## TABLE OF CONTENTS

I. OVERVIEW ....................................................................................................................... 5

II. SERVICES AND PROGRAMS ..................................................................................... 14

III. OUTCOME AND GOALS .............................................................................................. 20

IV. TRAINING AND STAFF DEVELOPMENT ................................................................. 127

V. QUALITY ASSURANCE AND EVALUATION ............................................................... 136

VI. MANAGEMENT INFORMATION SYSTEMS ............................................................... 142

VII. UPDATE ON THE CHILD WELFARE DEMONSTRATION PROJECT UNDER SECTION 1130 OF THE ACT ..................................................................................... 146

VIII. EVALUATION AND TECHNICAL ASSISTANCE..................................................... 149

IX. REQUIREMENTS UNDER CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA) ....................................................................................................................... 151

X. CHAFEE FOSTER CARE INDEPENDENCE PROGRAM (CFCIP) AND EDUCATION AND TRAINING VOUCHERS (ETV) PROGRAM .................................................. 169
APPENDICES

ATTACHMENT A: Table of Organization - Ohio Department of Job and Family Services

ATTACHMENT B: Table of Organization – Office for Children and Families

ATTACHMENT C: CFS 101, PART I (Annual & Revised Budget Request for Title IV-B, subparts 1 and 2; CAPTA; CFCIP; and ETV)

ATTACHMENT D: CFS 101, PART II (Annual & Revised Summary of Child and Family Services)

ATTACHMENT E: “Spectrum of Prevention”

ATTACHMENT F: “Attention Adults: YOU are the KEY” Awareness Materials

ATTACHMENT G: A Sample Family Well-Being Calendar

ATTACHMENT H: OCTF Brochures and Other Print Material Giveaways

ATTACHMENT I: Placement Stability of Public Children Services Agencies

ATTACHMENT J: Resource Family Recruitment Satisfaction Survey

ATTACHMENT K: Length of Time Adoption On-Line Survey Results

ATTACHMENT L: TPR (Termination of Parental Rights) Tracking Tool

ATTACHMENT M: Concurrent Planning Questionnaire Results

ATTACHMENT N: A Focus on Ohio’s Faith-based Partnerships Brochure

ATTACHMENT O: 2005 AdoptOHIO Kids Incentive Payments to PCSA

ATTACHMENT P: Survey of Local Implementation of the ICWA


ATTACHMENT R: Adoption Participants: What Every Mental Health Professional Needs to Know
APPENDICES

ATTACHMENT S: SFY05 Post Adoption Special Services Subsidy (PASSS) Report

ATTACHMENT T: “Strengthening Families through Early Care and Education”

ATTACHMENT U: ODJFS Pre-Service Training Review Tool

ATTACHMENT V: 2004 Ohio Adoption and Foster Care Conference Brochure

ATTACHMENT W: Waiting Families, Waiting Children Report

ATTACHMENT X: Adopt Cuyahoga’s Kids Initiative

ATTACHMENT Y: FCAS Manual Transmittal Letter No. 82 – MEPA and Title VI Policy OAC Rule Changes Due to MEPA and Title VI

ATTACHMENT Z: Children, Families and the Courts – Ohio Bulletin

ATTACHMENT AA: MEPA and Title VI Policy Review Checklist for Adoption

ATTACHMENT BB: Community Evaluation Teams and Citizen Review Boards Semi-Annual Reports

ATTACHMENT CC: Training Activities Which Will Be Cost Allocated to Title IV-E
I. ADMINISTRATION AND SERVICE DELIVERY

Overview

The Ohio Department of Job and Family Services (ODJFS) is led by a director, appointed by the Governor and serves as a member of the Governor’s Cabinet. The Director has statutory responsibility for supervising the administration of human services in the state, while much of the day-to-day operation and coordination is delegated to other staff within the department.

The Office for Children and Families (OCF) is overseen by a deputy director and has responsibility for the development and supervision of service programs to meet the needs of children and families at risk of abuse/neglect or in need of protective services and child care. (See Appendix, Attachment A and B for the ODJFS/OCF Tables of Organization.) The OCF also has responsibility for the supervision of Title IV-B, subparts 1 and 2; CAPTA; CFCIP, including the ETV program; CFS-101, Parts I and II, Annual Budget Request (See Appendix, Attachment C) and Annual Summary of Child and Family Services (See Appendix, Attachment D); Title IV-E, including section 477; Title XX; and Title XIX, in part.

