressing family safety and dysfunction. As schools resume this fall, CWS wishes to serve as a strong partner with school districts to ensure good communication and shared commitment to serving children and families well. OKDHS is in active discussions about how to strengthen partnership opportunities with the schools, which may include identification of a liaison between all school districts and CWS and information sharing between CWS and schools about local resources.

CW staff are available to offer training to school personnel on recognizing child maltreatment and mandated reporting, but would also like opportunities to provide broader training in strengthening families and the availability of local

resources. It's important to note that more than half of calls to the Child Abuse and Neglect Hotline are screened out because the provided information is not sufficient enough evidence to warrant an investigation. This does not mean the family doesn't need assistance of some kind, and the school can play a critical role in offering that assistance.

CWS would like to partner with school districts to develop intentional opportunities to engage school personnel or other families to become safety plan monitors or foster parents when a child from that community requires CW intervention and other family members are not available or appropriate. This would allow the child to stay in the school district and may provide a great deal of support to the natural family, minimize trauma to the child fearful of losing key relationships with friends and caring adults, and reduce loss of educational progress which often happens during transitions.

Service First Model
In May 2020, OKDHS launched its Service First Model. In order to stay mission-focused in a changing world and prioritize customers and workforce over physical structures, some county OKDHS buildings will be closed under the Service First Model and employees will be assigned a new duty station. The offices are closing due to the reduced revenue from oil and gas and the economic downturn caused by the COVID-19 pandemic. Building upon the foundation of the agency's True North goals, this model will also fully integrate a robust telework policy. For counties with buildings closing, OKDHS will secure office locations with community partners and OKDHS employees will become embedded within those community partners. These new locations will be collaborative spaces that will be shared by OKDHS employees. OKDHS buildings remaining open will also become shared collaborative spaces for all OKDHS employees. The community partner locations will be able to meet CWS' specific needs, such as a location for a parent-child visit and family meetings, or printing. OKDHS believes partnership and community engagement are critical components of service delivery.   Even when a building is closed, OKDHS will still be a presence in the community, committed to remaining accessible, and available for face-to-face interactions. With the Service First Model, OKDHS focuses on cutting the costs associated with a brick and mortar building; therefore, not resulting in cuts to services, programs or impacting employees' salaries and positions.

OKDHS recognizes the agency, its employees, and the world have undergone significant change in the last 12 months, and that fear and anxiety are natural and valid reactions. It has been an emotional time. OKDHS remains committed to supporting the workforce across the agency and being transparent as this model is implemented. OKDHS developed a vigorous communication plan to keep employees informed as plans are finalized. Examples of the communication include virtual town hall meetings with the agency director and/or the agency executive team, administrative broadcast emails, frequently asked questions, and a link for employees to submit their questions and ideas. Innovation Services is supporting the field staff by conducting weekly virtual meetings with local county and district leadership to walk through each step in securing collaborative community partnerships before a building is closed. Each division director must review each county's plan and approve before closing a building. OKDHS is committed to making sure all the needs of the employees and customers are met before locking an OKDHS building for the last time.

More specific to CWS, leadership held virtual listening sessions to allow employees the space to ask questions, share their feelings and thoughts, and hopefully feel supported and listened to. As detailed earlier, CWS created Virtual Resilience Groups, beginning with the district directors and field managers, who in turn can utilize their newly learned and enhanced skills to support employees.

7.1: Supervisor Caseloads

Operational Question
What percentage of child welfare (CW) supervisors meet caseload standards, are close to meeting workload standards, or are over workload standards?

Data Source and Definitions
This measure looks at supervisor units in regards to the worker standard per unit. There are two parts to determine if a

supervisor unit meets the standard. First, the measure looks at the number of CW workers each supervisor is currently supervising in his or her unit. The target is for each unit to have a ratio of five CW workers to one supervisor. When a unit has a ratio of 5:1 or less, they are considered to meet the standard. Units are "close" when they have a ratio of 6:1. All units with a ratio of 7:1 or over are considered "over." Each worker accounts for 0.2 percent of a supervisor's workload capacity. Secondly, the measure looks at any of those supervisors who are currently supervising caseload carrying workers and also have primary assignments on his or her own workload. Because these workload assignments deduct from a supervisor's capacity to supervise their workers, the additional caseload must be factored into the measurement. When a supervisor has less than two case assignments, the case assignments will not be calculated into the measurement. Any other assignments on a supervisor's caseload will be calculated at the same weight as a worker's caseload and then added to the supervisor capacity, which includes the number of workers supervised. With this combined calculation of the supervisor's workload capacity, it is then determined how many of these supervisor units are meeting the workload standard.

