



VERMONT

Department for Children and Families

Family Services
Child and Family Services Plan

Annual Progress and Services Report June 30, 2006
Amended January 2007

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FOCUS OF ANNUAL PROGRESS AND SERVICES REPORT

This Annual Progress and Services Report will focus on:

- Progress and accomplishments that have occurred since the submission of the Annual Progress and Services Report submitted in June 2005;
- Progress on goals and objectives established in the plan;
- Report on the Chafee Foster Care Independence Program, including an application for funding.

AGENCY OF HUMAN RESOURCES RE-ORGANIZATION

The Department for Children and Families (DCF) was formed on July 1, 2004, as part of a re-organization of the Agency of Human Services (AHS) The AHS re-organization was guided by a desire to provide more integrated, consumer-friendly services to Vermonters. In addition to child welfare and youth justice services, the new DCF administers TANF, Medicaid and other economic benefit programs, child support, early childhood programs, disability determination and other anti-poverty programs.

The last 24 months have been challenging as we have experienced changes in leadership at the agency and the department level. Nevertheless, we are making progress in our “transformation”. This spring, staff around the agency have been attending a one-day training entitled Beyond the Boxes, which helps them to apply the four key practices of the transformation to their work. These are:

- ▶ Holistic services
- ▶ Strengths-orientation
- ▶ Results orientation and
- ▶ Customer service.

Within the Department, Family Services is the division responsible for the delivery of child protection, child welfare, permanency planning and youth justice services. The Deputy Commissioner for Family Services sits on the department management team.

Detailed information about the re-organization is available at:
<https://www.ahsnet.ahs.state.vt.us/council/>

PROGRAM IMPROVEMENT PLAN

Vermont successfully closed out its Child and Family Services Review Program Improvement Plan without penalty in July 2004. Our second Child and Family Services Review will begin late in 2006, with an on-site review scheduled for April 2007.

CONTINUOUS QUALITY IMPROVEMENT

One of the goals in our PIP was to develop a process to evaluate our services and practice. We achieved this by designing and implementing a district review process that mirrors the CFSR.

The district review process is a results-based review system designed to assist the Family Services Division in improving outcomes for children and families who are involved in the State's child welfare system. It was developed and implemented in 2003 and all twelve districts have completed the review process.

The district review process has evolved over time and now involves: a district self-assessment which involves community feedback and input on local practice issues and outcome performance; an onsite review of twelve cases; interviews with key stakeholders and the development of a district plan to address areas identified in the review as needing improvement.

Following their review, each district developed a District Plan to address areas needing improvement. The district plans are the most important component of our continuous quality improvement efforts. In addition, we have used the findings of the reviews to prioritize goals and objectives for this plan update as well as the focus of our second round of district reviews.

Continuous Quality Improvement Goals

Goal CQI1: Highlight importance of continuous quality improvement by completing implementation of district reviews.

SFY2005 Update

In the summer of 2004 a workgroup convened to discuss adjustments to our district review indicators. We determined that some indicators on the list really were not yielding the information we had hoped to get, so we eliminated them. In addition, we identified areas that we weren't measuring and developed appropriate indicators. District review instruments were revised to reflect the changes.

We designed an approach to review the Burlington district, our largest urban area.

This case review focused on four of the federal outcomes: repeat maltreatment, re-entry, placement stability and timely permanence. We were able to review more cases using this approach.

Peter Watson, from the National Resource Center for Organizational Improvement, worked with us to develop an approach to evaluate our district review process. We have conducted reviews in 9 out of 12 districts and feel it is a good time to look at the process from all angles to determine what's worked and what hasn't worked as well as possible opportunities for improvement as we go in to the second round of reviews.

SFY2006 Update

On October 24, 2005 we asked staff and stakeholders to join us to evaluate the District Review Process. Thirty people participated in a discussion of the major components of the process and ideas for improvements.

Peter Watson, director of the National Resource Center on Organizational Improvement in Child Welfare, JoAnn Vizziello our Regional One ACF representative and colleagues from New Hampshire and Rhode Island also joined us.

This group of people was incredibly helpful in helping us decide how to move into our second round of district reviews. Significant changes have been made to the focus of the reviews and the quarterly reporting format.

The second round of reviews will build on what we learned from the first reviews. We identified areas that were challenges across the state and included issues that have received attention from the Governor and our community partners. The focus will be on:

- Federal Outcomes
- Reducing length of stay
- Permanency and life long connections
- Family engagement
- Developing learning environments in district offices

We also changed the district plan quarterly reporting format. The first round reporting mechanism didn't facilitate true examination of the success of the plan. We decided to move to a team discussion format every six months. The team, which is quite large, discusses progress, successes, obstacles and needed changes. District staff, community partners and central office staff are team members.

We have held six of these team discussion meetings and feel they were successful. We were able to identify and discuss the strategies districts have employed to successfully improve target areas as well as lend support and expertise around issues where they are struggling.

District staff who have been involved in these meetings report feeling better supported after we have discussed success and challenges and we all feel better connected after these meetings. This goal has been successfully completed.

Goal CQI2: Engage consumers in a feedback mechanism designed to solicit regular information to help us to improve our services.

SFY2005 Update

The Agency has formed a task group to develop recommendations to the Secretary regarding consumer satisfaction. The recommendations were made to the previous AHS Secretary in October 2004:

- Develop and publish standards of customer satisfaction.
- Develop measures of customer satisfaction.
- Develop common formats for data collection related to standards and measures.

Family Services is waiting to see what the Agency is going to adopt, as we do not want to create a structure that will be duplicative.

SFY2006 Update

Consumer Advisory Boards have been formed in all 12 districts to inform and advise the AHS Field Directors. In addition, a statewide board has been formed, with representatives from all districts.

In the fall of 2005, AHS released the results of a consumer survey. In general, consumers were quite satisfied with the services and support they receive and how staff treats them. This was very gratifying to all staff. AHS is in the process of implementing consumer comment cards.

Our district review process has become our input and feedback mechanism. We solicit information from consumers and stakeholders at several different stages of the review process and incorporate it into our district plans.

This goal has been successfully completed.

FROM THE PIP TO THE CFSP

We happened to have the perfect opportunity to continue moving forward with our strategies for improvements because our PIP ended in March of 2004 and our Child and Family Services Plan was due in June. The timing couldn't have been better.

We analyzed our demographic and outcome data, looked at the results of the 7 district reviews we had conducted at that point and looked at what we had accomplished in our PIP.

Again we categorized issues by themes and held focus groups to gather input specifically on strategies to improve practice in the following areas:

- Social worker contact
- Post adoption services
- Case planning and Administrative case reviews
- Re-entry
- Permanent connections for older youth
- Consumer feedback
- Risk of harm cases

We conducted 12 focus groups around the state with staff and stakeholders speaking to 223 people.

We worked with our Division Management Team (all 12 district directors and central office managers) and the CAPTA Advisory board to form the final goals and strategies of the new Child and Family Services Plan 2004-2009.

Several of our goals require continued stakeholder involvement to explore issues. For instance we've met with our contracted administrative case reviewers to discuss the case review process and family engagement. We are holding focus groups this month to discuss success and challenges with kinship involvement.

Most of the goals in the new plan are set for the first 2 years as our next Child and Family Services Review process will begin this October with an onsite review scheduled for the week of April 2007.

As our PIP goals were met, the way we provided services to children and families began to change. For instance, when structured decision-making was implemented in September 2005 caseworkers and supervisors began to use new tools to engage families in planning and to support decisions regarding placements and service delivery. For the first time social workers have assessment tools to guide the decisions they have to make in the field.

Now we are encountering the challenges that come with implementing new tools in the field. SDM implementation is a developmental process that takes time to master. The foundation is simply getting into the pattern of completing the appropriate assessment whenever it is required. Sometimes it feels like mere paperwork, but it is the foundation upon which every other step is laid.

The next step is making sure the tools are completed accurately. When completed accurately, the tools yield useful information for guiding decisions. When this occurs, we will realize the goal of reduced harm.

CFSR OUTCOME PERFORMANCE

At PIP close-out, we had achieved our performance goal on the four outcomes we had to improve.

Safe from Repeat Maltreatment

Safety was found to be a major focus and priority during the CFSR. In over 87% of the cases reviewed, we responded to reports of abuse and neglect according to policy and were found to be very responsive when there is an imminent risk to children. This is our area of greatest strength.

For 15 out of the last 19 quarters, we have met or exceeded the national standard of 93.9% safe in the six months following a substantiated report of child maltreatment. While all districts have been doing a great job, three of our district offices and our central Special Investigations Unit experienced 100% success in achieving safety for the last 4 quarters. Performance for the past 4 quarters:

Quarter	Safety	National Standard Met (93.9%)
April-June 2005	96.0%	Yes
July-September 2005	96.0%	Yes
October-December 2005	96.4%	Yes
January-March 2006	95.7%	Yes

Custody Re-entry

At the time of the CFSR, Vermont met the national standard for re-entry. We have continued to track re-entry performance. Vermont’s population includes children who are in custody due to child abuse and neglect, delinquency, and because they are beyond the control of their parents. These different populations give Vermont one of the highest median ages of children in out of home care of all states reporting AFCARS data.

Although we do not meet this standard, our performance has been under 11.6% for three of the last quarters. Given the populations we serve, this is quite encouraging. Performance for the past 4 quarters:

Quarter	Re-entry	National Standard Met (<8.6%)
April-June 2005	11.4%	No
July-September 2005	15.9%	No
October-December 2005	11.6%	No
January-March 2006	11.0%	No

Placement Stability

In spite of substantial progress made during the PIP, children in DCF custody still move too much. A placement stability analysis revealed that the lack of a consistent and comprehensive approach to assessment of parents and children hampers analysis of factors that lead to stability and instability.

We've implemented a comprehensive screening process to help inform placement decisions, identify appropriate services for children and families and identify any additional evaluations/assessments children and families may need.

We hope to see performance in this outcome improve once social workers begin to use the information in the screening packets and SDM assessments to inform placement and service decisions. In-depth analysis of this performance will be a focus of our next Statewide Assessment. Performance for the past 4 quarters:

Quarter	Placement Stability	National Standard Met (89%)
April-June 2005	71.1%	No
July-September 2005	68.0%	No
October-December 2005	67.5%	No
January-March 2006	68.3%	No

Timely Reunification

While past performance shows improvement - in 2000, 62.5% of reunified children were reunified in 12 months and in 2004 that percent increased to 69% our trend in this area is moving in the wrong direction. In-depth analysis of this performance will be a focus of our next Statewide Assessment. Performance for the past 4 quarters:

Quarter	Timely Reunification	National Standard Met (76.2%)
April-June 2005	69.7%	No
July-September 2005	69.8%	No
October-December 2005	59.6%	No
January-March 2006	61.4%	No

Timely Adoption

In spite of the fact that we have implemented a Federal grant to finalize adoptions for the longest waiting children (and therefore might expect poorer performance in this area) we have exceeded the national standard for this outcome for five out of eight quarters, however we did experience a significant decline in performance in this last quarter.

While we recently decentralized the adoption process and our adoption supervisor went on maternity leave it is too early to contribute this decline to these changes. We are developing alternative methods to focus on the issue of permanency which will improve several outcomes. Adoption finalizations have been on the rise with 108 in CY2000 and 151 in CY2005. Performance for the past 4 quarters:

Quarter	Timely Adoption	National Standard Met (32.0%)
April-June 2005	41.7%	Yes
July-September 2005	42.1%	Yes
October-December 2005	34.2%	Yes
January-March 2006	16.67%	No

SERVICE DELIVERY SYSTEM

The Family Services Division of the Department for Children and Families delivers child protection, child welfare (including independent living) and juvenile justice services to Vermonters. All of these services are fully coordinated and delivered by local district staff.

Child Protective Services (CAPTA Services)

Prevention

Much of Vermont's prevention agenda is carried out through a cluster of programs and initiatives known as Success by Six. Under our Agency of Human Services reorganization several of these programs were moved to the Child Development Division. This move will help to integrate services and provide better customer service to community providers as well as children and families.

The core programs of Success by Six are:

- **Healthy Babies Program** provides critical early support and health promotion for pregnant women and infants;
- **Family, Infant and Toddler Program** provides early intervention services including evaluation and family services planning and coordination (IDEA Part C services);
- **Essential Early Education Program** provides services to children age three to six who need specialized services for school readiness;
- **Parent Child Centers** in 16 communities, provide comprehensive supports to families with young children including parent education, playgroups, home visiting, and early childhood services;
- **Headstart** in 7 communities provides services focused on health, mental health, nutrition, early education and parent education.
- **ReachUp** provides case management, education and specialized supports for families receiving TANF payments;
- **Welcome Baby** for families with newborns and newly adopted children;
- **Community-specific initiatives** focused on the well-being of young children and their families.

Child Abuse Reporting

The department accepts reports alleging child abuse or neglect, including reports of sexual abuse by any person. This reality makes Vermont look different from other states when types of abuse are compared. Each district office is responsible for taking intakes. After hours, the Emergency Services Program takes intakes. About 1000 calls are received each month.

Once a report is accepted, the alleged victim is seen and/or interviewed within seventy-two hours. The district director may waive the seventy-two hour requirement, but only for limited reasons. The investigating social worker completes the assessment within thirty days, whenever possible. The decision to substantiate is made by a supervisor. By policy, only substantiated cases may be opened for ongoing CPS services.

Allegations of child abuse or neglect in regulated facilities (foster homes, residential facilities, child care facilities and schools) are handled by a central Specialized Investigation Unit, which is under the supervision of the Child Safety Unit.

The Child Safety Unit has been responsible for supervising staff that supervise investigation functions in each of the 12 district offices since July 2005. The Child Safety Assessment Manager does not use a traditional supervision model; rather she focuses on training, technical assistance and quality assurance. She works with the Quality Assurance Coordinator to maintain a continuous quality improvement approach for the intake and investigation process.

Every three months, an intake/investigation supervisors meeting is held as a forum for discussion of issues related to this function. These meetings are intended to provide supervisors with group supervision while at the same time ensuring that they receive consistent messages about intake and investigation policy and practice. The Child Safety Assessment Manager has also convened practice forums related to specific issues including repeat maltreatment and unsubstantiated high and very high risk cases.

The Child Safety Assessment Manager has been involved with the hiring of all staff in the intake / investigation chain of command.

The 2006 Legislature was very busy; in turn we will be very busy attending to passed Bills. Each new Bill is reported on in the appropriate section.

The Baby Safe Haven Bill establishes a safe-haven from the crime of abandoning a baby. It applies to a person who leaves a newly born baby with an employee, staff member, or volunteer at a hospital, police or fire station, place of worship, or entity authorized in this state to place minors for adoption. Our Communications Specialist has convened a team to develop a public information program to increase public awareness about the provisions of this new law.

Child Safety Goals

Goal CS1: Promote excellence of practice by centralizing management of child maltreatment assessments.

SFY 2005 Update

Once our Child Safety Assessment Manager starts (early July) we will develop a plan for supervision of intake and investigation functions, consultation and training.

