



VERMONT

Department for Children and Families

**Family Services Division
Child and Family Services Plan**

Final Report for July 1, 2004 - June 30, 2009

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Focus of Final Report

This final report is for the plan in effect for the period July 1, 2004 - June 30, 2009. The requirements for the final report are outlined in Draft ACYF-CB-PI-09-, issued 2/2/2004. The following table summarizes how Vermont will meet these requirements.

Requirement	How Met
Progress on goals and objectives in the last fiscal year.	Final report
Accomplishments and progress towards meeting the goals and objectives of the five-year plan.	Final report
Information about outcomes for children and families.	New plan
Progress towards a more comprehensive, coordinated, effective child and family services continuum.	New plan
Comparison of present outcome data with baseline data and data collected during annual updates and the Child and Family Services Review.	New plan
CFSR results and subsequent PIP.	Final report.
Description of progress made in the areas of training, technical assistance, research, evaluation, or management information systems in support of the goals and objectives.	New plan
A description of the progress and accomplishments made with regard to the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.	Final report
A description of the State's activities as a result of receiving adoption incentive payments.	Final report
A description of activities that the State has undertaken for children adopted from other countries, including the provision of adoption and post-adoption services.	Final report
A description of activities to make progress to meet caseworker visit requirements.	New plan.
A description of the progress and accomplishments made with regard to compliance with the Indian Child Welfare Act and the coordination of the permanency provisions afforded to Indian children.	New plan
Accomplishments to date under the CAPTA portion of the consolidated CFSP; and	Final report
A copy of the most recent annual report(s) from the State's citizen review panel(s). Section 106(c)(6) of CAPTA requires that the citizen review panels develop annual reports and make them available to the public.	Attached to final report
A description of accomplishments and progress in child welfare waiver demonstration project	Not applicable for VT
A description of the specific accomplishments and progress made toward meeting purposes 1-6 of Section 477(a) of the Act related to the Chafee Foster Care Independence Program.	Final report

Accomplishments and Progress towards Meeting Goals in 2004-2009 CFSP

Vermont Child and Family Services Review 2007

Vermont began our second Child and Family Services Review (CFSR) process in October 2006 with the Statewide Assessment. Our onsite review was the week of April 9-13, 2007. The statewide assessment process gave us an opportunity to collect input from a wide variety of staff and stakeholders on issues important to us. We used the opportunity to determine progress made since the first CFSR, to further our work in family engagement and permanency for youth and to begin planning for program improvement. You can view Vermont's Statewide Assessment at <http://www.dcf.state.vt.us/fsd/CFSR/index.html>.

Vermont's Program Improvement Plan (PIP), approved in October 2008, includes activities that address all of the areas needing improvement in the CFSR final report: centralized intake, differential response, Breakthrough Series Collaborative on safety and risk assessment, redesign of the supervisor's role, implementation of the effective casework model, design and implementation of a CQI process and alignment of contracted resources with our new practice model.

The Family Services Division also developed a plan to transform services in January 2008. This plan lays out an ambitious agenda for change that goes far beyond the scope of the CFSR. Our PIP goals were added to the 2008 APSR. They are also a subset of goals from our Transformation Plan. We believe these goals will expand and strengthen the range of existing services in FY 2009 and beyond and that they will improve outcomes for children and families as well. You can view Vermont's Program Improvement Plan at http://dcf.vermont.gov/fsd/federal_reviews_plans

Program Improvement Plan Goals

Provide high quality, consistent front end services that ensure safety and well-being for the children and families we serve.

Goal PIP1: Develop and implement centralize intake process

We implemented a centralized intake on 9/1/2008. The unit responsible for this work consists of two supervisors and six social workers.

This was accomplished by taking only 1 position from the field, which has the net effect of increasing available social worker and supervisor time in the district offices. This goal incorporates previous APSR goals CS1 and CS2. IT staff were instrumental in modifying our management information system to accommodate the centralized intake process.

Families receive family-centered services and supports at the earliest opportunity to reduce risk of maltreatment and need for custody.

Goal PIP2: Design and implement multiple approaches to reports of child abuse and neglect and juvenile justice.

A required summer study, was submitted to the legislature in November of 2007; it strongly recommended legislation related to differential response be adopted. In January of 2008, an Act Relating to Reports of Child Abuse and Neglect was taken up in the legislature. In May of 2008, Act 168 was passed and included language sanctioning the development of rules related to differential response. On May 19, 2009 the Legislative Committee on Administrative Rules approved our rules for differential response, which will be effective on July 1, 2009. IT staff have been busy modifying our management information system to reflect the ability to accommodate this new approach.

Goal PIP3: Ensure alignment of contracted resources with practice model.

Contracts have been modified to expand family engagement services in all districts. These services include Family Time Coaching, Family Safety Planning and Family Group Conferencing.

Families and children receive comprehensive, strengths-based services that provide them with successful long-term safety, permanency and well being.

Goal PIP4: Implement the Effective Casework Model for all case types.

In 2008 we made the decision to adopt the Effective Casework Model (ECM) as the casework practice framework for all case types. ECM is a structured practice model for providing targeted case management services based on an assessment of risk and needs. Its initial application was in youth justice services. We are engaged in technical assistance from the National Child Welfare Resource Center on Organizational Improvement and the National Resource Center for Family Centered Practice and Permanency Planning with a focus on adapting the model for use across our casework areas.