Description of Denominator and Numerator for this reporting period

Denominator: All current supervisor units currently supervising caseload carrying workers in Adoptions, Foster Care, Family-Centered Services, Child Protective Services (CPS), and Permanency Planning.

Numerator: All current supervisors with a combined workload of 100 percent or less.

Trends

Reporting Period	Population	Numerator	Denominator	Result
Baseline: 4/1/2014 – 6/30/2014	All supervisors with a unit currently supervising caseload carrying workers			58.8%
7/1/2014 – 12/31/2014	All supervisors with a unit currently supervising caseload carrying workers	217 – Met	306 Units	70.9%
1/1/2015 – 6/30/2015	All supervisors with a unit currently supervising caseload carrying workers	259 – Met	345 Units	75.1%
7/1/2015 – 12/31/2015	All supervisors with a unit currently supervising caseload carrying workers	297 – Met	372 Units	79.8%
1/1/2016 – 6/30/2016	All supervisors with a unit currently supervising caseload carrying workers	308 – Met	379 Units	81.3%
7/1/2016 – 12/31/2016	All supervisors with a unit currently supervising caseload carrying workers	330 – Met	387 Units	85.3%
1/1/2017 – 3/30/2017	All supervisors with a unit currently supervising caseload carrying workers	317 – Met	376 Units	84.3%
4/1/2017 – 6/30/2017	All supervisors with a unit currently supervising caseload carrying workers	313 – Met	375 Units	83.5%
7/1/2017 – 9/30/2017	All supervisors with a unit currently supervising caseload carrying workers	301 – Met	368 Units	81.8%
10/1/2017 – 12/31/2017	All supervisors with a unit currently supervising caseload carrying workers	319 – Met	377 Units	84.6%

1/1/2018 – 3/31/2018	All supervisors with a unit currently supervising caseload carrying workers	318 – Met	375 Units	84.8%
4/1/2018 – 6/30/2018	All supervisors with a unit currently supervising caseload carrying workers	312 – Met	373 Units	83.6%
7/1/2018 – 9/30/2018	All supervisors with a unit currently supervising caseload carrying workers	339 – Met	379 Units	89.4%
10/1/2018 – 12/31/2018	All supervisors with a unit currently supervising caseload carrying workers	334 – Met	377 Units	88.6%
1/1/2019 – 3/31/2019	All supervisors with a unit currently supervising caseload carrying workers	316 – Met	364 Units	86.8%
4/1/2019 – 6/30/2019	All supervisors with a unit currently supervising caseload carrying workers	307 – Met	368 Units	83.4%
7/1/2019 – 9/30/2019	All supervisors with a unit currently supervising caseload carrying workers	313 – Met	376 Units	83.2%
10/1/2019 – 12/31/2019	All supervisors with a unit currently supervising caseload carrying workers	265 – Met	378 Units	70.1%
1/1/2020 – 3/31/2020	All supervisors with a unit currently supervising caseload carrying workers	295 – Met	373 Units	79.1%
4/1/2020 – 6/30/2020	All supervisors with a unit currently supervising caseload carrying workers	341 – Met	383 Units	89.0%
Target				90.0%

Section 3, Table 7.1-3
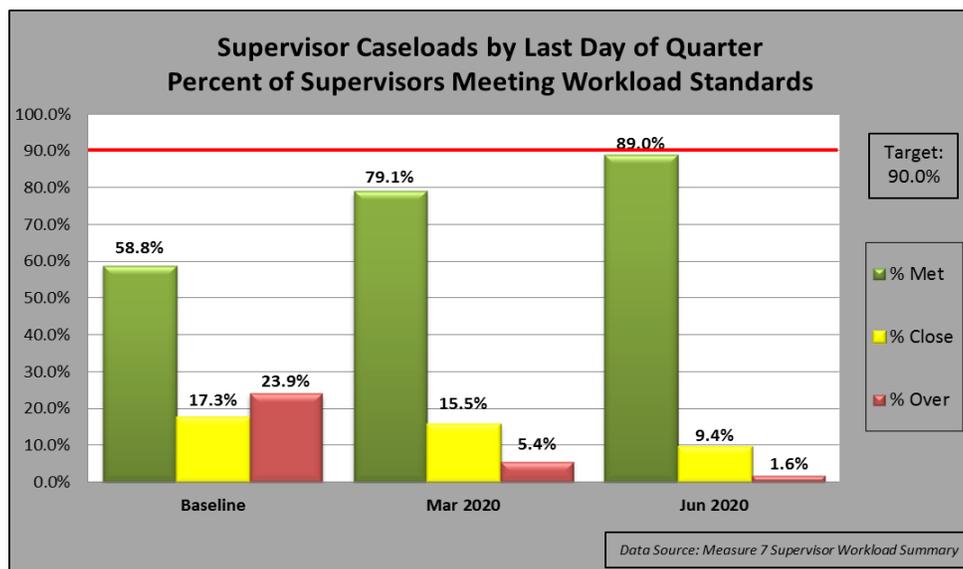
Section 3, Graph 7.1-5