SFY 2006 Update

Our Child Safety Assessment Manager started in her role in July of 2005.

Since that time, she has focused her attention on providing consultation, supervision and training to the twelve district offices around the state. She meets with the intake/investigation supervisors and district director (on occasion) approximately every four to six weeks to discuss case specific issues and questions related to intake and investigation policy. In addition, case consultation is available outside of site visits via email or telephone.

The Child Safety Assessment Manager has assisted in developing and training intake and investigation staff in areas specific to the needs of staff including: Intake Screening, Investigation Skills, Forensic Interview Skills and Medical Aspects of Child Abuse for Non-Medical Team Members. The Child Safety Assessment Manager will continue to develop curriculum including substantiating child abuse / neglect and intake skills.

This goal has been successfully completed.

Goal CS2: Promote excellence of practice by centralizing the child abuse and neglect intake function.

SFY 2005 Update

In April 2004 the Child Protection Director was designated to develop a plan to centralize the management of child maltreatment assessments. At this time we believed we were moving forward with a plan to centralize all intake and investigation functions; this plan has changed. We were not granted additional positions to centralize intake and investigation functions so in order to accomplish the plan we would have to take positions from the field, something we do not intend to do.

We are exploring other approaches that don't require additional positions. For instance two of our districts are rotating intake coverage weekly so every other week each district has not intake responsibilities.

SFY 2006 Update

We have not been successful in securing additional positions to centralize the child abuse and neglect intake function. However, due to the oversight of the Child Safety Unit our practice has become more consistent in this area. We are no longer working on this goal.

Goal CS3: Advocate for an updated state child protection statute.

SFY 2005 Update

We did not advocate for this bill in last Legislative session. We are in the initial stages of discussing major changes in the way we carry out our work. Topics of discussion include differential response, family group decision making, strengths based and solution focused practice, etc. We are evaluating whether or not we need statutory changes to accomplish our goals.

SFY 2006 Update

We have requested technical assistance to help us to evaluate possible directions for revision of our child abuse statutes. We are strongly considering moving to a differential response system.

Goal CS4: Ensure effective protocols for reporting of suspected child abuse by school personnel who are mandated reporters.**SFY 2005 Update**

We completed a review of reporting procedures for all supervisory unions and began working collaboratively to develop one statewide reporting protocol.

SFY 2006 Update

DCF and DOC held a meeting to discuss the approach to develop a statewide reporting protocol for all school personnel. It was determined that this project would require some funding and it has not moved forward.

Goal CS5: Design approach to Quality Assurance reviews for intake and investigations.**SFY 2006 Update**

The Child Safety Assessment Manager has been providing CQI to the twelve districts offices in a number of formal and informal ways. The Child Safety Assessment Manager has conducted three formal safety reviews (Rutland, St. Johnsbury, and Bennington) that have been incorporated into the district review process. These formal safety reviews have included a review of ten intakes that were not accepted for investigation and ten intakes that were accepted for investigation. Issues related to decision making alignment with policy, timeliness and service delivery were assessed. This process will continue with the next round of district reviews beginning in August of 2006.

In addition, each month the Child Safety Assessment Manager completes second review of non-acceptance decisions of intakes in a particular district. The district rotates monthly. Issues related to decision making alignment with policy and timeliness of review are considered and formal written feedback is provided.

The Child Safety Assessment Manager regularly addresses issues of consumer concerns and reviews cases in depth during these situations. Feedback is provided to involved staff. Case consultation is provided to district offices as needed. Formal group supervision meetings and training are provided by the Child Safety Assessment Manager.

This goal has been successfully completed.

Child and Family Assessments

In September 2005 we implemented Structured Decision Making assessment tools that guide our decisions in the ongoing casework arena. Like the investigation tools, which were implemented in 2003, these tools promote the use of professional judgment, but provide a structure for decision-making. When used correctly these tools inform case planning, placement decisions and service delivery.

In addition to the SDM tools we have developed an initial screening process that is conducted on all children who are likely to remain in custody for 30 days or more. For these children, a contracted screener begins the process of meeting with key players and completing specific screens including:

- Parenting Stress Index;
- Genogram and Eco-map;
- Child Behavior Checklist;
- Trauma Symptom Checklist;
- Gathering existing education records and assessments;
- Connections Survey;
- Ages and Stages;
- Ansell-Casey Life Skills Assessment, and
- Comprehensive medical and dental information.

The goal is to complete the screening packet within 30 days so the social worker and the team has vital information to inform the SDM assessments, the initial case plan, and service and placement decisions.

Over the last several years, we have strengthened our partnership with the Vermont Department of Health (VDH). In 2005 six localities had VDH nurses assigned to assist with the initial assessment of children's medical needs. During 2006, this is being expanded to all districts.

IDEA Part C

On June 25, 2003, the U.S. Congress passed the Keeping Children and Families Safe Act of 2003, a reauthorization of CAPTA. This legislation requires states to establish provisions and procedures for referral of a child under the age of 3 who is involved in a substantiated case of child abuse or neglect to early intervention services.

Staff from Family Services, Child Development Division and the regional Family and Infant Toddler programs developed a system for referrals. After 10 months of implementation we evaluated the CAPTA Part C process to determine if any changes were needed. As a result, we have strengthened our screening process.

July 1, 2005 – April 18, 2006			
Number of children (0-3 years old) substantiated victims of abuse or neglect	Number Referred for Screening	Number Referred to FITP	Number Eligible for FITP
137	137 – 100%	32 – 23%	13 – 41%

We are in the process of redesigning the referral process to expedite FITP involvement and reduce confusion. Our Child Safety Assessment Manager is working with the Child Development Division and the VT FITP Part C Coordinator to redesign and implement the new process. Referrals will continue to be made while they work on the restructure.

Child and Family Assessment Goals

Goal CFA1: Conduct review of Risk of Harm substantiations to identify contributing factors.

SFY 2005 Update

2003 data showed us that the majority of our repeat maltreatment cases were risk of harm for both substantiations. We have completed a review of all the 2004 substantiated risk of harm cases that fell into this category.

SFY 2006 Update

The Quality Assurance Coordinator completed the Repeat Maltreatment study that examined the factors most commonly associated with repeat substantiation. Our review showed us that the children who appear to be at the greatest for risk of harm repeat maltreatment are aged 0-5 and live in a single parent home with a parent who has an identified substance abuse issue. Even though referrals were made in all 13 cases after the first ROH substantiation, and 62% of parent(s) were involved in case planning after the first substantiation, and 69% of those case plans addressed the safety issues identified in the first safety assessment, the children were subject to repeat risk of harm in the next six months.

As a result of this study, the Child Safety Assessment Manager convened a Repeat Maltreatment Practice Forum in April of 2006. A number of issues were identified as needing further consideration. The group discussed the emerging theme of substance use / abuse in these cases and the complexity this creates. The group identified the need for Family Service staff to receive additional training around the issues of substance abuse. The group identified the need for stronger linkages between Family Services and the treatment community to ensure services are implemented in a meaningful way. The training issue is being pursued with the UVM Training Partnership.

Goal CFA2: Ensure a timely response to the physical health and dental needs of children and youth entering custody for the first time.

SFY 2005 Update

The primary goal of the Health Intake Questionnaire (HIQ) is to ensure that all children who enter state custody receive health care in a medical home/dental home and mental health and substance abuse services if needed. The implementation process began in four districts; we are now up to six. Each district has a co-located public health nurse in the Family Services office and has been supported by a primary care practitioner in their community. The goal is to implement this partnership statewide by June 2006

The HIQ workgroup met early in June to discuss the utility of the HIQ and they discussed possible adjustments to the form and the process. All twelve Department of Health directors are on board with this project and have identified children in states custody as their highest priority.

Staff from the Health Dept.'s Oral Health Project has been successful in developing a system of "incentives" for dentist's willing to take on additional Medicaid eligible patients. Previously, a lack of dentist's willing to take on these patients had been identified, as a barrier to meeting the oral health needs of children and youth in state's custody. Working with staff from the state's Medicaid office, staff has been able to create incentives that have broadened the pool of dentists willing to participate in the program

SFY 2006 Update

Each Family Services office has met with their local Department of Health to develop a partnership and a process for completing the HIQ. These meetings occurred at the beginning of 2006. We are currently accepting feedback from the field to work the bugs out of the automated HIQ. Public health nurses have become team members for case staffings when children and youth enter custody.

This goal is completed.

Citizen Review Panel (VCAB)

Our Citizen Review Panel, The VT Child Protection Advisory Board (VCAB,) meets four times a year to discuss changes in policy and practice as well as outcome performance. The Commissioner, the Deputy Commissioner for Family Services and the Manager of the Child Assessment Unit attend these meetings and respond to questions and/or issues raised by the panel.

Pursuant to sections 106(c)(4)(A)(i) and (ii) of the Child Abuse Prevention and Treatment Act (CAPTA), each Citizen Review Panel must evaluate the extent to which

the State is fulfilling its child protection responsibilities in accordance with its CAPTA State plan by:

- Examining the policies, procedures and practices of State and local child protection agencies.

VCAB reviews all new policies and procedures, Legislative activity and specific cases. VCAB reviewed and provided feedback on three policies related to intake and investigations and a policy to guide transporting children. Please see the attached Annual Report for more detail.

- Reviewing specific cases, where appropriate.
- Citizen review panels must provide for public outreach and comment.

Case reviews are usually brought by the Family Services staff however, any member of the committee can request a case review. In 2005, VCAB reviewed four cases involving five children. In addition, the Child Fatality Review Committee (a sub-committee of VCAB) reviewed several child death cases. One such case involved a child who was killed as a result of a snowmobile accident.

The Review Committee became involved in a broad discussion by seeking public comment on snow mobile safety in VT. The Committee invited members from the ski and snowmobile industry to join the discussion.

In addition, the Review Committee explored concerns related to the way children are transported to trauma centers in VT. VT only has two certified trauma centers (one at each end of the state) and oftentimes children are transported by ambulance or helicopter, which can be dangerous methods of transportation.

- Each panel must prepare an annual report that summarizes the activities of the panel and makes recommendations to improve the CPS system at the State and local levels.

VCAB's 2005 Annual Report is attached.

Family Preservation and Support and Family Reunification Services

The division contracts with a variety of community agencies to provide services that supplement casework services. These services comprise a statewide network of family support and preservation services and are available in all 12 districts. We use this service system for family preservation and support as well as for reunification.

- Parent Educators provide home-based support and parenting education, focusing on family support, preservation and reunification.

- Intensive Family Based Services provide time-limited, intensive in-home therapeutic services focusing on family preservation and reunification.
- Sexual Abuse Victim and Offender Treatment Services are offered by trained therapists who are authorized to provide treatment under a special DCF Medicaid program.
- Supervised Visiting Programs are operated locally. In most instances, districts hire one or more professionals to supervise visits for children in foster care with their families.
- District Specific Services purchased with IV-B, Subpart II and other funds, include case management, mentoring programs, after school programs and family-tailored individual services.

District specific programs are currently being evaluated to provide better supports to our emerging practice framework.

Children and Youth in Custody

The division has responsibility for children and youth in custody for reasons of:

- Child abuse and/or neglect
- CHINS(C) Children without or beyond the control of their parents
- Delinquency
- Voluntary Custody

As of 3/31/06, we were serving the following children and youth in custody:

Type	Number
Child abuse and/or neglect	872
Children beyond the control of their parents	214
Delinquent Youth	375
Voluntary Custody	7
Total Number	1468

Permanent Connections and Family Engagement

We are committed to attaining permanency for all children we serve. Clearly the best option for every child is to safely remain at home. When placement becomes necessary, returning home to family is the preferred goal, but this is not always possible.

Traditionally, the next option for children who can not return home is adoption, then guardianship.

We have really focused our work this past year to help staff gain the knowledge and skills necessary to engage families in a meaningful way and to explore permanency options at every stage of a case. Current activities to support this approach are:

- We decentralized supervision of the adoption process and shifted resources from our adoption unit to high caseload districts to enhance the ability of every social worker for focus on permanency for every child.
- We are utilizing several different types of facilitated case consultation models to engage family and community members in planning and decision making.
- In March 2006, DCF managers, staff and community partners received an orientation to new family finding techniques that will enhance permanency options for adolescents.

The event to tie all of this work together was a two day Permanency Convening, which was designed to inspire DCF staff, judges and community partners to focus affirmatively on the permanency needs of adolescents.

The first day was a Call to Action meant to build momentum, move the early adopters to action, and demonstrate the Division's commitment to permanency. Several key leaders articulated the importance of the work. There were two motivating speakers with high credibility from outside who created the pull and highlighted the success in other regions in the country. A panel of youth shared their stories and then a panel of people working in the field shared examples of the practices we were highlighting for spread. There was also a time for dialogue in small groups to discover resistance and barriers, which were passed on to leadership. The event was free and open to anyone who was interested. There was a great cross-section of people who came. We asked people to demonstrate their commitment to moving to action in a variety of ways including signing up for a second day devoted to coming up with concrete action steps. The response to the day was very positive.

The second day was designed as a supportive planning process to assist local teams in the development of plans which would be submitted to the central office. There were two parallel planning processes.

The first was designed for those who were interested in broader system issues which included representation from mental health, education, the courts, residential programs, private foster care and adoption agencies, family support agencies, caregivers and others. This group focused on the infrastructure, supports and reforms needed at a system level to enable and enhance local efforts.

The other group consisted of twelve local teams of various sizes and make-up. This group was led through a four step planning process that began with identifying strengths, resources and ideas for improvement within each of the system components. Each of the goal areas was reviewed and relevant data presented. Using local data, teams tailored the goals and set targets specific to their area. The seven action areas were presented along with possible strategies for improvement.

Teams then identified strategies for each action area that were compatible with local priorities, strengths, and resources and identified areas for improvement.

Districts are just submitting their permanency plans which identify strategies they will employ to move the four identified outcomes. We have reorganized some central office staff to form a permanency team that will focus on supporting districts' efforts to achieving permanency for each and every child in our custody.

Goal PC1: Promote practice that will ensure early identification and location of fathers and father's families as possible resources for children in custody.

SFY 2005 Update

The Child Benefits Unit assists social work staff by applying for SSA; SSI; VVA; obtaining child support benefits for children in custody; and making Title IV-E eligibility determinations.

A paternity report, which shows parents addresses, is generated weekly. If an address is missing they begin working on parent location immediately. They also receive parent locator requests directly from social workers.

The Child Benefits Supervisor has visited several district offices to provide some training to new workers. The Unit has also provided information to our Assistant Attorneys General in each area of the state.

The Child Benefits Supervisor is willing to meet with all new hires to inform them of the Unit's services but she does not have a way to identify new hires around the state. Our plan is to develop a mechanism for her to get information on new hires so she can schedule orientation meetings.

SFY2006 Update

The Child Benefits Supervisor met with statewide supervisors at their monthly meeting in April to inform supervisors about the support her unit can provide for the districts: child support, parent locator and family finding, paternity testing, and IV-E eligibility. Supervisors agreed that they will direct all new staff to contact the Child Benefits Unit upon hire.