Goal PIP5: Redesign role, tasks and performance expectations for supervisory staff statewide.

Vermont's PIP calls for significant changes in the role and focus of the supervisor and in the structure and purpose of supervision. The role of the supervisor will be critically important to the success of moving our practice forward as described in the Transformation Plan. New skills, particularly in the area of teambuilding, group supervision and continuous quality improvement will be needed.

We are engaged in technical assistance from the National Child Welfare Resource Center on Organizational Improvement and the National Resource Center for Child Welfare Data and Technology. The workgroup has met 3 times with plans to conclude work by September 2010.

Goal PIP6: Develop and implement a continuous quality improvement process.

After Vermont's first CFSR a district review process that mirrored the federal review process was designed and implemented. The process required districts to conduct a district self assessment and to submit a district plan to address issues identified in the review. All 12 districts were reviewed and they each completed their two year district plan process.

Upon evaluation, it was determined that this approach did not promote ownership of the process or outcomes at the district level. We will incorporate what was learned from this first round of district reviews and develop an enhanced case review process that utilizes the knowledge and expertise from all levels of the division, with a focus on the role of the supervisor.

Ongoing Coordination and Collaboration Efforts

The system of collaboration is very strong in Vermont. We utilize new and existing structures to meet federal requirements for consultation and coordination with stakeholders in developing and implementing provisions of the Child and Family Services Plan, Child and Family Services Review and Annual Program and Services Report.

There has been significant staff, community and stakeholder input into the development of our new organizational structures and practice approaches. This coordination and collaboration was accomplished through existing teams and committees, through the Juvenile Proceedings Act revisions, the CFSR process, through a Legislative summer study completed in 2007, through community forums and the rule making process for centralized intake and differential response which culminated in May 2009.

Child Protective Services (CAPTA) Accomplishments

Child Abuse Reporting

In February 2008, the Family Services Division began the process of centralizing the child abuse intake function. The process was completed by mid-October. Formerly, intakes were handled by social work staff on rotation in each district office, now they are taken by six dedicated and specially trained staff in Waterbury. The goals of centralized intake are to (1) improve responsiveness to mandated and other reporters (2) increase quality of information recorded, to better guide decision-making and investigation planning and (3) to increase consistency of decision-making across the state.

The initial feedback from community members has been excellent. In the short-term, we appear to be achieving our goals.

The impact on workload in the districts has been significant. Overall call volume is up by about 9% over the same period in 2007. However, the number of investigations opened is up by about 40%.

Child Maltreatment Assessment

In May of 2008, the Vermont Legislature passed Act 168 which included language sanctioning the development of rules related to differential response and the development of a tiered central registry. Differential response allows for range of assessment protocols without compromising child safety, it allows us to put greater operational focus on the front-end services and to tailor our response proportional to the situation instead of one-size fits all forensic investigation.

Since the fall of 2008, the Differential Response Workgroup has been meeting two times a month to plan for the implementation of Differential Response on July 1, 2009. The workgroup is comprised of staff from across the department including central office management, district directors, supervisors, senior social workers and social workers. The group spent significant time reviewing materials including draft regulation and policy as well as determining the appropriate assessment instruments to be used after Differential Response implementation.

Citizen Review Panel

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 for DCF, the Deputy Commissioner for Family Services, the Child Protection Director and the Child Safety Assessment Manager 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. Please see VCAB's 2008 Annual Report for more detail (Attachment A).

Diligent Recruitment of Foster and Adoptive Homes Goals and Accomplishments

Over the past five years Vermont has continued on its path of dual recruitment, training and licensure for families willing to provide foster care and adoption services for children in care. In addition, Vermont has expanded its efforts to seek kinship families and engage them in stepping forward for a child.

Through an Adoption Opportunities Grant the public/private partnership, called Project Family, was created with the Lund Family Center in 2000. Project Family's first task was to begin searching for permanent connections including relatives for the longest waiting children in care.

Project Family placement counselors mined each child's foster care records identifying any and all past family connections, provided follow up with those families and for in-state families completed home studies at no cost to the family when a match was made. For out of state families Project Family paid for private agencies to complete a home study as many other state's waiting time for ICPC response was too slow. Eighty-nine of the original ninety children identified in the permanent connections project were adopted over the grant period.

These efforts continue today and have set the standard for all social workers. Over the past five years Project Family has become the permanency resource for all twelve of Vermont's districts. Ten districts hold permanency meetings with Project Family staff on a monthly basis. These permanency meetings are now addressing the placement needs of children as they enter foster care, in addition to the ongoing need of children in foster care who experience placement disruption. These efforts have allowed for a child's adoption finalization case to be filed within 90 days of the termination of parental rights hearing. This is a reduction from an average wait of 26 months.

A second Adoption Opportunity Grant was awarded to Vermont in 2003. This was a Rural Recruitment and Retention Grant. The main goal of this 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 opportunities to help children in foster care under one convenient, easily accessible program.

Over the past five years the Rural Recruitment and Retention component of Project Family has obtained statewide recognition as the adoption and foster care program. Both the recruitment and retention campaign and the expanded search for relatives have been so successful that the state has more licensed families than it has available children.