Ohio’s Child and Family Services Plan (CFSP) developed in conjunction with the federal Child and Family Services Review (CFSR) Final Report and the PIP (Program Improvement Plan), focuses on achievement of positive outcomes for children and families. In identifying strategies to achieve positive outcomes for Ohio’s children and families, the Ohio Department of Job and Family Services (ODJFS) had to take into account that child welfare services are delivered in a state-supervised county-administered environment. The ODJFS is the designated state agency responsible for overseeing the operation of 88 public children services agencies (PCSAs), which are responsible for:

- Receiving and investigating reports involving any child alleged to be abused, neglected, or dependent.
- Providing protective services and emergency supportive services to allow children to remain in their own homes.
- Accepting temporary or permanent custody of children from the court.
- Providing out-of-home care for children who cannot remain at home, while providing services to the family directed at reunification.
- Recruiting and maintaining foster and adoptive parents.
- Placing children for adoption or other permanent living arrangements.
• Providing independent living services to assist children as they transition from being in agency custody to independence.

In addition, ODJFS had to be mindful of the following factors that will have a direct bearing on the successful achievement of any strategy, and ultimately the goals established:

- Ohio’s 88 PCSAs differences in population size, demographics, community values and norms.
- Fiscal and human resources are established at the state and local levels.
- Services needed by families and children involved with PCSAs may be provided by other agencies, and the support for system change needs to be obtained from agencies at the state and county level that provide mental health, alcohol and drug addiction, mental retardation and developmental disabilities, and educational services. In addition, support is received from domestic violence shelters, child care, public assistance, child support enforcement, the judicial system, probations and law enforcement. The majority of the services are provided at the local level, not at the state level.
- Courts may be configured differently (e.g., combined juvenile and probate courts, separate juvenile courts) and may have diverse procedures for handling PCSA and private child placing agency (PCPA) actions.

The OCF has been instituting a systematic approach for using data to drive decision-making. In April 2000, OCF staff was organized to address the CFSR requirements. To continue this proactive stance, all monitoring and data analysis responsibilities for OCF were moved into one bureau, the Bureau of Outcome Management.

To maintain the focus on achievement of positive outcomes for children and families, the OCF continued to implement and plan concurrent initiatives. A Child and Family Services Review Executive Leadership Committee (CFSR ELC) was formed. The committee was comprised of state level PCSA directors, other state department directors or appointees, a Juvenile Court Magistrate, other court personnel, child welfare advocates, and ODJFS staff. This committee advised the OCF regarding implementation of the CFSR requirements. The committee also reviewed and made recommendations for approval of the Statewide Assessment prior to submission to HHS. The actual hands-on development of the Statewide Assessment was completed by the ten CFSR ELC Subcommittees that were comprised of subject matter experts in the field of child welfare.
Prior to the release of the CFSR Final Report, the CFSR ELC was reconstituted into the ODJFS, Office for Children and Families Executive Leadership Committee (OCF ELC). The role of this ELC is to advise the OCF on the direction of child welfare/child care practice at the local level and participate in workgroups to create/revise policies to achieve the desired outcomes. The OCF ELC committee reviewed and made recommendations for approval of this CFSP prior to submission to HHS. The OCF ELC also assists the OCF in securing PCSA oversight and compliance with Ohio’s CFSP as well as the PIP. This ELC has a more comprehensive goal and function than the CFSR ELC. This has allowed better utilization of scarce county and state resources. The ELC is jointly chaired by the Public Children Services Association of Ohio (PCSAO) Director and the OCF Deputy Director.

Another step in the systematic approach to using data to drive decision-making is the initiation of monthly meetings of OCF staff to monitor Ohio’s achievement of the “National Standards.” Staff reviewed and discussed the relationships between federal and state policies, data in FACSIS (Family and Children Services Information System) and DART, (Data Analysis Reporting Tool) the CPOE (Child Protection Oversight and Evaluation) data indicators, CPOE reports and agency approved Quality Improvement Plans (QIP). These discussions have been an initial step in building staff’s capacity to conduct data analysis.

The choice to use data to drive decision-making has laid the foundation for the ODJFS, Office for Children and Families’ Framework for Total Quality Management. In order to achieve the established CFSP goals, it was identified that the Total Quality Management strategy needed to be continued, in whole or in part, across Safety, Permanency, Well-Being, and Systemic Outcomes. Below are the six strategies that comprise Ohio’s approach to the Framework for Total Quality Management:

**Data**

Data on clients, families, incidents and resources are supported by FACSIS. FACSIS, which was established in 1986, does not provide automated decision-making support. It is an event driven system with limited integration of case information. FACSIS does provide data to meet the federal reporting requirements – AFCARS and NCANDS. The counties input of data into FACSIS is the first component in the Framework for Total Quality Management (FFTQM).

Ohio’s FFTQM begins with and ends its cycle with data. After all the components of the FFTQM are completed, the quality of the data that the counties input in the information system should improve, and take Ohio closer to achieving positive outcomes for children and families.