This goal is successfully completed.

Goal PC2: Promote practice that will result in all youth leaving DCF custody in late adolescence having meaningful, ongoing relationships with one or more adults who will provide personal support into adulthood.

SFY 2005 Update

The Connections and Permanency Work Group has been meeting in the Southern part of the state since December 2003. Now, workers in the Northern part of the state have expressed interest in a Northern Connections Work Group.

The Connections and Permanency Work Group offers an innovative method of providing permanency planning for youth who are unable to return home and do not have an adoptive placement. They have piloted a model of finding permanent connections in 6 districts. This model was developed by Robert Lewis and implemented in other states to effectively find permanent connections and families for youth who would otherwise not have resources.

SFY 2006 Update

The Connections Project is a collaborative of social service professionals who have a strong commitment to the permanency needs of youth exiting foster care. The goal is to educate and inform other service providers on ways to ensure that youth have strong permanent connections with caring adults before they enter adulthood. With these lifelong connections, youth exiting foster care will have a greater chance of success and happiness throughout their adulthood. Participation varies and the facilitators would like to see more people join the groups. They scheduled the meetings on a regular day each month and recently sent a flyer to all caseworkers with information about the workgroups.

Northern Connections Work Group meets for 2 hours the 4th Monday of each month
Southern Connections Work Group meets for 2 hours the 1st Monday of each month

Goal PC3: Partner with contractors in efforts to achieve permanency for older adolescents in danger of “aging out” of the foster care system.

SFY 2005 Update

Recognizing that residential and other out-of-home care providers are uniquely situated to support permanency initiatives, Family Services will review best-practice models from other states for their applicability to Vermont’s residential care contractors. Additionally, providers of community based support services will be contractually required to address permanency issues within their scope of services.

SFY 2006 Update

Several contracted providers attended the two day Permanency Convening and joined district teams in developing local plans for achieving permanency for youth. More and more conversations regarding permanency are occurring between private and public partners. In addition, we have formed a working group with our residential and foster care providers to keep them informed about our practice priorities, and how they may impact contract expectations.

Goal PC4: Promote the importance of regular contact between social workers and the children and families they serve.

SFY 2005 Update

In November and December 2004 we conducted 9 Structured Decision Making trainings where we introduced our new social worker contact guidelines. All Family Services staff was required to attend training. Information about the importance of social worker contact and the correlation between such contact and positive outcomes was presented.

In addition, the policy emphasizes home visits as the preferable form of face-to-face contact, for both children and families. Visiting families in their own homes enables social workers to better assess safety and other factors that influence the decision to reunify. Visiting children in their own homes not only results in greater comfort for children, but also allows the worker to see the interaction between children and other family members.

The guidelines for social worker contact went out to DCF staff for comment in July 2004. The feedback was considered, some adjustments were made and the final product was reviewed and approved by our Deputy Commissioner. However, the Commissioners office requested a revision, which has not been completed yet. We added the requirement to assess social worker contact to the District Self Assessment as well as to the district review process. We have established a new benchmark date for this goal.

These guidelines reflect the importance of the relationship between social workers, children on their caseloads and their families in attaining permanency. The contact is organized by risk level, case type and placement of child and includes guidelines for contact by social workers and service providers.

SFY 2006 Update

Supervisors reviewed these guidelines again at one of their monthly meetings and again expressed concerns regarding worker's ability to meet these guidelines. We have not released the guidelines at this time however; we continue to discuss the research that reflects that frequent social worker contact contributed to successful outcome attainment.

Goal PC5: Ensure the meaningful involvement of children, mothers, fathers and resource families in development of initial and ongoing case plans and in case plan reviews.

SFY 2005 Update

The Quality Assurance Coordinator held 2 regional meetings for case reviewers in September 2004. Eleven reviewers attended the meetings. They offered suggestions for training new reviewers and we developed a phone and email tree so they can contact one another for networking and support.

The next New England Quality Assurance meeting in 2006 will be about the case review process. We are hoping to benefit from other states experiences before we begin to evaluate and redesign our system.

SFY 2006 Update

The QA position has been vacant since February 2006 and we have not made any progress on this goal. However, there was interesting information regarding several different case review processes presented at the last Annual States and Tribes meeting.

We anticipate this position will be filled before our next CFSR as this person will be an important player in preparing for the review. The administrative case review process evaluation and possible redesign will be a focus once this position is filled.

Goal PC6: Promote practice and training that will increase placement stability

SFY 2005 Update

We have identified all of the 2004 cases where children moved due to provider issues and provider reasons.

SFY 2006 Update

The Quality Assurance Coordinator conducted the case review and compiled a placement stability assessment in December 2005. A Placement Stability Workgroup was convened and met in January 2006 to review the assessment and determine next steps. We have not moved forward on this goal since the Quality Assurance Coordinator position became vacant in February 2006.

Relatives as Supports

Now, more than ever, child welfare agencies are recognizing the benefits of engaging relatives in helping families to create and maintain safe environments for children and/or to act as placement resources.

We have also realized that relatives can help us to achieve positive outcomes for children and families and have several components in our approach to Kinship Care.

- ✦ Kinship policy implemented on 9/17/03 emphasizes the importance of identifying families and individuals who may be appropriate to play a continuing positive role as a placement resource. This policy requires staff to take active steps to identify

a family's kinship resources and supports within 15 days of a child's initial removal *and* prior to a planned move to an unrelated resource family.

- ✦ District Reviews are measuring compliance with this policy. We made revisions to the case audit tool to include this indicator.
- ✦ Initial Screening Process includes an Ecomap to help identify relatives that can act as supports and/or placement resources. This happens within 30 days of custody.
- ✦ Initial Case Plan format implemented in January 2005 has questions that will trigger discussions about fathers and other family members. This will no doubt increase the number of conversations about kin between workers and families *and* between workers and supervisors. This, in turn, should result in at least the identification of relatives and possibly more relative placements.
- ✦ Breakthrough Series Collaborative is a methodology that brings new ways to recruit and retain resource families including foster, kinship and adoptive families. Each district has had a Breakthrough Series team for about almost a year now. While the use of kin varies from district to district only after a couple of months we saw increases in kinship placements.
- ✦ Kinship Focus Groups were held to discuss the challenges to identifying relatives as supports. Eleven relative caregivers and 27 staff offered feedback on the issues they face when children are placed with relatives. The clear message was that relative placements present different dynamics that stranger placements and social workers need to become educated about these dynamics and offer relatives training and support to maximize success. We've made good connections with leaders of several Relative Caregiver groups and have established partnerships to work on these difficult and important issues.

SFY 2006 Update

The Agency continues this focus kinship care in an effort to eliminate some of the barriers that exist. We participate in a Guardianship committee that was convened through Probate Court. This committee is looking at the legal and financial challenges guardianship can create.

We continue to participate on the Vermont Kin as Parents (VKAP) advisory committee helping to expand support groups, develop the annual conference and secure funding for a staff member so the organization can continue to evolve.

We are in the process of developing a Resource Guide for people who are caring for children who are not their own. This guide will list statewide and national resources in the following areas: legal, financial, child care, health, transportation and education.

VCORP/VFAFA Analysis

The Department of Children and Families, Family Services Division is conducting a comprehensive analysis of the statewide system of care for children and youth. This analysis is being undertaken in response to a request from the state's coalition of residential care providers and the statewide foster care association. The analysis will examine issues related to the identified treatment needs for children and youth in custody, and the capacity of the state's system of care to meet those needs. The work of this analysis is overseen by a steering committee comprised of DCF/FS management, representatives from DDMHS and DOE as well as members of the Vermont Coalition of Residential Care Providers (VCORP) and the Vermont Foster and Adoptive Families Association (VFAFA).

The group has met 7 times in the past year (beginning in November 05) and continues to meet on a monthly basis. The focus of the first several meetings was identifying an on-going agenda of "system of care" related issues to discuss and analyze.

Beginning with a review of the Vermont system of out-of-home care, the group spent considerable time analyzing the changes in response to treatment needs that the system has undergone in recent years. Additionally, data analysis of trends related to the numbers of children and youth accessing the out-of-home system of care have been discussed. More recently, the focus has included a comprehensive review of the treatment needs of those youth who are, or have recently been, referred for treatment to out-of-state providers.

The preliminary results of that work has yielded some surprising findings in that the profile of the children and youth served in out-of-state programs appears to be markedly different from those youth who were served out of state only a few years ago. While several years ago the "typical" profile of an out of state placement was that of a lower functioning/DD male with sexually reactive or sexual offending behaviors, today, the profile is that of an adolescent female with significant self-injurious behavior. Many of these young women have had multiple hospitalizations as a result of self-harm, and, have had multiple residential placements.

Future meetings will focus on what changes are necessary to Vermont's system of care to reduce the number of children and youth who are referred to out-of-state providers for treatment.

COURT COLLABORATION

Family Services has a long history of meaningful and productive collaboration with the Vermont Judiciary which includes identifying and working towards shared goals and activities.

Several forums provide us with opportunities to work together to identify issues, set goals and determine how we will work together to achieve improved outcomes.

One of which is the Justice for Children Task Force established by the Vermont Judiciary. This statewide multidisciplinary task force includes State and local courts as well as the Secretary of the Agency of Human Services and the Deputy Commissioner of Family Services. This task force has developed a strategic plan aimed at increasing safety, permanency and well-being of children in the child welfare system.

Below is an example of the collaboration between DCF & the Courts. We will establish common goals, measures and benchmarks together as the Court completes their annual report.

Justice for Children Task Force

In December 2006, the VT Supreme Court charged a Task Force to:

- Identify systemic barriers which contribute to a child remaining in foster care for a longer period than is necessary given the child's circumstances;
- Develop solutions designed to remove or reduce the impact of such barriers in a manner which ensures that the due process and other legal rights of all parties are respected and protected;
- Adopt performance standards to measure the effectiveness of judicial systemic changes once implemented; and
- Report back to the Supreme Court with recommendations regarding policy matters that are identified through their efforts.

Underlying the philosophy of the Task Force is the Court's position that it is only through the collaboration of the Court, the Department for Children and Families, State's Attorneys, the Defender General and the Attorney General's Office that children's rights to safety, permanence, and well being are met in a timely and complete manner. The DCF Commissioner and the Family Services Deputy Commissioner participate on the Task Force.

Connections Count / Permanency Convening

As described in detail on page 20, a two day Permanency Convening was held this past year to inspire DCF staff, judges and community partners to focus on the permanency needs of adolescents. Through the VT Judiciary, the VT Court Improvement Program was involved in the planning group and arranged for the Chief Justice to make the opening remarks. CIP arranged sponsorship for one of the keynote speakers, Judge Len Edwards, and sponsored a dinner between Judge Edwards and a dozen VT judges.

Approximately 17 representatives from the Judiciary, including 5 Probate Judges, 6 trial court judges, 2 justices, and three judiciary staff members attended the conference (the objective being a “call to action” to strengthen permanent connections for children aging out of foster care and to improve permanency planning for all children in foster care).

Dependency Mediation

DCF and the Judiciary have ongoing collaboration for a dependency mediation project. During FY06, a new court site was chosen for this project. There is a cost-sharing agreement between DCF and the Judiciary to cover the costs of mediation services.

Juvenile Case flow Time Standards project

DCF participates on the Judiciary’s Juvenile Case Flow Management Committee. The Deputy Commissioner of Family Services serves on this committee which will recommend to the VT Supreme Court time frames for reaching various court milestones in CHINS, delinquency, and TPR cases (time to initial disposition, time from TPR petition to TPR decision, time from removal to permanency hearing / reunification / permanent guardianship / adoption.

National Judicial Leadership Summit

Two DCF representatives joined the Judiciary’s team in Sept 2006 to attend this national summit. An “action plan” was submitted as a follow up to the Summit which identifies joint projects, such as data sharing and improved communication between the agency and courts.

Data sharing

The beginning steps of a collaborative process for merging certain DCF and court data records on children has begun. Personnel vacancies in the Judiciary’s IT department have put this project on hold. Court TPR reports are shared with DCF’s AAG’s office. This process will be automated if IT position is filled.

Increasing foster parents’ participation in permanency hearings

DCF and the Court jointly developed procedures for ensuring that foster parents receive notice of permanency hearings.

TPR options group

DCF’s AAG is working with the CAO to jointly identify practices that can be used in appropriate TPR cases where the parent's attorney legitimately thinks the parent’s rights will be terminated by the court. Under those circumstances, the delays of a contested TPR would not benefit the child and would be emotionally draining to the parent/client. An ad-hoc policy group will develop a flexible menu of options for parents that would allow a parent to extricate him/herself from a contested TPR stance with dignity. These

would inform some best practices around TPR litigation. "Best practice guidelines" will be implemented.

Collaboration on Federal Reviews

The Vermont Court Administrator and the CIP Manager attended the secondary IV-E Review exit meeting in May 2005 where we continued discussing systems to ensure compliance.

The CIP Manager joined us in Boston at the CFSR Region I meeting in July to learn about the second round of reviews and the expanded role of the Courts. Family court judges will learn about the April CFSR at their September Annual Family Court Training.

DILIGENT RECRUITMENT OF FOSTER AND ADOPTIVE HOMES

Vermont has been encouraging foster parent adoption for children who cannot return home for many years now. Throughout the 1980's and 90's, about 95% of the children freed for adoption in Vermont were adopted by their foster parents.

While this approach served most of our children very well, it left about 5% of them without the permanence they needed.

In 2000, the Vermont Department for Children and Families joined forces with the Lund Family Center (our state's oldest and largest private adoption agency) to address the permanency needs of legally-freed children with no identified permanent resources. With the help of a three-year federal grant, we created Project Family -- an innovative, collaborative approach to finding and supporting adoptive families. The project focused on creative strategies for finding families for long-waiting children. Now that the federal grant is over, we have secured state funding for this project.

In 2003, we received another federal grant to take what we've started to the next level. During the past year, we conducted a comprehensive market research study and developed a new recruitment strategy that integrates our current campaigns (one for foster care and one for adoptions) under one umbrella. Integrating our campaigns will allow us to offer families a full range of options for helping children in foster care, from a day to a lifetime -- all under one convenient, easily accessible program.

The most recent census reports that the Vermont population is 97% white. A check of our database reflects that 95% of the children in custody are white.

One of the main goals of the new grant was to develop a recruitment campaign that was based on solid market research. The first step therefore involved conducting extensive market research interviewing our current foster and adoptive families as well as Vermonters who have never been involved with the foster care system. The market research, which was conducted in the summer of 2004, included four focus groups and a written survey and provided us with some new and important insights including:

- Foster parents do not feel as valued or rewarded as adoptive parents on a cultural or community level.
- There is a perceived lack of support once a child is adopted versus remaining in the foster care system.
- The education and income levels of our foster and adoptive parents are above average for Vermont.
- 25% of our current foster and adoptive households are non-traditional households (e.g. civil union, life partner, or single).
- There is a surprising lack of knowledge about the need for more foster and adoptive parents among both the general public and those involved in the foster care system.