Since 2003 pre-to-post adoption support has been provided to families through a collaborative effort with three other agencies that also provide post-adoption services. This has been invaluable. Families report feeling supported and they know they will receive the support they need to be successful.

While all funding for this service has stopped the Project Family partnership is committed to picking up the pre-adoption support for those cases where, because the child has multiple diagnosis, trauma and/or losses, an adoption may not be possible without the support.

Recruitment

The Project Family Recruitment Team, which includes Family Services resource coordinators, rural recruitment grant staff, and the Department's Marketing Coordinator, continue to meet on a monthly basis.

The team discusses recruitment strategies and they put together a monthly list of recruitment events which is provided to all district directors.

Since October of 2008 the Lund Family Center has committed one full-time staff person to continue with global statewide recruitment. Each of the twelve district offices have committed to engagement of recruitment activities for their community, using the principles learned through the Rural Recruitment grant. In addition, Vermont has created a foster care liaison contract and hired a full time person to coordinate recruitment and retention activities with local staff. Recruitment activities include:

- Recruitment materials including water bottles, key chains, and t-shirts used by recruiters, resource coordinators, and ambassadors throughout Vermont.
- Over the past five years on National Adoption Day in November, we have held several adoption events (e.g., skating, swimming, rock climbing, and dinners) throughout the state to recognize and recruit families. They were held in collaboration with the Vermont Adoption Consortium.
- Family recruiters held recruitment events annually throughout the state, including open forums at churches, schools, libraries and hospitals; kitchen table talks in people's homes; campsites, open houses at State Parks; and booths at county fairs and community events.
- Our recruiters have developed relationships with local schools. They have conducted informational meetings for school staff as well as parents. High school students who are required to complete community service hours helped recruiters distribute Project Family recruitment materials.
- We developed a Heart Gallery for a number of our waiting children. It has been on display at venues throughout the state.
- New television and radio PSAs were developed and distributed to radio and television stations throughout Vermont. The two co-directors of Project Family appeared on a local TV program called Across the Fence, wrote numerous articles, and gave interviews to newspapers throughout the state about the need for foster and adoptive parents.
- Local bus companies have displayed Project Family banners on the sides of the buses, we created large magnet plaques for use on state cars, we have saturated communities with posters and information on how to become involved.

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 2009 Update

Project Family Recruitment and Retention Activities	Numbers
Recruitment Activities	154
Materials Distributed	218,816
Families Contacted through Events	3,805
Children Served (permanency planning)	412
Families Recruited	904
Families Recruited by Project Family That Attended DCF Training	528

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

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

SFY 2009 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.

During this reporting period Family Services continued to fund the Vermont Adoption Consortium. The consortium is a diverse group of therapeutic foster care agencies, community mental health centers, private adoption agencies, parents groups, private and public child welfare organizations, the Vermont Foster and Adoptive Parent Association and the University of Vermont, Social Work Program. 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.

Consistent with the Intercountry Adoption Act of 2000, post-adoption services are available to any family needing them, not just children adopted through DCF. In addition to the service of the Consortium, Family Services reclassified 1 FTE social work position to be the Post Adoption Coordinator (PAC). This position is the contact person for any adoptive family seeking help for their child. In addition, the PAC receives and processes requests for additional or amended services to families who have an open adoption assistance agreement. This position also responds to adoptive families, mental health and/or other providers when a child requires services outside of the family home.

In keeping with our practice to build a seamless system of care for families adopting children from foster care the Adoption Manager and members of the Adoption Consortium joined forces in 2002 with the Department of Mental Health to form the Adoption and Mental Health Steering Committee. Originally, this steering committee was to look at issues of the growing number of adopted youth entering treatment facilities and never returning to their adoptive families. Since that time the Committee has broadened its knowledge and understanding of the dynamics and needs of parents who have adopted children from States custody.

In May 2008, the Adoption and Mental Health Steering Committee (AMHSC) sent the following information to the State Interagency Team (SIT) asking them to address two issues and to sanction the AMHSC to work addressing the rest.

1. Out of home placements:
 - Request SIT to sanction this Committee to work on developing practice standards for the appropriate use of out of home placements for adopted children. These standards would identify what services and supports should be attempted prior to placement, when out of home placement is appropriate, treatment expectations during placement, and how to set goals and expectations for returning home.
2. For children who cannot return home in a traditional manner:
 - Request SIT to sanction this Committee to develop practice standards around when it is appropriate to develop long-term alternative living and/or family situations (i.e. long-term shared parenting, mentor situations, independent living, etc.)
 - Develop policies and procedures around shared ownership and funding of these cases:
 - a) Address funding mechanisms barriers – DMH waiver criteria, the federal vs. state opinions around the use of the Adoption Subsidies, custody vs non-custody.
 - b) Develop and support a procedure for encouraging shared ownership of the case management of these cases or determine what entity within AHS should be responsible for long term out of home care for this population.

- c) Create a shared funding mechanism.
- d) Address policy barriers like DCF's "abandonment" regulations.

Adoption Incentive Payments

As reported in the 2005 and 2006 APSR's, Vermont used adoption incentive payments to support domestic violence services, adoption and post adoption services and strategies to enhance family engagement.