Commentary

For the current quarter, 383 supervisor units in total were counted, which are comprised of 1,736 CW specialist I, II, and IIIs. This calculates to a statewide worker to supervisor ratio of 4.53. As of 6/30/2020, 341 supervisors met the workload standard, 36 supervisors were close to meeting the standard, and six supervisors were over the standard.

As part of this measure, the work assigned to supervisor's workloads must also be calculated into the workload standard. Thirty-six supervisors had at least one assignment on his or her caseload. This is 88 fewer supervisors carrying a case assignment than last reporting period.

In past reporting periods, supervisors were allowed to have up to two assignments that did not count towards their workloads standards. This logic was changed beginning with the reporting period ending December 2019 to include all assignments as countable towards a supervisor's workload. Due to this change, there was a significant decline in the July – December 2019 performance, with 70.1 percent of supervisors meeting caseload standards. As an additional effort to improve this metric, OKDHS now receives a more detailed supervisor caseload data report monthly. The data is reviewed near the beginning of each month by the CWS Executive Team. An explanation for why a supervisor is not meeting caseload standard must be provided to the CWS Executive Team for review, discussion, and direction. During this reporting period, adjustments were made to some supervisory units to more equally distribute the number of workers assigned to each supervisor. Due to these efforts, OKDHS demonstrated an 18.9 percent increase and was 1 percent shy of meeting the metric. With 89 percent of supervisors meeting caseload standards and 9.4 percent close to meeting, the combined total of 98.4 percent does meet the 'spirit' of the measure and provides more supervisors with greater opportunities to coach, support, and mentor the specialists assigned to them.

During this review period, CWS continued to make strenuous efforts to hire and retain CW specialist I, II, and IIIs. This effort contributed to an increase in CW staff. With more staff, supervisors are carrying additional staff until more supervisor units can be hired. Twenty-eight supervisor units were over workload standards solely from having more than five staff in their unit. An additional four units were over workload standards with more than five staff in their unit, while also carrying additional assignments for a total of 32 units over standards due to over staffing. Of the remaining 10 supervisor units not meeting standards, seven of the supervisor units were not meeting workload standards due to one assignment over.

Conclusion

Since reform began, OKDHS has evolved into a self-correcting system and caseload management is one example of that system. The baseline data ending June 2013, showed 27 percent of workers meeting caseload standards compared to the recent period ending June 2020 with 93.8 percent meeting. While caseload compliance ebbed and flowed over the reporting periods from 2013 –2020, it is evident that OKDHS demonstrates substantial improvement in not only the metrics but in identifying activities, efforts, and strategies resulting in enhanced caseload compliance. Furthermore, OKDHS self-corrected during times of increased work, ending in June 2017, OKDHS had 1,621 total caseload carrying eligible staff that resulted in 80.1 percent meeting caseload standards. In comparison to the current reporting period ending June 2020, OKDHS had 51 fewer workers, but demonstrated a 13 percent increase of workers meeting standards. While the amount of work was greater in 2017, OKDHS efforts to support workers and quality casework through caseload management cannot go unnoticed.

As outlined in this report and previous Semi-Annual and Core Strategy reports, OKDHS remains committed to activities and efforts to hire and retain employees. OKDHS recognizes meeting caseload standards is a key retention effort. The 'spirit' of the caseload metrics is to develop a CWS system with manageable workloads. OKDHS ended the reporting period January – June 2020 with 93.8 percent of workers meeting caseload standards and 4.2 percent "close" to meeting caseload standards for a combined total of 98 percent. Therefore, OKDHS is meeting the metric and ensuring front line staff have manageable caseloads to focus on improved best practice and outcomes related to safety, permanency, and well-being. With manageable caseloads, OKDHS and its customers are experiencing improved outcomes as evident in other metrics within the Pinnacle Plan. These improved metrics, improved system changes, and sustained best practices

are found throughout the CWS system to include decreased maltreatment in care, improved recruitment and retention of foster homes, reduction of CPS backlog, improved placement stability, reduction of shelter usage, greater worker visitation and continuity, quality assurance, and improved permanency outcomes.