Brand Platform

Once the market research was complete, the next step was to work with our marketing company to revisit the Living Brand Platform that we had established in 2002 to position Project Family as a resource for the adoption of Vermont's legally freed children. A Brand Platform provides the foundation for a brand identity and critical guidance for making decisions that will affect internal and external audience perceptions. With the new grant, we had to revisit the Living Brand Platform based on our expanded mandate.

First, we created a Brand Trust comprised of key people associated with the program (e.g. foster parents, adoptive parents, social workers, resource coordinators, and adoption specialists) to ensure that all important points of view were represented and that broad buy-in was achieved.

Then, in the winter of 2004, our marketing company engaged the Brand Trust in a structured and disciplined process to develop our new Living Brand®. The end product is a conceptual and action-driven Brand Platform that guides all facets of brand communication. Based on what we learned from both the market research study and the Living Brand Platform process, we developed the following goals for our new campaign:

- To go beyond just recruitment to include leading a social movement to promote a positive view of foster care, respite care, and adoption.
- To help change the negative image of foster parents and children by using positive images of real adoptive children and families.
- To focus the campaign on that fact that there are many ways people can help children in foster care—from a day to a lifetime.

- To convey key messages using the actual words of current respite, foster, and adoptive parents.
- To provide people with detailed information about the process and the support available as well as the challenge and rewards of getting involved.
- To communicate openness of nontraditional households.
- To utilize the power of relationship marketing and “parent” ambassadors to influence the community and change the cultural perspective.

New Recruitment Campaign

One of the main goals of the new grant was to integrate Vermont’s two separate recruitment campaigns (one for foster care and one for adoption) under one umbrella, thereby allowing us to offer families the full range of ways they could help children in foster care under one convenient, easily accessible program. This was an important evolution for several reasons:

- Most children who become legally-freed for adoption in Vermont are adopted by their foster parents; this means that recruiting and licensing more foster parents equals recruiting more adoptive parents.
- Once people start helping children in foster care in some way (e.g. by providing respite care, foster care, or mentoring), social marketing research tells us that they are much more likely to take the next step and adopt a waiting child, because they already see themselves as people who are committed to helping children in foster care.
- People who have been involved in the foster care system are more likely to be successful when they adopt a waiting child because they know what to expect and are familiar with the system, the children, and the supports and services that are available.
- Asking people who have never been involved in the foster care system to adopt an older child is asking a lot. Offering them other ways to help gives them a place to start.

Our new recruitment campaign was launched in June of 2005. The recruitment materials produced were based on what we learned through both the market research study and the living brand process.

The new recruitment materials include a project family folder; a general brochure; fact sheets on the three main options including providing respite, providing foster care, and adopting a legally-freed child; a new integrated website; business papers including Project Family letterhead, business cards for staff, and referral cards for resource

parents to hand out; brochure holders to be placed in public places throughout communities.

Media relations materials included four print PSA's, two radio PSA's, one television PSA, and two press releases to launch the campaign.

Marketing materials included the productions of eight tri-fold tabletop displays and the reproduction of seven large photos (20" x 30") of the families used in the recruitment campaign for use at trade shows and community events; 5,000 PF posters; 20,000 fridge magnets; 100 large Project Family car magnets for staff & fleet cars; Project Family water bottles for foster and adoptive parents; 500 small car decals "proud foster /adoptive parent"; 500 tote bags for volunteers and ambassadors.

Project Family materials can be viewed at: <http://www.projectfamilyvt.org/>

Diligent Recruitment Goals

Goal DR1: Increase the number of resource families available to care for children in custody (foster and adoptive families) through improved recruitment and retention.

SFY 2006 Update

The next step in our grant involves hiring five family recruiters to work in communities throughout the state and producing promotional materials to support their activities. A recruitment team including the five family recruiters, the Co-Directors of Project Family, and staff from both the Lund Family Center and DCF will meet monthly to discuss issues, share information, and plan events.

Goal DR2: Ensure that families who have adopted children from DCF receive a timely, respectful response when they need post-adoption assistance.

SFY 2005 Update

A steering committee comprised of DDMHS, DCF/FS, and Adoption Consortium members was formed to strategize ways to meet the needs of adoptive families who were experiencing difficulties accessing services. It was determined that all children and youth soon to be adopted would be referred to Local Interagency Teams (LIT's) for the purpose of developing a Coordinated Services Plan. Additionally, Consortium members were identified as LIT participants (previously they were not) and are now included in LIT meetings where an adoptive/pre-adoptive child's case is being staffed.

The Adoption Consortium in collaboration with the DCF/FS Adoption Unit has completed an "Adoption Handbook" which is available in both print and electronic editions.

SFY 2006 Update

The Vermont Adoption Consortium has identified a member to participate on local interagency planning teams for adopted children. Each district office has a consortium person for consultation and planning when families with adopted children request intervention.

In addition, the Division has made many changes in its delivery of adoption services. We have moved away from a small central unit to serve the state towards making each child's worker the permanency/adoption worker. The Department has also allocated 1FTE to post adoption services. This position is in process of reclassification from a social worker to a post adoption specialist.

The person that fills this position must be well experienced as a social worker in the areas of permanency and adoptive family development. The job includes: receiving requests from adoptive parents, renegotiation of the adoption subsidy agreement if needed, researching community supports, making referrals as appropriate, attending Local or State Interagency team meetings in unusual or difficult situations and connecting families to the Vermont Adoption Consortium. This position is also responsible to sit on the general member board of the adoption Consortium. The Adoption Chief continues to sit on the executive board and development of services board of the adoption consortium. The Chief also continues to attend to Fair Hearings at the Human Services Board when complaints cannot be resolved.

ICWA

Vermont does not have a federally recognized Indian Tribe within its borders. The department promulgated policy regarding compliance with the Indian Child Welfare Act on 9/8/98.

Vermont's adoption statute also supports compliance with the Indian Child Welfare Act. Adoptive parents must disclose a child's membership in a tribe when they file a petition to adopt.

In September 2005 we automated a new initial case plan format which requires workers to address identity and location of all parents and specifically note if the child has Native American heritage.

ADOPTION PROMOTION AND SUPPORT

Casework and Finalization Services

Adoption services focus on children in custody. For many years, Vermont has had a very high rate of foster parent adoption, with most of the children adopted being adopted by their foster parents.

With the availability of the resources of Project Family, the decentralization of the adoption unit and the development of the Permanency Team, DCF social workers are shifting emphasis towards engaging families in permanency option discussions when children enter custody and throughout the life of the case.

The main office adoption manager continues to provide overall program management and policy development for the adoption program, manages the adoption subsidy program, post-adoption services and the adoption registry. Her unit also conducts background checks on all household members age sixteen or older for pre adoptive families if the previous checks are over one year old.

Criminal Background Checks

The Residential Care Licensing Unit obtains the background checks during the licensing or approval process. In addition the adoption assistants obtain the same checks for adopting parents prior to finalization if it has been more than one year since they were last obtained.

These checks include: VT Crime Information Center; Child Abuse Registry; Dept. of Motor Vehicles; Relief from Abuse; VT Adult Abuse Registry; Dept. of Corrections; and VT Courts. For children under the age of sixteen we only check the Child Abuse Registry.

This activity is directed by Family Services Policy #222 and can be found on our public website at <http://www.dcf.state.vt.us/fsd/policy/222.html>.

Adoption Subsidy

The adoption subsidy is administered centrally and at the time of this report serves approximately 1406 children. This program continues to grow, both in numbers served as well as the average cost per subsidy.

Adoption subsidies are available for children in custody who have a special need that make it unlikely that any family would adopt the child without the subsidy. Also, children who are SSI eligible are eligible for adoption subsidy. While most children in custody qualify for an adoption subsidy, not all families will necessarily receive a monthly maintenance payment. The needs of the child and the ability of the adoptive family to meet those needs are taken into consideration.

Adoption Permanency Supports

For a number of years, we have used IV-B Subpart II funds to provide post-adoption services, contracting with agencies around the state. We currently have contracts with eight agencies. Consistent with the Intercountry Adoption Act of 2000, post-adoption services are available to any family needing them, not just children adopted through

DCF. Post-adoption services for children formerly in custody are funded primarily by Medicaid under the Rehabilitation Option.

Family Services have also benefited from an Adoption Opportunities grant. With funds awarded starting in 1998, DCF and Casey Family Services formed a post-adoption consortium. The consortium continues its work after the conclusion of the grant. The Vermont Post-Adoption Consortium comprised of agencies and groups from around the state that have joined together for a common purpose: to support Vermont's adoptive families. The Consortium's goals are to:

1. Help families further their knowledge of topics related to adoption.
2. Build the capacity of professionals, including educators, social workers, case managers, and therapists to address adoption-related issues.
3. Provide adoptive families with access to quality adoption support services.

Post adoption services are listed in the Casey Family Newsletters and on the DCF website. Services available to adoptive families in Vermont can include:

- Information and referral
- Advocacy and assistance with school and community issues
- Support and discussion groups
- Reading and other educational materials
- Respite services
- Counseling
- Intensive supports

The unique value of the Consortium is that it brings together agencies and individuals from around the state who have experience and expertise working with adoptive families. This enables families to make informed decisions regarding services and supports. The Consortium was able to secure state general funds this year to continue their work.

Adoption Incentive Payment

An FY 2005 Adoption Incentive Payment was used to support domestic violence services, adopt and post adopt services and strategies to enhance family engagement.

Inter-Country Adoptions

Vermont had no children who were adopted from other countries enter State custody in FY 2006.

YOUTH JUSTICE UNIT

In addition to child protection and child welfare services, the department delivers youth justice services. Youth in custody as delinquents are placed in the Commissioner's custody. In addition, youth on juvenile probation are supervised by DCF social workers. Child protection, child welfare and youth justice services are consolidated and integrated in the state. In general, the same staff, the same service providers and the same placement resources serve all of our populations. This is strength of our system, but also creates special challenges.

In 2002, the Vermont Legislature established a Juvenile Justice Commission consisting of the Commissioner of Corrections, the Commissioner of DCF and the Director of Juvenile Justice. The goal of the Commission is to improve the quality and coordination of youth justice services in the state.

The work of the Commission and the agency reorganization led to the creation of a Youth Justice Unit within the newly formed DCF. This unit is part of the Family Services Division. The roles and responsibilities identified for the unit were based, in part, on the legislative charge to the Juvenile Justice Commission: to monitor and coordinate all state and participating regional and local programs that deal with juvenile justice issues, including prevention, education, enforcement, adjudication and rehabilitation. As part of Family Services, the Youth Justice Unit provides policy, training, and casework practice focus within the Division, and the Director of Youth Justice oversees Woodside, the State's 30 bed secure juvenile center.

Current and planned activities of the Youth Justice Unit include the further development of alternatives to detention; system study of adult and juvenile court jurisdiction; new policy and practice guidelines for the supervision of probation; improvement in physical environment, quality assurance and programming at the secure juvenile center; consulting on the development of juvenile drug courts; IT improvements; oversight of the administration of Juvenile Justice Delinquency Prevention (JJDP) and Juvenile Accountability Block Grant (JABG) funds; continued development and management of Balanced and Restorative Justice programs that serve DCF youth who have been adjudicated delinquent.

Children who are transferred to the Youth Justice System

In Vermont, Family Services is both the child protection system and the State juvenile justice system, so no children or youth are transferred from one system to the other.

If, due to the commission of a delinquent act, a case type changes from custody for abuse and/or neglect to a custody for delinquency, the child is likely, in most districts, to continue to have the same caseworker and will have the same case plan with delinquency related factors added. The Youth Justice system's philosophy of rehabilitation, family work, balanced and restorative justice and, for those in custody, permanency is not separable from the philosophy of the Child Welfare system.

In SFY 2006, 58 children who were in custody for either child abuse/neglect or because they were beyond the control of their parents were adjudicated delinquent.

Youth Justice Goals

Goal YJ1: Improve screening, assessment, and treatment capacity for children and families with substance abuse and/or mental health issues through collaboration with the Department of Health and through implementation of the Youth and Family Integrated Treatment Practice Guidelines

SFY 2005 Update

During the summer of 2004, statewide stakeholders met and together developed standardized principles for the practice of Integrated Treatment of substance abuse and mental health issues for youth and families.

Further work needs to be done to apply the principles to existing programs; monitor pilots on universal screening and expand projects with information gained from evaluation; further explore collaborations with the Department of Health to improve services for youth and families with mental health and/or substance abuse issues.

SFY 2006 Update

In May of this year, Family Services began collaboration with Alcohol Drug Abuse Prevention (ADAP) under the new Certified Substance Abuse Treatment (CSAT) grant that ADAP received to boost infrastructure for the statewide adolescent substance abuse system.

Under this grant, ADAP will be disseminating the Youth and Family Integrated Treatment Practice Guidelines to their current provider network and will be requiring new sub grantees under their CSAT grant to adhere to the guidelines. In addition, ADAP will also be working with Family Services to improve the referral process to substance abuse assessment and treatment for youth connected with Family Services.

Goal YJ2: Develop approach to assessment of risk and service needs for Youth Justice clients that is integrated with other structured decision-making tools for children and families served by the department.

SFY 2005 Update

The newly formed Youth Justice Unit has focused on reviewing the work of the Commission to determine an appropriate direction. Currently they are working on Youth Justice policies, Balanced and Restorative Justice (BARJ) principles and practices and data collection.

SFY 2006 Update

Family Services will be contracting with a provider to develop a Detention Screening Tool and a Risk and Needs Assessment Tool for youth with a delinquency charge. The data will be integrated into the Family Services MIS to allow for operational and management reporting in conjunction with other Family Services assessment tools. We are on schedule to contract with a provider early in FY07, and have the screening and assessment tools online by FY08.

Goal YJ3: Promote excellence in practice of Balanced and Restorative Justice (BARJ) principles and programs by continuous quality improvement in implementation and collaboration

SFY 2005 Update

During the summer of 2004, statewide stakeholders met to develop standardized BARJ principles and practices. In the spring of 2005, these standards were agreed upon by the statewide BARJ steering committee.

Further work needs to be done to review current BARJ practices; develop a curriculum; improve data gathering, communication and collaboration; and monitor outcomes.

SFY 2006 Update

Currently, the Youth Justice Specialist is focusing on developing relationships with all of the BARJ directors and districts that they serve. She holds regional meetings to discuss systems, utilization, successful practices and challenges.

She attended the June supervisors meeting to discuss this role and to offer her support and expertise to the field. This will lead to developing common systems, expectations and outcomes.