Indian Child Welfare Act

Vermont does not have a federally recognized Indian Tribe within its borders. In 2006 Vermont passed legislation that recognized the Abenaki people. However, they were denied federal status upon re-application in June 2007.

The department promulgated policy regarding compliance with the Indian Child Welfare Act in 1998. 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.

Vermont's new Juvenile Proceedings Act, effective January 1, 2009, requires social workers to provide information required by the Indian Child Welfare Act at the Temporary Care Hearing which is held within 72 hours of custody. In addition, our current case plan format requires workers to address identity and location of all parents and specifically note if the child has Native American heritage.

Permanent Connections Goals and Accomplishments

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.

A major component of our Transformation Plan includes engaging families at the earliest opportunity and throughout the life of a case through the use of family centered meetings. Family centered meeting (FCM) is a broad term used in family support and child welfare services to describe a planning and decision making process that includes parents, caregivers, children, social workers and other service providers. It may also include extended family, friends and members of the community.

Research shows that at various stages of a child protection case, different decision-making models will better serve the needs of the children and family members. Therefore, we will produce the best results for children and families by having an array of decision-making models.

We believe that group decisions produce better results than decisions made by one person and groups that include family members and community partners produce better decisions than those made exclusively by professionals.

We believe this approach will increase permanent connections, improve placement stability, reduce custody cases, decrease length of stay when children do enter care and create stronger families and communities.

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

This goal is noted as successfully completed in the 2006 APSR.

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.

SFY 2007 Update

The Connections workgroups have been discontinued due to lack of participation. Many districts are now working with members of our central office Permanency Team to staff individual cases on an ongoing basis to determine permanency needs as well as their community partners. In addition, one of our team members is devoted to supporting family finding efforts in the districts. Currently she is actively working with 10 districts.

SFY 2008 Update

Monthly permanency meetings occur in almost every district by members of the Permanency Team. Currently as a result of these monthly meetings, we are tracking the highest number of children and youth to permanency. And, since 1996, we are at an all time low for children who are freed for adoption and in a need of a family. We believe that regular staffing of cases and the use of family centered meetings will, over time, result in more youth leaving custody with permanent connections.

SFY 2009 Update

Permanency meetings continue to produce good outcomes for children and youth in care. Our Permanency Composite 2: Timeliness of Adoptions continues to improve and has been above the National Standard for several years.

In addition to the monthly permanency meetings our Youth Development Coordinators are working with district offices to ensure that youth who leave DCF have meaningful, ongoing relationships with one or more adults who will provide personal support into adulthood.

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.

SFY 2007 Update

Contracted providers are partnering with district offices on training and delivery of a variety of activities targeted at assisting youth and families in achieving permanency including family group conferencing, signs of safety methods, family finding, and delivery of training and supports to kin providing care to children and youth. These efforts are currently occurring in 6 districts. Further expansion to additional districts and consolidation of efforts in existing districts is planned and will be reported on in next years APSR.

SFY 2008 Update

A core component of our Transformation Plan is to re-deploy resources, many of which are contracted services, to address workload, to promote social worker contact and to enhance timely attention to safety and permanency for all children and youth. Many strategies in our Transformation Plan and in our PIP will accomplish these goals.

- Increased family centered services and supports available in the front end;
- implement a new practice strategy, Effective Casework Model; and
- increase safe use of kinship care.

SFY 2009 Update

We have increased the number of contracts with our community partners to facilitate family centered meetings. Many of these meetings have resulted in children and youth leaving care before they “age out” or ensuring the youth has commitments from natural supports who can be called upon once out of foster care.

The Youth Development Program grants require districts to integrate lifelong connections best practices in current programming casework with each youth by following through with the first four phases of the lifelong connections model.

Youth Development Coordinators evaluate the nature and strength of relationships that youth are able to develop. They help youth develop skills that enhance relationships and coach them in effective communication skills.

Assessment of youth readiness for independent living for adolescents entering custody is conducted by administration of the Ansell-Casey Life Skills Assessment as part of the initial assessment process. Youth referred to the Youth Development Program who have not received a recent Ansell-Casey Life Skills Assessment receive one as part of the intake to the Youth Development Program.

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.

SFY 2007 Update

Preliminary findings from our second CFSR indicate that we have a lot of work to do to improve the frequency of social worker contact. While waiting for the final report we have revised the social worker contact policy and are developing a caseworker contact report to meet the requirements set forth in this plan. The revised policy, which includes contact standards as well as guidance on the content of visits, will be reviewed by supervisors during the summer. Below are excerpts from the draft policy:

Based on federal requirements, one face-to-face in-home or in-placement contact per month with children/youth by the social worker, in-custody or non-custody, is the contact minimum. Additional recommended monthly contacts, based on factors such as increased risk or crisis may be necessary. Together, the social worker and the supervisor should decide if additional contact is needed. There are several key elements that quality visits should include. Visits should be:

- primarily held in the child or youth's living situation (family or foster home) at times convenient for children/youth and caretakers;
- planned in advance of the visit and used as an opportunity to discuss issues pertinent to case planning, service delivery and goal attainment;
- used to complete a formal or informal assessment of the issues that impact safety and other issues or goals identified in the case plan;
- used as opportunities for open dialogue and meaningful consultation with and by children/youth and parents;
- individualized whenever possible, such as providing separate time for discussion with children/youth and parents;

- supportive and skill-generating, in order that children/youth and families feel safe in dealing with challenges and change, and are
- provided skills and tools to take advantage of resources and services.

The following procedure will be used to track and report caseworker visit data to HHS. We are in the process of modifying our contact notes collection screen which will be used to generate the required caseworker visit reports. Every contact note will include contact details and identify which client(s) the contact related to.

When the worker selects "Face-to-Face" as the form of contact, they will be required to document where the contact occurred and who was present at that face-to-face meeting.

For any period in question, we will query our placement data to determine which children were in foster care and for which full months. We will link this information with our contact data which will allow us to meet our federal reporting requirements. By linking placement and contact data, we will be able to determine which children were seen each and every month they were supposed to be seen and, determine if at least one of those monthly contacts occurred where the child was placed. Having this data will allow us to report the rate of children seen each and every month as well as the rate at which they were seen in their placement.

We will submit our FFY 2007 baseline data regarding current caseworker visitation and targets for improvement to HHS by the October 31, 2007 deadline. New caseworker visit funds were used to support caseworker visits with children who are in foster care.

SFY 2008 Update

The Department for Children and Families has made a significant investment in technology which will enable caseworkers to complete work while in the field. All of our caseworkers will be equipped with Q phones and laptops so they can make phone calls, check email, and complete assessments and case plans with clients in settings other than the district office. We believe this will have a significant impact on increasing caseworker contact and family engagement in case planning. Caseworker visit funds were expended on this technology for the field.

In June of 2007, members of our division management team visited the Lowell, MA DSS office to hear a presentation about an innovative teaming model that DSS has been piloted over the last two years. A member from the Child Welfare Training Partnership joined us. Those attending were very excited about the potential application of this model to our work in Vermont.

In September 2008, DSS staff came to our monthly supervisors' meetings to present to that group. Many of the supervisors were also intrigued by the possibilities, but appropriately, had many questions as well.

The potential benefits -- for reducing the stress on individual workers, for improving the timeliness and quality of our work with children and families, and for increasing social worker contact with children and families – are substantial.

To move forward with teaming, we will work on two activities simultaneously:

- Training and mentoring of current supervisors, to enable them to learn and practice new skills. This is necessary not only in anticipation of teaming, but also during implementation. This is best done during regular statewide or regional group meetings.
- Work with units of social workers that will help them to become a team. This requires purposeful work with the unit members to help them to understand the personalities and working styles of unit members, strengths and challenges, ways to communicate, have the hard conversations, etc. The unit, as it becomes a team, develops a written agreement that will guide their work together.

SFY 2009 Update

Caseworker visit data submitted in November 2008 showed that we did not reach our goal of 22% for monthly visits, we only reached 20.49%. However, we significantly increased the percent of visits in the placement setting from a baseline of 29% to 57.65%. We have increased focus and discussions on worker visits in district supervision and at Division wide meetings.

We believe that once workers get comfortable with the new technology which will enable caseworkers to complete work while in the field and once more districts implement Teaming we will reach our caseworker visit goals.

Caseworker Visit Data and Annual Targets

	2007	2008	2009	2010	2011
Children in foster care	1875	1781			
Children visited every calendar month they were in foster care by caseworker handling the case of the child.	213	365			
Goal VT Performance	11%	22% 20.49%	44%	67%	90%
Total number of visit months for children visited every month in foster care.	980				
Total number of visit months in which children were seen in child's placement setting by caseworker handling the case of the child.	283				
Percent	29%	57.65%			51+%

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.

SFY 2007 Update

The Quality Assurance Coordinator, hired in October 2006, was actively involved in securing input for the Statewide Assessment and also acted as a State Co-lead in the CFSR in April. She will plan an active role in PIP development and tracking as well.

Preliminary results of the CFSR indicate that we have improvements to make in engaging children and families in case planning. We have started revising our initial and ongoing case plan formats to ensure that they serve as an agreement between families and the Division. Our focus on family engagement through facilitated case consultations was identified in the April CFSR as an improvement in engaging families in decision making as well as service planning.

SFY 2008 Update

As stated earlier in this document, a major component of our Transformation Plan is family engagement in case planning and decision making. New case plan formats make it easier for workers to complete the required plans with clients.

Based on feedback from parents and youth, we eliminated a front section of the case plan that documented the initial abuse and/or neglect that resulted in custody.

Families told us that seeing this information again and again at administrative case reviews was painful and it overshadowed any progress made towards goals. Youth told us that it was particularly painful to read that about their parents over and over again.

In 2008 we made the decision to adopt the Effective Casework Model (ECM) as the casework practice framework for all case types. Implementing the ECM approach is a major component of our CFSR Program Improvement Plan. ECM is a structured practice model for providing targeted case management services based on an assessment of risk and needs. We have just completed a second round of a two-day training in the ECM. This approach utilizes motivational interviewing which is a true family engagement strategy.

SFY 2009 Update

We are currently working with the National Child Welfare Center on Organizational Improvement to develop the Effective Casework Model which will have a significant family engagement component. New case plan formats were implemented in January 2009. We have made several changes in response to feedback from the field. Implementation of differential response will emphasize family engagement from the initial contact with a family.

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.