CHAFEE FOSTER CARE INDEPENDENT PROGRAM

Population Served

DCF Family Services provides services to prepare youth for adult living through a statewide network of contracted youth serving agencies with a minimum of 1 FTE in each district. This service, called the Youth Development Program, has been in existence for over 12 years. In SFY 06, approximately 950 youth were screened by the program, 750 of whom received some form of direct services. Screening is conducted by administration of the Ansell-Casey Life Skills Assessment as part of the SDM screening process (see 2006 APSR, p. 12) and as part of the intake to the Youth Development Program. The timing of the life skills screening was adjusted to 14 to match the guidelines for IDEA (see APSR June, 2005 p. 20). Screening numbers are greater than those receiving services as screening is done on all youth 14 or older (upon entering custody). Not all youth screened through SDM are immediately referred to the Youth Development Program as the emphasis is on older youth.

Some youth refuse services at the initial screening and contact. It is our experience in the program that many of these youth later return, seek out, and benefit from services. This is particularly true now that we provide services until age 21.

Administration

Vermont has continued to administer its Chafee Foster Care Independence funded Youth Development Program through its Central office during FFY 2006. Basic program components remain the same as in the previous APSR. Responsibility for program oversight and management has remained with the DCF Director of Program Management in partnership with district department management. This has been a transition year in that it has become increasingly clear the current structure does not provide sufficient management and oversight to maximize utilization, insure program quality, and achieve youth outcomes consistently.

To address this issue, DCF Family Services has hired a full-time contracted State Youth Development Coordinator (effective 10/1/06) supervised by a member of the Program Management Unit. Details of this change and expected outcomes are covered in the goals section of the Chafee update. (*new in 2007)

Youth Development Program Services

Vermont's Youth Development Program has continued to provide services similar to those described in the 2006 APSR. A more specific description of how those services are applied to meet the requirements of the Act is provided in the following section.

Dependency to Self-sufficiency

Youth Development Coordinators working with youth help them to achieve self-sufficiency through: 1. A formal assessment of life skills preparation, 2. The delivery of curriculum based life skills training and 3. Applying these skills in community based, real world situations (e.g. budgeting, shopping, meal planning, apartment hunting, accessing transportation, healthcare and recreation). **(PI. p.6-7 #1)**

Education, training and services for employment

In addition to providing direct training to youth, Youth Development Coordinators maintain working relationships with local providers of other state and federally funded programs (DCF Family Services-TANF funded Reach-Up Program, Ticket to Work, Dept. of Labor- Workforce Investment Boards supported employment programs, Vermont Youth Conservation Corps, Dept. of Aging and Independent Living-Voc Rehab Transition Counselors, Local School Based Core Transition Teams, Community Mental Health Center run JOBS programs for EBD youth) as well as local private sector employers to assist youth in preparing for and entering the workforce. **(PI 06-03 p. 7, #2)**

Helping youth prepare for and enter post-secondary training and educational institutions

Youth Development Coordinators help youth succeed in secondary school through advocacy for career preparation with local schools, IEP transition planning, and the development of alternative curriculums to help youth achieve traditional high school completion diplomas.

In addition to helping youth succeed in and complete secondary school education and training, YD Coordinators have strong connections with local Vermont Student Assistance Corporation (VSAC) outreach counselors who provide career guidance and access to funding for youth pursuing education and training. The state director of VSAC outreach meets annually with the YD Coordinators and VSAC always has booth at the resource fair at our annual statewide youth conference.

Northlands Job Corps, part of the national network of Job Corps centers, provides an important opportunity for employment preparation regardless of high school graduation status. Individual Youth Development Coordinators have solid working relationships with the Job Corps and the YD Coordinators Network meets at least once annually at the Center to familiarize staff. Job Corps also has a booth at the annual youth conference resource fair each year.

YD Coordinators also maintain strong working relationships with local sites of the Community College of Vermont (CCV) which are located within 30 miles of every location in the state. CCV and the state college system of Vermont has a strong commitment to serving current and former foster youth and targets them for non-degree scholarship funds (as a means to further explore and prepare for college) and TRIO funded programs like Gear Up (for junior high youth) and Upward Bound for high school ages. Data on access and patterns of utilization of these educational efforts needs to be collected to assess equity and insure we are maximizing these opportunities for youth in care. (See SFY 07 YD6 Goal) **(PI 06-03, p. 7 #3)**

Provision of financial, housing, counseling, employment, education and other support and services to youth 18-21

The Youth Development Program has been providing the full range of services in the program to this age group since eligibility was expanded by the Foster Care Independence Act of 1999 (see APSR, June, 2005, p.18). This includes the services listed in the previous sections as well as the Community Housing Support Program described in detail in the June, 2005 APSR p. 26-28. \$65,000 in housing support funds were disbursed to and for youth up to age 21 during FFY 06. This reflects an increase from the projection of \$58,000 from last year. As part of the Youth in Transition Initiative, additional funds are being requested from the legislature to expand this resource. At this time exact figures have not been determined.

Youth Development Coordinators Network

SFY 2005 Update

2005 report outlined a list of new and existing initiatives to expand training for DCF staff in youth development areas including social worker competency training developed in coordination with the University of Southern Maine. This training has been discontinued due to limited participation and the fact that all three of the trainers no longer work in the program.

The activities listed in the June, 2005 APSR on p. 20 as being pursued by the YD Network have continued with the exception of development of training curriculums (see previous paragraph) and the continuation of quarterly regional meetings for youth governance. Program turnover and sporadic participation by some individuals in the network limited the impact of youth governance meetings to regions with committed staff. This effort was not sufficient to our needs and has been replaced with a new initiative. (See Youth Development Committee, p.38)

In some districts, Youth Development Coordinators have partnered with youth in providing training to foster parents and DCF staff. This is a limited effort at this time and is funded through state funded elements of the program.

While these activities have been characterized as on-going efforts, it is clear that adjustments will need to be made to address the inconsistency of participation by different districts.

SFY 2006 Update

Collaboration

Following submission of the 2005 APSR, the Vermont Agency of Human Services, with the support of the Governor, established a cross agency study committee to examine the issues of foster youth entering adulthood and the resources needed to help more youth make the transition successfully. While the attention paid to this area was very welcome, the time required for participation by program staff and managers in the three study groups and related activities made it necessary to suspend efforts to impact on the efforts of the network and district programming.

The next section summarizes the elements and results to date of the Governor's Youth in Transition Initiative for SFY 2006.

Agency of Human Services Youth in Transition Study Group

There has also been increased attention placed by the larger Agency of Human Services in the last year on issues facing youth in care aging out and ending up in the adult corrections system.

Agency of Human Services Secretary Michael Smith recently (8/05) established a cross agency study committee to examine the issues of youth entering adulthood, the services in place to address those issues and areas where services are unavailable, or ineffective.

Governor's Youth Summit

Since last year's report there has been substantial increase in attention paid to youth in transition. Following the establishment of the Youth in Transition Study Group, then Secretary Mike Smith, attended a Governor's meeting on youth in transition and was so appalled by what was described as the fate of many youth in care nationally that he spearheaded a campaign to establish a governor's task force on the issue. A convening of current and former youth in care was held at that state house, attended by the governor, lieutenant governor, chief justice of the Vermont Supreme Court, legislators and over 100 youth.

Youth met in focus groups with state officials and talked about the challenges facing them and what should be done to help address them. The summit was the beginning of a much larger initiative that has included three broad based task forces and legislation.

H-168 and the Youth in Transition Task Forces

Three task forces were created as a result of the Governor's Youth in Transition Initiative, the primary Youth in Transition group charged with conducting a broad review of the needs of youth leaving the foster care system and the services required to meet those needs; a second group looking at post-secondary education and training needs of foster youth, and the third a review of how the court system could be improved to help support youth in transition.

Legislation mirroring the goals of these three groups was passed by the legislature calling for comprehensive reports and recommendations to the legislature by January, 2007 (H-168). In addition to these broad areas of exploration, the legislation called for a detailed review and recommendations of the issue of medical coverage through the Medicaid program for youth exiting care. The report has been completed, submitted to the Governor and approved for inclusion as an attachment to this report. **(PI, p. 5 #2)**

Youth Development Committee

In February, 2006, DCF hired a Youth Development Liaison (a former custody youth) to partner with us in the development of an on-going youth advocacy effort. The Youth Development Committee was created. The founding members attended training at the Destination Future Conference, Chevy Chase, MD, August, 2006. The YD Committee has been meeting monthly since that time with the support of the contracted State Youth Development Coordinator.

The group has sought technical assistance and is receiving training from the National Resource Center for Youth Development on youth advocacy. (February 26-27, 2007).

The group is also working on a plan to provide youth input to the CFSR and the Permanency Convening happening in late spring or early summer, 2007. Two regional focus groups have been held in preparation for the CFSR with 50 youth participating. The Youth Development Committee will continue to provide input and partnership to department policy and program efforts along with helping us access broad based youth input. Funding for the YD Liaison position and the activities of the Committee will continue. **(PI, p. 7, bullet 5, Goal YD 3)**

FFY 07 GOALS/STRATEGIES

Goal YD1:

**Comprehensive Program Oversight and Accountability
Including fiscal accountability, data reporting and analysis, contract compliance
for providers.**

YD1 Strategy

DCF has assigned a staff person in the Program Management Unit responsible for compiling, reviewing, and responding to trends and issues related to the provision of this service including program quality, utilization, outcomes, and financial compliance of providers. The Program Manager for the Youth Development Program will be responsible for working with our IT staff on the development of the Chafee data outcome measures.

YD1 Indicators

Success of this effort will be measured by consistent reporting and collection of utilization data, financial reports, outcome data, and application of program components required by contract.

Goal YD2:

**Delivery of high quality, best practice youth development services to the
maximum number of eligible youth.**

YD2 Strategy

In order to provide these resources, DCF Family Services has hired a contracted full-time staff person to provide technical support for best practices, provide training and orientation for new program staff, monitor program activities, supervise the Youth Development Liaison, and support and train the Youth Development Committee (see Goal YD3).

YD2 Indicators

Improved retention rates for local Youth Development Coordinators, more consistent programming, application of Youth Development principles in services, better access and integration of Youth Development services with other activities for youth (Dept. of Labor, TANF, secondary and post-secondary education and training)

Goal YD3:

Establishment of a statewide youth advisory group of current and former foster youth to inform policy, practice, and service delivery by DCF Family Services as part of the CFSR and for on-going work with youth.

YD3 Strategy

Recruit, train, and support the Youth Development Committee (YDC) to participate in the planning and implementation of the CFSR and review of policy and services. YDC has hired a former youth in care to lead the committee's work in coordination with the State Youth Development Coordinator.

DCF Family Services has sought technical assistance from the NRC for the Youth Development. The NRC will be providing support and on-site training here in Vermont in February, 2007 to our Youth Development Committee members designed to prepare the committee members to guide other current and former foster youth in the CSFR process and other advocacy efforts for the Governor's Youth in Transition Initiative and to inform services and practice.

YD3 Indicators

Impact of this initiative will be measured by the number and distribution of current and former foster youth involved in advocacy efforts and the impacts of those activities on specific services, policies, and outcomes. Specifically, it will result in significant numbers of youth statewide participating in both the CFSR process and on-going advocacy efforts regionally and on a statewide basis.

Goal YD4:

Incorporation of Permanent Connections work in CFCIP Youth Development Program

SFY 05 Training for all Youth Development Coordinators on Permanent Connections work

SFY 06 Adding Genograms and Eco-maps to the intake process of Youth Development Program

YD4 Strategy

SFY 07 Repeat training on permanent connections work for all coordinators hired after SFY 05.

Provide program technical support for direct connections work for YD coordinators by the State YD Coordinator

- Track number of districts practicing connections work
- Track number of youth receiving this

- Track case specific outcomes related to this effort
- Track distribution of efforts and cross fertilize areas of weak performance from areas of strength

YD4 Indicators

Youth in all districts will have access to permanency efforts from trained YD staff
 Youth in all districts will have this experience to support their efforts toward adulthood

YD5 Goal:

Continuation and expansion of youth housing support efforts

YD5 Strategies

Increased funding for CFCIP Independent Living Housing Program
 Expansion of funding support for foster care up to age 22

YD5 Indicators

Youth in all twelve districts will be accessing housing support funds through the Youth Development Program
 Funds to support the Chafee Housing program will be increased through the Governor's Initiative and expansion of foster care funds through age 21

*Vermont spends the entire \$500,000 small state grant as part of the funds for the on providing the basic services of the Youth Development Program statewide.

Room and board funds for the housing support component are provided from the additional \$282,032 (SFY 06) in state funds allocated to the program. During FFY 2006, \$65,000 in state funds was spent to support housing for former foster youth.

Educational Training and Vouchers Program

YD6 Goal

Improve preparation and access for current and former foster youth to post-secondary education and training.

YD6 Strategy

Establish data reporting and tracking system for foster youth accessing post-secondary preparation and training funds.

YD6 Indicators

Outreach, follow-through and retention of youth accessing Chafee ETV funds will be identified and tracked by program, region and statewide to improve program outcomes.

SFY 05

Vermont's ETV funds are being administered prospectively so that they are included in the youth's overall financial aid package. We do not have a trust fund. In addition to the Chafee ETV Program, Vermont has a small grant program established by the Legislature in honor of its sponsor Emily Lester which can provide up to \$5,000 per year per youth from a small pool of \$23,000 per year.

ETV Funds Distribution

State Fiscal Year	New participants	Continuing participants	Total Participants	Total funds expended
FFY 05	34	12	46	\$118,187
FFY 06	37	19	56	\$79,278
FFY 07*	13	13	26	\$114,390

***Projections for FFY 07:** Assumptions underlying FFY 07 projections are:

- % of new and ongoing for FFY 07 = historical pattern 66% of total # awarded actually disbursed;
- \$ disbursed = historical 93% of total funds awarded actually disbursed

Program Budget

The Youth Development Program budget is comprised primarily of funds to support youth development positions in each of the twelve regions of Vermont. The bulk of the contract funds for each district are allocated to personnel costs (14.5 FTE / averaging \$45,000 per FTE including all admin costs, program materials, mileage, phone, etc). Housing support funds are held centrally (as noted before) other central costs of training, youth conference are small and also administered centrally.

Financial Reporting

Program Expenditures	FFY04	FFY 05	FFY 06
Program Grants	\$642,790	\$682,032	\$682,032
Housing support funds	\$ 45,000	\$58,000	\$ 65,000
Central office functions*	<u>\$ 17,750</u>	<u>\$18,500</u>	<u>\$ 24,000</u>
Total	\$705,540	\$758,532	\$771,032

*Annual youth conference, contracted staff training, support of youth advocacy

Budget for Chafee Foster Care Independence FFY 2007

VT IV-E Transitional Independent Living Program October 1, 2006 – September 30, 2007	
12 District Contracts for Youth Development	\$738,032*
* dollar amount contained in initial report did not include statewide coordinator position	
Youth Activities (teen advisory board, youth conference, local youth projects)	\$12,000
Central Administrative Support (training, program evaluation, youth assessment)	\$10,000
Community Living Housing Support	\$68,000
Total	\$828,032
IV-E Federal Grant/Match Funds	
IV-E Small State Minimum Allocation	\$500,000
*State General Fund Direct Program Expenditures	\$330,032
Total	\$830,032

- State general fund is department money applied directly to the operating costs of the program.