SFY 2007 Update

The Quality Assurance Coordinator, hired in October 2006, convened a Placement Stability Work Group in January 2007, building and expanding upon the work done previously in 2005 and 2006. The work group reviewed division data and evidence based best practice literature and developed recommendations for addressing the issue of placement stability. Recommended goals and action items will be considered for our Program Improvement Plan.

SFY 2008 Update

The placement stability workgroup recommended that we adopt a family centered approach and engage families in our work. This is the intent of the Effective Casework Model and the use of family centered meetings both of which are in our PIP. In addition the workgroup suggested we address child/youth trauma as soon as possible. This will be addressed with initial and ongoing assessments which are also included in the Effective Casework Model.

SFY 2009 Update

Family Services is designing a state wide recruitment and retention strategy, with a goal of increasing the number of foster parents who are available for emergency placements, assessment placements, and who can provide foster care for sibling groups large and small.

Our plan is divided into three steps. First we are looking at each of the twelve districts, to analyze the placement history of the five children who have been in custody for less than one year, and have had the most number of placements.

Second, we are meeting with each of the twelve districts and gathering information from them on where they see the gaps or shortages in the out of home care system in their district, as well as state wide. Using this information, we will initiate the third step, which is to implement a targeted recruitment plan designed to meet the needs in each district which we hope will lead to better matching between children and foster families and increased placement stability.

Youth Justice Goals and Accomplishments

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.

SFY 2007 Update

The Youth and Family Integrated Treatment Practice Guidelines have been disseminated to seven "Centers of Excellence". The Centers are receiving training and support in best practices in integrated treatment including assessment tools, CBT/MET, and motivational interviewing, etc.

An MOU Service Agreement is currently under development between the Department of Health, divisions of Mental Health and Alcohol and Drug Abuse, and the Department for Children and Families, Family Services and Field Services.

Each of the agencies listed above who are party to the MOU provide training for their staff, staff at their designated preferred provider agencies, foster parents and others. We are tracking training that is provided by each of these agencies on order to identify where there are duplication and /or gaps in the trainings. Training areas are: evidence based practices in substance abuse and mental health and improvements in supervision.

Beginning in late FY07 and early FY08, youth who enter the secure Woodside facility will be screened immediately using MAYSIWARE. This tool screens for mental health and substance abuse issues including suicidality with the first 24 hours of their arrival. The information gathered from the screen informs staff about any vital concerns, and allows them to develop an appropriate supervising plan. Referrals are made as necessary.

SFY 2008 Update

Currently the MAYSI II screen and the DISC-V screen are administered to all youth who enter our secure facility. In addition, all youth who are on probation are screened using the Youth Assessment and Screening Instrument (YASI).

Lastly, all youth who are on probation and in custody for 30 days or more have a series of screens that also include the MAYSI II. As a result, all youth are now screened.

However, Vermont continues to have a high rate of teen drug and alcohol use coupled with a very low treatment rate. The Youth Justice unit of Family Services is working with Department of Health, divisions of Alcohol and Drug Abuse Programs and the Department of Mental Health to understand why youth with substance abuse issues are not being referred to treatment.

In addition, the Youth Justice unit of Family Services has been working with a statewide team to further develop interventions for youth who have been screened and assessed for substance abuse, mental health, trauma, and other issues related to their risk to reoffend. This statewide team is working to bring evidence-based practices to Vermont targeted for the juvenile justice population.

SFY 2009 Update

Beginning in January 2009, it is mandatory for all youth adjudicated delinquent, (regardless of custody status) and under the supervision of Family Services to be screened using the Youth Assessment and Screening Instrument (YASI).

In addition, the Youth Justice Work Group met with a statewide team from the Department of Health, Alcohol and Drug Abuse Programs, and the leadership from Vermont's only adolescent residential treatment facility, Valle Vista. The meeting triaged what the challenges are in identifying and referring youth to treatment. Lastly, the leadership from Valle Vista presented to staff at the statewide annual Youth Justice Training Day in April.

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.

SFY 2007 Update

All social workers who work with delinquents on probation have been trained on the Youth Assessment and Screening Instrument (YASI).

YASI assesses for risk and for protective factors in ten domains. The assessment of risk and protective factors directly informs a case plan that is developed as part of the tool. Implementation instructions include recommendations for case planning and case closure. In FY08, social workers who work with delinquents in custody will also be training on the YASI.

SFY 2008 Update

In 2008, Vermont made the decision to adopt the Effective Casework Model (ECM) as the casework practice model for all case types. Implementing the ECM approach is a major component of our CFSR Program Improvement Plan. ECM is a structured practice model for providing targeted case management services based on an assessment of risk and needs. We have just completed a second round of a two-day training in the ECM.

In addition, we have begun articulating the use of ECM as the statewide practice model in a variety of forums including the annual Juvenile Services Training Day, in division managers meetings, in statewide BARJ trainings, and as part of Family Service's Transformation Plan.

At the monthly Juvenile Justice Work Group meeting, each district has begun a process of articulating their action steps in their implementation plan for ECM and for YASI. For example, one district has begun by implementing the pre-screen component of YASI in order to divert cases appropriate for Diversion.

Next steps include integrating the targeted case management language and identification of risk and; needs into our collaborations with our community-based providers.