STAFF DEVELOPMENT AND TRAINING PLAN

The Department's Human Resources Development Unit (HRD) is responsible for the development and delivery of comprehensive education and training programs for agency staff and foster/adoptive parents. This is accomplished in collaboration with the University of Vermont (UVM) Department of Social Work through our Child Welfare Training Partnership (CWTP). Additional training for agency staff is developed and provided through the Agency of Human Services Department for Children and Families new Human Resources Division and through the State of Vermont Department of Human Resources Cyprian Learning Center.

Training for staff includes both a long-term and short-term components.

Long-term Training

Our Child Welfare Training Partnership with UVM supports up to five current child welfare workers/supervisors and up to five potential employees to obtain a Master or Bachelor of Social Work degree at UVM each year. Employees are selected based on experience in public child welfare, job performance and commitment to children and families. They contract to work for the Department for 2-4 years following graduation, depending on the level of support provided. Potential employees are selected from a pool of applicants accepted into the MSW/BSW programs based on their work experience and suitability for and commitment to public child welfare work. They contract to work for the Department for 3 years following graduation.

Bachelor of Social Work Program

Trainees must complete the first two years of their Bachelor's degree to be eligible for participation. This includes most of the General Education courses required by UVM.

Trainees receive in-state tuition and fees while they take the child and family series of courses in the second two years of the BSW program, as well as a small reimbursement for books and a living stipend. The BSW Social Work curriculum prepares students for generalist social work practice. Social work theory, knowledge, values and skills are taught through classroom and community field experiences. The field experience occurs under the supervision of an MSW level child welfare professional in the Department. Field instructors receive training and support from UVM staff as well as compensation for their time and efforts.

All BSW trainees are required to enroll in the course SWSS 200 Practice: Child Protection, Family and Youth Services during the fall semester of their junior or senior year. BSW trainees are required to complete a minimum of nine credits (3 of which must be SWSS 224: Child Abuse and Neglect), which will enhance the trainee's understanding of child welfare related issues. Some examples of approved courses include courses focused on youth and delinquency (SOC 214), child psychology (PSYC 265, EDEC 63), crime (SOC 115, SOC 118, SOC 217) and chemical dependency (PSYC 259).

Every trainee in the BSW program is required to satisfactorily complete 12 credits in field education, which are tailored toward professional practice in child welfare. Child welfare trainees without prior DCF experience complete their senior year field practicum in a DCF district office under the supervision of a practicing MSW child welfare professional. BSW students who are DCF employees will embark on the BSW student field readiness assessment which determines whether these employee trainees will do their senior field practicum in a DCF district office or in another community based child and family centered agency.

Master of Social Work Program

MSW Trainees follow the typical course enrollment for the MSW program. They are required to take specific electives and engage in field work relevant to working with children and families. MSW Child Welfare Trainees are required to enroll in the course SWSS 224: Child Abuse and Neglect as their first year elective. Advanced standing MSW trainees must take Child Abuse and Neglect in the fall semester prior to the spring in which they begin the MSW program full time.

All MSW students select a practice concentration at the end of the foundation year. Trainees are required to select the Social Work with Children and Families practice concentration with course and fieldwork geared toward working with children and families in a child welfare setting. Selection of this practice concentration does not preclude a student from enrolling in health and mental health-related course work.

MSW trainees must enroll in advanced elective courses that are approved by the faculty advisor and related to child welfare work. Students and faculty advisors collaborate to select appropriate advanced year electives during the spring semester of the foundation year. Often students choose to complete these electives in the summer session. Trainees are provided with tuition, fees and book reimbursement to take up to six credits of approved summer session courses.

MSW trainees must complete the analytical paper/portfolio requirement. For those students who choose to complete an analytical paper, an extra copy of the paper must be submitted to the Project Coordinator at the Department of Social Work. These copies are shared with the Human Resource Development Unit at DCF. In previous years, DCF management and staff have found the papers to be helpful to their work. Students who select the portfolio option are not required to share a copy of their work with the project.

Every trainee in the MSW program is required to satisfactorily complete 12 credits in field education, which are tailored toward professional practice in child welfare. Child Welfare Trainees without prior DCF experience complete their concentration year field practicum in a DCF district office under the supervision of a practicing MSW child welfare professional.

MSW students who are DCF employees complete their foundation field education at other agencies, which provide services to children and families. Concentration year placements take into consideration a student's strengths and interests in working with children and families.

Students must be in field practicum 225-300 hours per semester in order to receive a grade. Exact hours required per week are negotiated with the Field Instructor. Students placed at DCF typically complete 20 hours per week in the field.

Short-term Training

Over the past year, the Child Welfare Training Partnership (CWTP) has partnered with representatives from all levels of the Family Services Division (FSD) to redesign the professional development program. After completing a Training System Self-Assessment based on the Maine “Training System Assessment Guide for Child Welfare Agencies” (Kanak, Maciolek, O’Brien 2005), we set a goal to develop a comprehensive professional development program which:

- integrates divisional mission, policy, quality assurance and program improvement processes;
- meets departmental needs for regional training available throughout the year;
- provides opportunities for teams to be trained with their supervisors in best and emerging practices, so that supervisors can support workers to implement skills and knowledge in their practice;
- utilizes various delivery methods, including videos, interactive internet-based, interactive television, formal mentoring relationships and workshops;
- focuses on building specific skills for engaging, assessing, planning, implementing, monitoring and closure with clients;
- builds system capacity through mentoring and leadership development; and
- progresses from basic orientation through core skills/knowledge to advanced practice in child welfare and youth justice.

All professional development activities are guided by the FSD Core Practice Principles outlined below.

The Family Services Division of the Department for Children and Families partners with families and the community to promote safety, well-being and permanency for children.

SAFETY

Children are safe from abuse

- Keeping children safe is our primary concern and we address it in every intervention, every plan and every contact. Child safety is a collaborative effort; we engage families and community members to find safe solutions for children.
- We ensure ongoing safety through frequent meaningful contact with children and their caregivers.

PERMANENCY

Children have enduring relationships with healthy nurturing families

- Permanency planning for children is considered at every stage of decision making. We utilize information gathered in the initial screening process to identify potential resources for children when they first enter custody and facilitated case consultations throughout the case to identify and discuss permanency options.
- When children can not live safely with their families, the first consideration for placement will be with kinship connections capable of providing a safe and nurturing home.
- Life-long connections are critical for children. We will strive to promote and preserve family, kinship, sibling and community connections for each child.
- Permanency is best achieved through a legal relationship such as custody, guardianship, or adoption.

WELL-BEING

Children are successful in family, school and community

- We recognize that all families have strengths and deserve a voice in decisions regarding their children. We serve families from diverse backgrounds in a responsive manner.
- Family members and state and community partnerships are engaged to inform case planning and service delivery to maximize the opportunities for success.
- Casework practice is informed by strengths based assessments and research findings pertinent to critical questions and situations addressed each day in deciding what the best intervention is for a children and families.

LAW ABIDANCE

Youth are free from criminal behavior

- Youth on probation receive professional and consistent services based on best practice; customer service; holistic and collaborative family-based approaches; principles of strength-based assessment; balanced and restorative justice and progressive responses.
- We are committed to work in partnership with communities and families to improve community safety by decreasing risk; to provide supervision levels that are commensurate with risk; and to match placement and services to meet the needs of families and youth.

STAFF SUPPORT AND DEVELOPMENT

Staff are supported, valued and receive ongoing training

- We are responsible for creating and maintaining a supportive working and learning environment with open communication and accountability at all levels.
- Our staff is our most important asset. Children and families deserve trained skillful staff to engage and assist them. Our training focuses on building specific skills for engaging, assessing, planning, monitoring plans and creating permanency.

Professional Development

Our proposal for professional development over the next year includes:

- Orientation Manual for New Employees and their Supervisors
- Expanded NEST (New Employee Service Training)
- Reduced required core workshops
- Regular training in each district

Orientation Manual

A workgroup of FSD and CWTP employees has met regularly over the past year to research and develop a manual designed to assist supervisors to orient, train and support new employees using a wide variety of approaches. The manual outlines a structured program of reading, shadowing exercises, interviewing activities, self reflective activities, review of policy and statutes and so on. It provides a structured on-the-job training program which links with the New Employee Service Training (NEST) and the core training program. A draft is currently ready to pilot in districts.

New Employee Service Training (NEST)

Nest has been expanded by two days, and structured somewhat differently. New employees will spend three 4-day blocks of time in classroom training once a month, separated by time spent in on the job training. Nest will continue to be offered twice annually.

All components of NEST are delivered to current child welfare workers within their first six months of hire in a formal classroom setting. Trainees additionally receive intensive supervision and on-the-job training in one of 12 district offices. The following courses are conducted by CWTP trainers in collaboration with DCF staff.

All courses listed in NEST are offered twice annually. All others are offered once annually with the following exceptions:

- Casework /Supervision Consultation and Training Groups: offered once a month in 6-8 locations. Groups consist of 6-10 people.

- Signs of Safety: of the 40 total hours, 36 are the same 12 hour course offered in 3 locations of the state. Most employees will attend one. The remaining 4 hours are an advanced course offered to caseworkers and supervisors using the Signs of Safety consultation model.
- Supporting Parents with Disabilities: this 5 hour training will be offered 3 times each in a different part of the state.

New Employee Service Training

Course	Syllabus	IV-E Functions addressed	Duration	Est. Cost	Cost allocation methodology
Orientation Intake & Assessment	Overview of law, policy & practice; taking thorough intakes; Structured Decision Making process from report through case determination; intake as social work; public relations & consumer satisfaction	Referral to service; preparation for judicial determinations; placement of the child; development of case plan for children at risk of foster care; case management and supervision	5 hours	\$210	100% CAPTA
Child Abuse & Neglect	Identify risk and protective factors and review the research on child abuse and neglect. Learn to build solutions with mandated clients. Explore safety plans for children and youth to avoid the need for foster care. Overview of procedures to initiate emergency custody for a child who is unsafe. Medical aspects of child abuse and neglect.	Preparation for judicial determinations; placement of the child; development of case plan for children at risk of foster care; case management and supervision	7.5 hours	\$1320	50% CAPTA 50% IV-E
Sexual Abuse of Children and Adolescents	Understand a range of emotional and behavioral outcomes of sexual abuse. Explore dynamics and characteristics of incestuous families. Identify characteristics and behavioral changes of children and youth who have been sexually abused. Learn healthy and helpful ways to work with children and youth who have a history of being sexual abuse victims. Explore medical aspects off child sexual abuse and effective teaming across disciplines.	Preparation for judicial determinations; Placement of the child; Development of case plan for children in foster care and at risk of foster care; Case management and supervision; Referral to service	7.5 hours	\$820	50% CAPTA 50% IV-E

Course	Syllabus	IV-E Functions addressed	Duration	Est. Cost	Cost allocation methodology
Collaboration & Team Work	Understand how family centered and child/youth focused practice supports permanency for children/ adolescents. Develop an understanding of the importance of permanent connections and relationships for children/adolescents. Learn to promote child/youth well being with education, medical, dental, mental health and special needs services. Understand the value of teamwork and treatment teams in engaging youth/families and supporting progress towards their goals. Reflect upon the impact of cultural and personal values on our decisions/choices. Understand the dynamics of domestic violence.	Preparation for judicial determinations; Placement of the child for children in foster care; Development of case plan; Case management and supervision; Permanency Planning Referral to service	7.5 hours	\$320	100% IV-E
Facilitating Placements	Understand the importance of stability; secure attachments and the impact of separation/ loss on child/adolescent development. Understand the importance of family connections, and how to support kinship placements. Identify strategies for concurrent permanency planning for/ with children/adolescents. Explore ways to make placement transitions for adolescents/children a positive experience. Identify stages of grief/ separation trauma for children/youth and parents adjusting to placements.	Placement of child; preparation for judicial determinations; permanency planning; case management and supervision	5 hours	\$395	100% IV-E
Working With Youth & Families	Identify factors that contribute to youth behaviors that put themselves and/or the community at risk. Overview of mental health/substance abuse issues. Explore the Signs of Safety approach to child welfare, using balanced assessment and engaging families. Learn about family group conferencing as a tool to support safety for children and youth. Develop strategies for working with families/adolescents. Identify positive planning for/ with adolescents in placing in alternate care. Clarify importance of permanent, lasting relationships for youth transitioning to adulthood.	Preparation for judicial determinations; Placement of the child; Development of case plan for children in foster care/ at risk of foster care; Permanency planning Case management and supervision; Referral to service	5 hours	\$285	100% IV-E

Course	Syllabus	IV-E Functions addressed	Duration	Est. Cost	Cost allocation methodology
Juvenile Delinquency & Probation	Review the legal and court process for youth services. Define key points of the Disposition phase. Develop strategies for supervising probationers. Explore interventions for non-compliance.	Preparation for judicial determinations; Referral to services; Development of the case plan for children in foster care or at risk of foster care; Case management and supervision	5 hours	\$210	70% IV-E 30% General Fund
Case Planning With Families	Identify the ethical and legal basis for comprehensive case planning. Clarify case plan goal identification and how the goal relates to the overall plan of services. Prioritize issues to be addressed by the case plan. Learn components of effective team building. Identify and develop clear, measurable goals and strategies for various treatment issues. Review the initial and 6 month case plan formats.	Development of the case plan; referral to service; case management and supervision	5 hours	\$210	100% IV-E
Permanency, Connections and Adoption	Understanding the importance of lifelong connections for youth, explore strategies to engage extended family and community support systems for youth. Understand the range of permanency options, and your role in ensuring that all children and youth reach timely permanence.	Preparation for judicial determinations; Placement of the child; Development of case plan for children in foster care/ at risk of foster care; Permanency planning Case management and supervision; Referral to service	5 hours	\$210	100% IV-E
Resources for Best Practice	Understand critical child maltreatment research and theory; understand how to apply evidence based strategies to reduce the likelihood of future maltreatment or other negative outcomes. Develop thinking and tools of practice to identify and apply evidence based strategies.	Case management and consultation; referral to service, development of case plan for children in foster care and at risk of foster care.	5 hours	\$210	100% IV-E

Subsequent to NEST, but while in trainee status during their first 18 months of hire, new employees complete the following short term classroom training. All are coordinated by the CWTP. Subject experts are hired for some, and experts within the Department in collaboration provide others with CWTP trainers.