SFY 2009 Update

A workgroup has been meeting regularly to adapt the Effective Casework Model into a larger overarching practice model for all Family Services case types. The workgroup has been receiving national technical assistance from Steve Priester from the National Child Welfare Resource Center for Organizational Improvement and Stephanie Boyd Serafin from the National Resource Center for Foster Care and Permanency Planning.

In addition, supervisors and district directors participated in an Effective Casework Model quality assurance day-long workgroup in May with the contracted trainer for ECM and YASI.

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.

SFY 2007 Update

BARJ programs comprised of Community Support and Supervision and Restorative Probation continues to be offered throughout the state. In FY07 BARJ Directors advocated very hard to the General Assembly to maintain the funding necessary for the continuation of these programs. The Directors were successful in this important effort. BARJ programs are a valuable asset to the work being done in juvenile justice in DCF and are vital to supervision of youth on probation, community involvement and holding youth accountable.

Program staff and directors met regularly in FY07 to determine new outcomes and to continue building capacity and best practice for the BARJ framework model. The BARJ program staff are dedicated people who work hard to build relationships with youth and to help them turn their lives around.

SFY 2008 Update

Two years ago, the network of BARJ providers requested that funds be distributed according to a formula, much like the formula that Diversion uses to distribute their funds. The Youth Justice unit of Family Services just completed the development of a funding formula that is outcome and performance-based. The formula will be implemented for the next fiscal year. Base funding is calculated on caseload sizes in each district. Additional funding is provided based on two positive program outcomes: 1.) Completion of community service hours; and 2.) Number of successful case closures.

Secondly, Family Services is engaged with the BARJ provider system in a program enhancement process. For years the BARJ providers have been delivering two services, Streetcheckers and Restorative Justice Panels. As we transition to targeted services based on risk and need, it is critical that the BARJ providers are able to provide the types of community-based restorative justice interventions that match the risk and needs of our youth.

During this next year, we will evaluate the data we are able to gather on the risks and needs of our youth to identify and train the BARJ provider system in additional BARJ interventions.

SFY 2009 Update

A team with representatives from Family Services, the BARJ provider system, the Department of Mental Health, and the Department of Health, Alcohol and Drug Abuse Programs has been meeting to explore additional BARJ interventions. The team conducted a System Readiness Survey of all BARJ providers statewide to assess agency readiness to adopt new BARJ interventions, including evidence-based and clinical modalities.

Secondly, the team researched several modalities that were found to be most effective in the youth justice population. The team selected family group conferencing and Functional Family Therapy as modalities to explore with the BARJ provider system.

A Request for Proposals was posted in May for some sites to deliver family group conferencing services to youth adjudicated delinquent. A two-day family group conference training was held and attended by the successful bidders. Contracts to provide the service will begin July 1, 2009. The same process will be explored for sites providing Functional Family Therapy services for some time in the next fiscal year.

Chafee Foster Care Independence Program Accomplishments

Population Served

Vermont 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. The Statewide Coordinator reports that 652 eligible youth, ages 15-21 received services from the Youth Development Program during this reporting period.

The Youth Development Program shifted its emphasis toward older youth during 2009 in response to the implementation of Act 74 the Youth in Transition Law (state statute providing services to former foster youth aged 18-21).

Dependency to Self-Sufficiency

- Delivery of curriculum based life skills training is occurring in all regions of the state.
- The Transition Manual providing youth with the names of service providers, contact information and steps to take toward specific life skills goals specific to the area in which the youth resides has been developed and introduced in 6 of the 12 regions of the state. In 2010, the model will be introduced in the other 6 regions and a web based application developed.

Services for Employment

Family Services filed an unsuccessful employment grant application with the Vermont Department of Labor for a statewide jobs initiative in coordination the Vermont Coalition of Runaway and Homeless Youth Programs.

Targeted identification and recruitment of current and former foster youth for stimulus program employment is taking place statewide to maximize access to employment for foster youth.

Building Trades Outreach

Extensive layoffs in the building industry have resulted in this effort being suspended.

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

Passage of a new state statute allowing youth entering foster care to remain in their home school district until the completion of the current school year including funding for transportation has improved school stability for children and youth in care.

A pilot project using the Casey Breakthrough methodology, conducted in our Barre district office, targeted foster parent recruitment to support school stability. Data for this pilot shows that in 2006, children and youth entering foster care remained in their home school district 37% of the time. By the end of the pilot in 2008, educational stability had increased to 85%. Three additional districts have indicated their intent to implement a similar effort.

Vermont Student Assistance Corporation

Since the last update, Family Services has convened an on-going planning group to improve post-secondary outcomes for foster youth through early career exploration, better educational preparation, college recruitment, retention, and completion. Members of the group include former foster youth, college administrators, college student assistance professionals, Vermont Student Assistance Corporation outreach counselors, and Trio program staff.

During the last three years, the number of youth receiving outreach services has increased from 36 to 85. Another 63 are in application this year for a total of 148. Preliminary data suggests that access to these outreach services greatly increases the likelihood of high school completion, college application and enrollment.

Job Corps

The Northlands Job Corps continues to experience difficulties in recruiting and retaining former foster youth and other Vermont youth despite considerable effort and attention. A high level group continues to meet to review the situation.