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CORE TRAINING

Course	Syllabus	IV-E Functions addressed	Provider	Duration	Est. Cost	Cost allocation methodology
Substance Abuse Screening and Referrals	Develop understanding of the continuum of use-misuse-abuse-dependency-recovery of chemicals and how substance use impacts the families we serve. Become familiar with the most often used/abused drugs. Explore how chemical dependency develops. Develop basic screening skills and increase one's comfort with asking specific questions about substance abuse in order to set appropriate goals and make appropriate referrals. Explore current treatment options available. Develop an understanding of how to make effective referrals.	Referral to service; placement of the child; preparation for judicial determination; development of the case plan for children in foster care and children at risk of foster care; case management and supervision; permanency planning	Hired subject experts	10 hours	\$2400	100% IV-E
Court and Legal Skills	Become familiar with Vermont laws, including Chapter 49 and Chapter 55 of Title 33 which guide us in meeting ASFA and Title IV-E requirements, how to work with the courts to provide safety, well being, and permanence for children/youth. Understand the court process (including the appeal process) and your role in documenting pertinent evidence, preparing a case for filing, meeting a standard of proof and moving for protective orders from the court.	Preparation for and participation in judicial determination; permanency planning	DCF subject experts in collaboration with CWTP trainer	16 hours	\$165	100% IV-E

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Course	Syllabus	IV-E Functions addressed	Provider	Duration	Est. Cost	Cost allocation methodology
Responding to Domestic Violence in CPS Case Planning	Develop a greater understanding of domestic violence and its overlap with child abuse. Understand the impact domestic violence has on children, its relationship to child abuse, and the DCF response to child witnessing. Increase strategies for an effective response to domestic violence/child abuse cases. Understand why responding to domestic violence in child abuse/neglect cases is essential to child protection efforts. Increase knowledge and skills in case planning that enhances victim safety, provides for batterer accountability and increases youth and child safety.	Referral to service, development of case plan for children in foster care or at risk of foster care, case management and supervision, permanency planning	DCF Domestic Violence Unit with community service providers	5 hours	\$75	100% IV-E
Shaken Baby Syndrome	Identify what Shaken Baby Syndrome is, (SBS) its history and why it is considered a syndrome. Understand how injuries are diagnosed as SBS. Walk through the investigation process of an SBS case study. Discuss the challenges in court and with SBS cases.	Preparation for and participation in judicial determinations, development of case plan, case management and supervision	DCF subject experts	5 hours	\$210	50% CAPTA 50% IV-E
Witnessing Skills	Understand your role in the presentation of a case in court, the judges expectations, and the tactics lawyers employ including direct and cross examination. Learn how to prepare testimony and testify in court effectively through demonstration and actual practice in a courtroom setting.	Preparation for and participation in judicial determinations	DCF subject experts	10 hours	\$345	100% IV-E
Accepting Intakes	Review state law and policy on accepting intakes for assessment. Review case studies and practice decision making. Required for supervisors and directors.	Development of case plan for children at risk of foster care	DCF subject experts	5 hours	\$210	100% CAPTA
Intake: The First Voice	Understand the importance of collecting complete and balanced information from reporters. Build "customer service" skills.		DCF subject experts	5 hours	\$210	100% CAPTA

Course	Syllabus	IV-E Functions addressed	Provider	Duration	Est. Cost	Cost allocation methodology
Investigation Skills	Learn skills for engaging families and communities right from the start. Understand our legal mandates. Understand forensic interview techniques.	Preparation/ participation in judicial determinations, development of case plan, case management and supervision	DCF subject experts	10 hours	\$420	50% CAPTA 50% IV-E

Specialized Training

The Child Welfare Training Partnership offers 115 hours of specialized classroom training in the 2006/2007 training calendar. Some of it is provided in collaboration with other groups, especially where it is in the form of a one or two day conference with multiple simultaneous workshops. This is all short-term training delivered in a formal classroom setting. All the workshops below are designed for child welfare social workers, supervisors and managers.

Course	Syllabus	IV-E Functions addressed	Provider	Duration	Est. Cost	Cost allocation methodology
Casework/ Supervision Training Groups	Monthly groups, designed to facilitate professional growth through collaborative discussions regarding prevention of foster care, case planning, facilitated case consultations, permanency, case management and the work of Child, Youth & Family workers.	Referral to service, placement of child, development of case plan, case management and supervision	Faculty from UVM Dept. of Social Work, hired subject experts	2 hours each month	\$12,000	100% IV-E
Annual Child Sexual Abuse Conference	This conference provides not only current best practice information but also an opportunity to network with colleagues and explore ways to successfully address child sexual abuse. We bring together the team players of community multidisciplinary teams: law enforcement, advocates, child protection, clinicians, educators, community members, and families. The 2006 Conference will provide opportunities for basic and advanced training, presentation on prevention programs and strategies, and lectures on the latest research regarding the community response to child sexual abuse.	Referral to service, preparation for and participation in judicial determinations, placement of child, development of case plan for children in foster care and at risk of foster care, case management and supervision	Professionals from across the country will present 30 workshops from five disciplinary perspectives.	10 hours	\$9170	33% CAPTA 33% CJA 33% IV-E

Course	Syllabus	IV-E Functions addressed	Provider	Duration	Est. Cost	Cost allocation methodology
Annual Collaboration Conference on Children, Youth and Families	Features workshops in areas such as youth development and engaging youth culture; family voices in the system of care; strengths-based solution-focused practice; communication skills for successful collaboration; and substance abuse prevention and screening.	Referral to service, preparation for and participation in judicial determinations, placement of child, development of case plan, case management and supervision	Hired subject experts	5 hours	\$5,000	100% IV-E
Effective Supervision Styles	Identify personal strengths and areas for growth as a supervisor. Learn knowledge and skills necessary to effective supervisory relationships.	Referral to service, placement of child, development of case plan, case management and supervision	Hired subject expert and CWTP trainers	5 hours	\$850	Child welfare supervisors: 100% IV-E Others have own funding sources.
Coaching and Mentoring in DCF	Explore supervisory role as a coach/mentor, and how to engage and motivate staff. Learn to use peer mentors, to build positive teams, and to use staff strengths to build their skills.	Referral to service, placement of child, development of case plan, case management and supervision	Hired subject expert and CWTP trainers	5 hours	\$850	Child welfare supervisors: 100% IV-E Others have own funding sources.
Managing to Outcomes	Learn to use safety, permanence and wellbeing outcome data, CFSR data, and other available reports to help plan for your team. Explore ways to share with employees the importance of the link between their practice and the wellbeing of children and families.	Referral to service, placement of child, development of case plan, case management and supervision	DCF staff, CWTP trainers	5 hours	\$210	Child welfare supervisors: 100% IV-E Others have own funding sources.

Course	Syllabus	IV-E Functions addressed	Provider	Duration	Est. Cost	Cost allocation methodology
“Signs of Safety” Balanced Family Consultation	Skills training in an inclusive consultation process to assist with decision making and case planning with families and their teams using a balanced focus on both risk and safety factors. Effective group supervision and team building. Explore evidence for the efficacy of family focused consultation process.	Referral to service, placement of child, development of case plan for children in foster care and at risk of foster care, case management and supervision	Sue Lohrbach, MS, LICSW and Rob Sawyer, Dir Olmstead County, MN Child and Family Services	40 hours	\$26,000	100% IV-E
Juvenile Services Day	Understand the CRC process; probation management and VOPs; probation detention; Woodside 8 day hearings; juvenile restorative probation programs and the ICJ/ICPC		DCF staff and CWTP	5 hours	\$210	100% General Fund

Course	Syllabus	IV-E Functions addressed	Provider	Duration	Est. Cost	Cost allocation methodology
Supervising Youth with sexually offending behaviors in the community	Understand the behaviors, emotional indicators and dynamics of youth with sexually offending behaviors. Know how to work with adolescents, family members, victims and the community in case planning to prevent relapse. Know how to use information from psychosexual evaluations to measure risk of re-offense and support case planning. Understand the relapse prevention model.	Referral to service, placement of child, development of case plan for children in foster care and at risk of foster care, case management and supervision	Hired subject expert and DCF staff	5 hours	\$850	50% IV-E 50% CAPTA
Lifelong Connections for Youth	Develop understanding and skills to ensure all youth in foster care have lifelong family relationships. Practice tools to actively engage youth in the development of their permanency plan. Consider every safe relationship with an adult as having potential to be a lifelong connection.	Placement of child, development of case plan, case management and supervision	Sarah Rosenthal, LICSW and CWTP trainer	5 hours	\$500	100% IV-E
Using Data to Inform Us	Improve the organization's ability to become results oriented, use outcome data to inform practice, and decision making. Review safety, permanence, well being outcomes/data from the CFSR. Assure that supervisors and managers will be able to analyze data and design creative plans to impact practice positively.	Case management and supervision	CWTP trainers and DCF staff	5 hours	\$325	100% IV-E

Regional Professional Development

The Child Welfare Training Partnership (CWTP) increasingly provides targeted, skills-based training and consultation for teams in districts. This model has proven both popular and effective in enhancing the professional development of FSD staff, supporting efforts at systems change, and spreading knowledge and practice skills based on evidence. This year, we would like to formalize a professional development planning process with each district to ensure that these goals are met and that resources are provided fairly throughout the state.

Each district would work with central office staff, CWTP staff and others they may identify to develop a district specific professional development plan (PDP). Ideally, the PDP will emerge from a combination of sources:

- FSD priorities/outcomes
- Local priorities as detailed in district plans, permanency plans, etc.
- What's available either locally or through the CWTP

Delivery of training and consultation services would be mutually agreed upon by CWTP and each district. A certain number of professional development days (probably 2 full days in the first year, realistically) would be scheduled in each district. If these are scheduled well in advance, districts may want to enter into arrangements to provide coverage for each other to allow full participation. Community partners and other DCF department staff would be invited and welcome at the discretion of the district. For some topics, we may decide it more effective to deliver training for a half day every three months, to allow staff to learn and then practice new skills, in a developmental progression.

Since the FSD is implementing a new set of practice principles which highlight family and child centered, strength and evidence based practice, we anticipate developing courses which would support this practice to deliver in each district. Over time, we hope to develop a growing menu of workshops readily available, which districts may request as part of their professional development program. Naturally, we will want to develop and tailor courses to meet district specific needs on an ongoing basis.

Courses which we suggest might be useful to develop/offer over the next year include:

- Evidence Based Practice: Understanding Risk & Protective Factors (1 day)
- Engagement Skills using Solution Focused Practice (1 ½ day)
- Signs of Safety integration, consultation
- Connections for Youth
- Coordinated Services Training
- Family Group Decision Making
- Management team building/consultation

We would like to ensure that each district gets a guaranteed amount of training/consultation time.

At the same time, we want to maintain a certain amount of flexible time availability. Over the past year, we have found that implementation of new practice ideas can take considerable training and support over a limited period of time. For example, districts who wish to implement Family Group Conferencing may benefit from initial consultation with managers to explore funding options, training for staff, additional training for community partners, and ongoing consultation/training during the first few conferences to ensure effective implementation.

Title IV-E funds will be used as allowable for State Team training related to the upcoming Child and family Service Review.

Training for IV-E System of Care Service Providers

Most of the above trainings are also available to foster parents, adoptive parents, workers in residential programs, case managers, state employees in other departments, and other community practitioners providing services to children in custody. Our training calendar is mailed annually to programs and practitioners who provide services to abused and neglected children around the state, and is available on the web.

Cost Allocation Methodology

The Title IV-E eligibility statistics are compiled quarterly from Family Services MIS, using data on all children in custody, including their custody category, and then indicating their Title IV-E eligibility status, also by custody and category. The number of Title IV-E eligible children is divided by the total number of children in custody to determine the Title IV-E eligibility rate (penetration rate).

The same information is provided for the children on adoption subsidy, which are categorized as Title IV-E eligible children. The number of Title IV-E eligible children is divided by the total number of children on adoption subsidies to determine the Title IV-E eligibility rate.

UVM Contract and Foster Parent Training

For the purposes of determining the penetration rate to be applied to the UVM contract and foster parent training, the raw data for children in custody and on adoption subsidies, the combined number of Title IV-E eligible children in custody, and the number of Title IV-E eligible children on adoption subsidies is divided by the total population of custody children and total children on adoption subsidies, to determine the combined custody and adoptions Title IV-E eligibility rate (penetration rate). The penetration rate is then multiplied by the applicable rate: training (75%) and administration (50%).

TECHNICAL ASSISTANCE

We plan to request the following technical assistance for SFY 2007.

- Strengthening Supervision as a Key Practice Change Strategy from the NRC for Organizational Improvement.

- Technical assistance to provide guidance in the rewrite our child abuse and neglect policy and include an alternative response. We will require assistance in researching other state's related laws and alternative response procedures and in determining how to best foster political support for these changes. We have no particular NRC in mind at this time. A request form was submitted to our Regional office on June 19th.
- Recruitment, Development and Support of Youth Advocacy from the NRC for Youth Development.
- Translation of Data Composites from the NRC for Child Welfare Data Technology
- Assistance to develop data reports to track outcomes of contracted service providers from the NRC for Child Welfare Data Technology.
- Ongoing consultation on family engagement and permanency from the NRC for Family-Centered Practice and Permanency Planning and other NRC's as appropriate to the topic.

CAPTA PROGRAM EMPHASIS

We have selected the following areas of emphasis for our CAPTA program.

- Improvement of intake, assessment, screening and investigation of reports of abuse and neglect;
- Developing, strengthening and facilitating training to promote collaboration with families;
- Improving the skills, qualifications and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers;
- Developing and facilitating training protocols for individuals mandated to report child abuse or neglect;
- Developing and delivering information to improve public education relating to the role and responsibilities of the child protection system and the nature and basis for reporting suspected incidents of child abuse and neglect.

CHANGES IN STATE STATUTE RELATED TO CAPTA

No changes affecting eligibility for CAPTA were made in state statute.

CHILD WELFARE DEMONSTRATION PROJECTS

Vermont has one child welfare demonstration grant, the goals of the Rural Recruitment grant are to:

- Assure that VT has families for all children waiting to be adopted
- Assure adopted families have the support they need in order to thrive

- Assist other rural communities with replicating this project
- Develop the capacity to continue the project after funding ends.

The grant cycle is October 2003 to September 2008.

CURRENT FEDERAL INITIATIVES

The Department for Children and Families does not receive any funding for Healthy Marriage, Fatherhood, Rural Development, Positive Youth Development, or Faithbased/Community Services Projects.

AVAILABILITY OF PLAN TO PUBLIC

This plan will be made available to any member of the public on request. It will also be posted on our public web page.

NON SUPPLEMENTATION REQUIREMENT

In FY 1992 the family preservation and support line items were known as “placement prevention”. Vermont spent \$29,671 on placement prevention in FY 1992. In FY 2004, Vermont expended \$222,395 on IV-B, subpart 2 programs.

MAINTENANCE OF EFFORT

No IV-B subpart 1 funds were used for Foster Care, Adoption Assistance or Child Care related to Employment and Training in 2004.

IV-B SUBPART 2 EXPENDITURES FOR FY 2004

Program	Proposed Spending	Actual Spending
Family Preservation	\$338,340	\$501,294
Family Support	\$193,337	\$167,910
Time Limited Reunification	\$193,337	\$88,525
Adoption Promotion/Support	\$193,337	\$122,000
Planning	\$48,334	\$9,858
Total	\$966,685	\$889,587

Vermont does not have a mechanism in place to identify specific reasons for differences between proposed and actual expenditures. We will have one in place to meet this requirement for the next APSR.