College of St. Joseph

The College of St. Joseph's program to support foster youth entering college has seen dramatic growth since it's opening in 2007. Fifteen youth are currently enrolled or in application. To quote a youth attending the program, "This is the best thing that's ever happened to me. If you are going to support anything, this is it." Financial aid packages combining ETV funds, Vermont and Pell grants and Vermont Foster and Adoptive Association scholarships are being packaged by VSAC and the college to minimize loan indebtedness for youth in the program.

Provide personal and emotional support to youth through mentors, and the promotion of interactions with dedicated adults

DCF/FS has recognized the importance of lifelong connections for youth. New language has been added to the YDP grants requiring districts to integrate lifelong connections best practices in current programming casework with each youth by following through with the first four phases of the lifelong connections model.

Provide financial, housing counseling, employment, education, and other appropriate services and support to youth 18-22

The Youth Development Program is shifting its emphasis to providing a full range of services to qualifying youth. Act 74 funds are now providing financial support for housing and related services for 158 youth age 18-21 through this state initiative funded solely with state general funds. Supports are provided in the following areas:

- Completion of secondary education for youth who reach their 18th birthday while in DCF custody;
- Adult Living Program; and
- Housing Support Program.

Goal YD1

Develop systems for comprehensive program oversight and accountability including fiscal accountability, data reporting and analysis, contract compliance for providers

SFY 2009 Update

Family Services continues to work on our data collection and analysis capacity and we have obtained technical assistance in this effort. The data system will meet the requirements of Act 74, our state Youth in Transition law, program quality assurance needs and CFCIP NYTD performance and cohort outcome measures. We are on schedule to meet the implementation requirements of NYTD program instructions.

Our State Independent Living Coordinator and Data Director will be attending the NYTD conference at the end of June, 2009. The following areas are reported monthly using an electronic data reporting format implemented this year.

- To insure that program expenditures are consistent with the purposes of CFCIP, grantee agencies are required to submit a budget at the beginning of each grant year and report on expenditures quarterly. **100% compliance**
- Program performance and outcome data collection and reporting is required in the following areas:
 1. Health Care Enrollments;
 2. Post Secondary Education;
 3. Lifelong Connections Case Work Practice;
 4. Number of Cases/Case Management;
 5. Category Characteristics of Direct Service;
 6. Category Characteristics of Case Consultation; and
 7. Category Characteristics of Enrollment in Community Resources/Activities.

Youth Development Committee

The Youth Development Committee continues with 31 active members. The committee decided this year to take on full responsibility for planning and running the annual Youth Conference.

With limited adult participation, they arranged and ran a conference for over 200 youth and adults, that was, by all measures, a great success. They have already begun planning for next year.

Youth Input to Child Welfare

DCF Commissioner Stephen R. Dale and Family Services Deputy Commissioner, Cynthia K. Walcott continue to hold regular meetings with the Youth Development Committee to inform the department about ongoing issues and concerns of youth in care.

New England Youth Coalition Collaboration

This group has continued to meet to collaborate and advise the New England Child Welfare Commissioners. The Vermont Youth Development Committee will continue to participate.

Technical Assistance for Youth Leadership Development

Family Services, on behalf of the Youth Development Committee, will be requesting additional technical assistance from the National Resource Center for Youth Development (NRCYD), to assist them on strategic planning.

Act 74 Implementation

State Youth Development Coordinator is conducting trainings on changes to Chafee Foster Care Independence Program services and Act 74 Extended Care resources with state child welfare staff to maximize opportunities for youth to access these services. Seven of twelve district trainings have taken place.

Medicaid Access

Family Services is participating in our state’s Youth in Transition Leadership Team, an interagency group which meets on an on-going basis to improve how our combined system is meeting the needs of all youth transitioning to adulthood, in particular those in foster care and/or those with disabilities or at-risk youth.

This larger group is working with our Global Commitment Medicaid Waiver steering committee to maximize access to medical care for youth in transition including expansion of Medicaid eligibility.

ETV Funds Distribution

State Fiscal Year	Total Participants	Total funds expended
FFY 07	49	\$101,624
FFY 08	55	\$ 96,811
FFY 09	64	\$121,798

Training and Technical Assistance in Support of Goals

Training

In addition to our New and Existing Employee Training, 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 Family Services staff, supporting efforts at systems change, and spreading knowledge and practice skills based on evidence.

Training offered in districts in 2008-2009 included:

- Evidence Based Practice and Solution Focused engagement skills
- Management consultation; team building; strategic planning
- Family Safety Planning facilitated case consultation
- Enhancing Parent-Child Family Time
- Family Group Decision Making – on request
- Family Finding
- Differential response: Engagement & assessment skills mandatory trainings for all staff scheduled in June 2009.

Technical Assistance

We are working with several National Resource Centers on the following areas of improvement.

Primary Strategies	Technical Assistance
Developing multiple approaches and guidelines on working with intact families	National Resource Center for Organizational Improvement National Resource Center for Family Centered Practice and Permanency Planning.
Re-design role, tasks and performance expectations for supervisory staff statewide	National Resource Center for Organizational Improvement National Resource Center for Child Welfare and Data Technology
Federal database assistance	National Resource Center for Youth Development
Youth leadership development	National Foster Club All Star for Youth Development Committee

Attachments

A. 2009 Citizens Review Panel Annual Report