Populations, Geographic Areas, and Numbers Served

In reference to the CFS 101 Part II, Column (k), Number to be Served. Vermont does not track the numbers of individuals or families served by this individual funding stream, therefore we can not provide the estimation requested. We will have a mechanism in place to meet this requirement for the next APSR.

ATTACHMENTS

1. FFY 2006 CFS 101Part I Revised
2. FFY 2007 CFS 101Parts I & II
3. VCAB Annual Report

CFS-101, PART I: ANNUAL BUDGET REQUEST FOR TITLE IV-B, SUBPART 1 & 2 FUNDS, CAPTA, AND CFCIP
 FISCAL YEAR 2006 OCTOBER 1, 2005 Through SEPTEMBER 30, 2006

1. State or ITO: Vermont	2. EIN: 036000274
3. Address: 103 South Main St. Waterbury, VT 05671	4. Submission: [] New [X] Revision
5. Estimated title IV-B, Subpart 1 Funds	
6. Total Estimated title IV-B, Subpart 2 Funds (This amount should equal the sum of line a-f. (25% State match required.)	
a) Total Family Preservation Services	
b) Total Family Support Services	
c) Total Time-Limited Family Reunification Services	
d) Total Adoption Promotion and Support Services	
e) Total for Other Service Related Activities (e.g. planning)	
f) Total Administration	\$0
7. Re-allotment of Title IV-B, Subpart 2 funds for State and Indian Tribal Organizations (25% match required). a) Indicate the amount of the State's/Tribe's allotment that will not be required to carry out the Promoting Safe and Stable Families Program. <u>\$0.00</u> b) If additional funds become available to the states and ITOs, Specify the amount of additional funds the state or Tribes is requesting.	
8. Child Abuse Prevention and Treatment Act (CAPTA), Basic State Grant (no state match required). Estimated BSG Amount _____, plus additional allocations as available.	
9. Estimated Chafee Foster Care Independence Program (CFCIP) funds (20% match required)	
10. Estimated Education And Training Vouchers	\$127,014
10. Re-allotment of the CFCIP Funds (20% State match required). a) Indicate the amount of the State's/Tribe's allotment that will not be required to carry out the CFCIP Program. <u>\$0.00</u> b) If additional funds become available to the states, specify the amount of additional funds the state is requesting.	
11. Certification by State Agency The State agency or Indian Tribe submits the above estimate and request of funds under title IV-B, subpart 1 and/or 2, of the Social Security Act; for States only, CAPTA BSG and the CFCIP, and agrees that the estimated expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with the ACF Regional Office and has been determined to meet all the requirements of the Act, for the Fiscal Year ending September 30.	
Signature and Title of State/tribal Agency Official	Signature and Title of Regional Office Official
Date	Date

CFS-101, PART I: ANNUAL BUDGET REQUEST FOR TITLE IV-B, SUBPART 1 & 2 FUNDS, CAPTA, AND CFCIP
 FISCAL YEAR 2007 OCTOBER 1, 2006 Through SEPTEMBER 30, 2007

1. State or ITO: Vermont	2. EIN: 036000274
3. Address: 103 South Main St. Waterbury, VT 05671	4. Submission: <input checked="" type="checkbox"/> New <input type="checkbox"/> Revision
5. Estimated title IV-B, Subpart 1 Funds	\$953,333
6. Total Estimated title IV-B, Subpart 2 Funds (This amount should equal the sum of line a-f. (25% State match required.)	\$966,685
a) Total Family Preservation Services	\$338,340
b) Total Family Support Services	\$193,337
c) Total Time-Limited Family Reunification Services	\$193,337
d) Total Adoption Promotion and Support Services	\$193,337
e) Total for Other Service Related Activities (e.g. planning)	\$48,334
f) Total Administration	\$0
7. Re-allotment of Title IV-B, Subpart 2 funds for State and Indian Tribal Organizations (25% match required). a) Indicate the amount of the State's/Tribe's allotment that will not be required to carry out the Promoting Safe and Stable Families Program. <u>\$0.00</u> b) If additional funds become available to the states and ITOs, Specify the amount of additional funds the state or Tribes is requesting. <u>\$2,000,000</u>	
8. Child Abuse Prevention and Treatment Act (CAPTA), Basic State Grant (no state match required). Estimated BSG Amount <u>\$88,272</u> , plus additional allocations as available.	
9. Estimated Chafee Foster Care Independence Program (CFCIP) funds (20% match required)	\$710,367
10. Estimated Education And Training Vouchers	\$130,794
10. Re-allotment of the CFCIP Funds (20% State match required). a) Indicate the amount of the State's/Tribe's allotment that will not be required to carry out the CFCIP Program. <u>\$0.00</u> b) If additional funds become available to the states, specify the amount of additional funds the state is requesting. <u>\$2,000,000</u>	
11. Certification by State Agency The State agency or Indian Tribe submits the above estimate and request of funds under title IV-B, subpart 1 and/or 2, of the Social Security Act; for States only, CAPTA BSG and the CFCIP, and agrees that the estimated expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with the ACF Regional Office and has been determined to meet all the requirements of the Act, for the Fiscal Year ending September 30.	
Signature and Title of State/tribal Agency Official	Signature and Title of Regional Office Official
Date	Date

CFS-101, PART II: ANNUAL SUMMARY OF CHILD AND FAMILY SERVICES

State Or IT: Vermont For FFY OCTOBER 1, 2006 TO SEPTEMBER 30, 2007 DUE JUNE 2006

SERVICES/ACTIVITIES	TITLE IV-B		(c) CAPTA*	(d) CFCIP*	(e) TITLE IV-E	(f) TITLE XX (SSBG)	(g) TITLE TANF	(h) Title XIX (Medicaid)	(i) Other Fed Prog	(j) State Local Donated Funds	Total	(k) NUMBER TO BE SERVED	(l) POP. TO BE SERVED
	(a) I-CWS	(b) II-PSSF										[] Families [X] Individuals	
1) PREVENTION & SUPPORT SERVICES (FAMILY SUPPORT)		193,337								150,000	343,337		Reports of abuse/ne
2) PROTECTIVE SERVICES	953,333		176,000			490,435				376,444	1,996,212		
3) CRISIS INTERVENTION (FAMILY PRESERVATION)		338,340									338,340		
(A) PREPLACEMENT PREVENTION		0			291,524		3,401,123	669,994	1,754,337		6,116,978		All Children in foster
(B) REUNIFICATION SERVICES		0					3,401,123		50,796		3,451,919		
(C) Planning		48,334											
4. TIME-LIMITED FAMILY REUNIFICATION		193,337							50,796		244,133		
5. ADOPTION PROMOTION AND SUPPORT SERVICES		193,337							50,796		244,133		All egligible childr
6) FOSTER CARE MAINTENANCE:													
(A) FOSTER FAMILY & RELATIVE FOSTER CARE				4,838,433	2,597,579	317,488		371,330	3,311,960		0		
(B) GROUP/INST CARE				5,069,065	2,490,792		6,174,475		5,579,306		19,313,638		
7) ADOPTION SUBSIDY PMTS.				3,787,749					1,424,016		5,211,765		
8) INDEPENDENT LIVING SERVICES			610,866								610,866		

9) ADMIN & MGMT					3,600,467	38,937	450,561	381,403	537,427	3,600,183	8,608,978		
10) STAFF TRAINING					2,016,101						2,016,101		
11) FOSTER PARENT RECRUITMENT & TRAINING					142,645	28,000					170,645		
12) ADOPTIVE PARENT RECRUITMENT & TRAINING											0		
13) CHILD CARE RELATED TO EMPLOYMENT TRAINING					894,568	287,597	2,239,565		16,789,078	5,126,041	25,336,849		
14) TOTAL	953,333	966,685	176,000	610,866	20,349,028	5,734,429	3,498,049	13,358,124	18,367,829	21,474,675	85,489,018		



At its first meeting on September 30, 1999, board members decided that the board's success will be measured by answering the following questions.

These questions have continued to guide us.

- ◆ Does Board feel informed and understand the Department in the broad sense?
- ◆ Does the Department get leadership from the Board and feel that it is a good use of time?
- ◆ Has Board reviewed child fatalities or near fatalities and/or other issues referred?
- ◆ Has Board examined the strengths and weaknesses of the SRS system and made recommendations for improvement?
- ◆ Has Board evaluated data around trends/issues and discussed implications for future planning?
- ◆ Has Board offered useful and significant recommendations to the department?
- ◆ Has Board produced annual report?

Vermont

Child Protection Advisory Board 2005 - 2006

Background

In 1999, consistent with the provisions of the federal Child Abuse Prevention and Treatment Act (CAPTA), DCF Family Services (then SRS) formed the Child Protection Advisory Board. In December of 2004, the board was renamed the Vermont Citizen's Advisory Board (VCAB) in By-Laws that were adopted by the board on December 8, 2004. The Board meets quarterly to discuss a broad variety of issues related to child protection in Vermont.

Members

Joseph Hagan, M.D. - Co-chair, Pediatrician
Judge George Belcher - Judge, Washington Probate Court
Rev. Stephen G. Berry - Foster and Adoptive Parent, Pastor
Charlie Biss - Director of Children's Services, VT Dept of Health
Stacey Heuer - Consumer Advisory Board, Parent
Linda Johnson - Prevent Child Abuse Vermont
Hilda Green - AHS Planning Division and CDD
Bruce Lang - Dept of Public Safety
Amy Torchia - VT Network Against Domestic Violence and Sexual Assault
Alice Siegriest - VT Children's Aid Society
Michael Mcadoo - ADAP, VT Dept of Health
Dawn Philbert - VT Dept of Health
Lynn Granger - Kinship Care
Sue Cano - Lamoille County Supervisory Union
Stacey Edmunds - Victim Treatment Services Coordinator

DCF Staff: Steve Dale – Commissioner, Cindy Walcott – Deputy Commissioner for Family Services, Frederick Ober – Child Protection Director for Family Services, Karen Shea – Child Safety Assessment Manager for Family Services, Lynn Robbins – Administrative Assistant



FY 2005 - FY 2006 Board Meetings

Vermont's Citizen Advisory Board met four times in FY 2005 – FY 2006, on 9/7/05, 11/30/05, 3/1/06 and 6/7/06.

The following issues, among others, were discussed at our meetings:

Policy

ACTION: The board provided review of Policy 150 (Transportation of Youth in DCF Custody) prior to implementation and provided input into the final policy adopted on 1/17/06. The board considered additional elements to be added to Policy 55 (Risk of Harm) to further clarify DCF Family Service's role when reviewing and investigating these allegations. The board reviewed Policy 61 (Responding to Domestic Violence in Child Abuse Intake and Investigation) and Policy 135 (Domestic Violence: Policy Statement) to examine DCF Family Services' current response to cases involving domestic violence in light of current evidence regarding best practice. The board reviewed and provided feedback about a proposed policy on Testing for Substance Use / Abuse during Investigations.

Legislation

ACTION: The board reviewed changes in state law that impact DCF Family Services. Specifically, the board reviewed:

- S. 27 A Safe Haven Defense To The Crime Of Abandoning A Baby
- S. 194 The Sealing Of Juvenile Records, Care Of Children In The Custody Of The State, And Rights Of Persons Under A Guardianship Order
- H. 306 Transportation Of Individuals In The Custody Of The State
- H. 373 Orders Against Stalking Or Sexual Assault, No Contact Orders, And Establishing A Victim's Rights Study Committee

- H. 856 Enhancing Sentences For And Preventing Risks Posed By Dangerous Sexual Offenders

Cases

ACTION: In its capacity as an empanelled Child Protection Team, the board heard several case presentations. These presentations were focused on soliciting the board recommendations for policy change. The team focused on several questions about DCF Family Services' response during intake and investigation. The board provided input into intake and investigation policy revisions. Specifically, the board considered the following issues:

- Substance abuse screening / testing of caretakers during investigations
- Sexual abuse investigations when the alleged perpetrator is under the age of ten,
- Sexual abuse investigations when the identified victim is over the age of legal consent and there allegation is that sexual contact of a consensual nature has occurred
- Sharing of central registry information with non-offending parents when investigating allegations of risk of harm of sexual abuse

Unsubstantiated Investigations

ACTION: In April of 2006, DCF shifted the practice of completing risk assessments on substantiated cases of child abuse and neglect to completing risk assessments on all investigations regardless of whether or not the investigation is substantiated. The board reviewed the change in practice prior to it occurring and offered recommendations about case disposition in high/very high risk unsubstantiated cases that focused on DCF Family Services role as well as the role of the broader community.

Methamphetamine and Risk of Harm

ACTION: A presentation was made to the board that illustrated issue of methamphetamine production and use and the implications this issue has for child protection in VT. The board considered this issue in light of our current risk of harm policy and made suggestions about this policy could be amended to address this issue. The board was alerted to efforts within DCF Family Services to develop a response to this issue in concert with law enforcement that is in keeping with national best practice standards.

May 2006 CAPTA Guidance

ACTION: Reviewed recent additions to the Child Welfare Policy Manual that clarify a number of questions related to CAPTA Assurances and Requirements including:

- Requirement that attorneys and court – appointed special advocates who are appointed as guardians ad litem (GAL) receive training specific to their role before s/he is appointed
- CAPTA requirement that the health care provider must notify CPS of all infants born and identified as affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure and the fact that such notification need not be in the form of a report of suspected child abuse or neglect; CPS staff are responsible to assess the level of risk to the child and other children in the family and determine whether the circumstances constitute child abuse or neglect under State law
- CAPTA requirement that even if drug-exposure of newborns is not defined as child abuse or neglect in the State’s reporting statute, health care providers are still required to “notify” child protective services
- Clarification that requirement for States to adopt policies and procedures to address the needs of infants identified as being affected by illegal substance abuse or withdrawal symptoms does not include infants affected by prenatal exposure to alcohol
- Clarification that the CAPTA statute does not specify which agency or entity must develop the plan of safe care; the State may make this determination
- CAPTA requirement that, at a minimum, CAPTA panels are expected to reach out to the immediate community as part of public outreach; panels are to be broadly representative of the community, however, there is no requirement that families be on the panels
- Clarification that the requirement that the State have provisions or procedures to advise the individual subject to a child abuse or neglect investigation of the complaints or allegations made against him or her at the time of the initial contact does not mean first face-to-face contact; Rather a state would be out of compliance if this notification is not made at first contact regardless of how that contact is made. This notification must occur regardless of whether the complaint results in a formal investigation or an alternative response
- Clarification that requires provisions and procedures be in place for substantiated victims of child abuse or neglect under the age of three be referred to early intervention services under Part C of the Individuals with Disabilities Act. This requirement extends to children other than those in the custody of the State
- CAPTA requirement that background checks for foster parents and adoptive parents occur regardless of whether or not they are being paid with title IV-E funds; the law is silent on whether or not fingerprints are required as part of a criminal background check

Recommendation from the board that DCF Family Services continue to discuss the implementation of these changes at the State Liaison Officers meeting in June of 2006.