**Data Analysis**

The second component in the FFTQM is data analysis. FACSIS was not designed to provide
analysis and reporting of the information at the county level. Data in the mainframe system is accessible for analysis and reporting at the state level. Access by state staff requires specific skills and knowledge of the system to write programs to extract data in the specific event order, and produce meaningful reports. To address this problem, a Business Intelligence software tool, COGNOS, was utilized. COGNOS, referred to as the DART in Ohio, was developed and made available to PCSAs and ODJFS staff who need to examine, track, report and analyze data from HostFACSIS (mainframe FACSIS). Established data sets can be accessed at a statewide aggregate level or be analyzed down to an agency’s specific case identifying information level (e.g., names, ages). This software tool gives users the flexibility to explore multiple combinations of data within a topical data set across two or more dimensions.

Data drawn from HostFACSIS and contained in DART is organized into cubes that allow users to see data on at least two dimensions. Each cube has reporting capabilities. The following thirteen cubes were developed based on the CPOE outcome indicators (Refer to Section V, Quality Assurance and Evaluation for additional information on CPOE):

- **Reports and Investigations** - measures the timeliness of investigation initiation and completion of reports of child abuse and neglect.

- **Recidivism of Child Abuse and Neglect Reports** - measures the recurrence of reports of child abuse and neglect.

- **Recidivism of Substantiated or Indicated Child Abuse and Neglect Reports** - shows differences between opened and unopened cases for substantiated and indicated child abuse and neglect cases, as well as recidivism on closed cases.

- **Child Abuse and Neglect and Subsequent Removal** - determines the percentage of child abuse and neglect cases in which children are removed from their homes.

- **Duration of Temporary Custody Not Including PPLA (Planned Permanent Living Arrangement)** - illustrates the length of time children are in temporary custody status and excludes PPLA status.

- **Duration of Temporary Custody Including PPLA** - illustrates the length of time children are in temporary custody status and includes PPLA status.

- **Child Abuse or Neglect by Foster Parent** - tracks child abuse and neglect incidents by foster parents.

- **Duration of Placement** - measures how long children placed out of the home are in placement.
Each cube contains dimensions that are usually geographic, demographic, dates, or status related to case history. Data in DART can be manipulated in order to examine trends, as well as conduct entry and exit cohort analysis.

The information contained in DART will be used by State and county staff to monitor and evaluate quantitative performance on achievement of select PIP/CFSP activities, develop process consultation strategies, develop policy recommendations, develop alternative courses of action during PIP/CFSP roll-out and implementation, and guide CPOE quality improvement efforts. This new technology has allowed data to be easily distributed to the counties.

Policy

The third component in the FFTQM is Policy, which includes the Code of Federal Regulations, the Ohio Revised Code (ORC), the Ohio Administrative Code (OAC), best practice guidelines, procedure letters, and child welfare manuals, e.g., Family, Children and Adult Services Manual. An example of best practice guidelines is the PCSAO’s Child Protective Services Standards for Effective Practice.

Training

The fourth component in the FFTQM is training, which consists of OAC rule briefings, DART training, data analysis training, automated systems training, and training offered to caseworkers, supervisors, other PCSA/PCPA/PNA (Private Non-Custodial Agency) staff through the Ohio Child Welfare Training Program (OCWTP) and ODJFS sponsored training events. The OAC rule briefings are not the same as the skill building approach to training offered through the OCWTP. For rule briefings, OCF staff that have the expertise related to the revised OAC rules provide an overview of rule changes to county and state staff and
OCWTP trainers. This training is traditionally offered prior to the effective date of the rule, thus allowing the county time to develop implementation strategies. Refer to Section IV, Staff Development and Training for additional information regarding OCWTP.

Agency Reviews

The fifth component in the FFTQM is agency reviews. PCSAs may be accredited by COA. However, PCSAs will have a CPOE review and possibly a review by Children Services Licensing if the PCSA has foster homes, group homes or children residential care facilities. For PCPAs and PNAs, they will engage in a children services licensing review.

COA

ODJFS offered to reimburse PCSAs for a portion of cost incurred for accreditation of their programs by the COA for Child and Family Services. COA promotes standards; champions quality services for children, youth and families; and advocates for the value of accreditation. ODJFS’ long term goal is to have all 88 PCSAs accredited. ODJFS, at the state level, has applied for accreditation as well. The COA onsite review is scheduled for fall 2006.

CPOE

The Child Protection Oversight and Evaluation (CPOE) system is designed to improve services and outcomes for families and children by approaching solutions through partnership between the PCSA and ODJFS staff. The review process focuses on key delivery processes and essential client outcomes within a continuous quality improvement framework. CPOE allows PCSAs and the state to move toward a self-evaluating process, rather than a rule-based monitoring process. The PCSA strengths and opportunities for improvement are supported through the provision of technical assistance by ODJFS staff. CPOE reviews of a PCSA continue to occur every 24 months. During each of the 24-month review period, core indicators are reviewed.

The CPOE process utilizes core indicators which provide necessary information to support county practice and management. In each review stage, a core set of indicators is chosen. PCSAs also have the ability to evaluate past indicators or additional programmatic areas at their discretion.

The CPOE process is comprised of an ongoing set of activities. Joint assessment and enhancement planning by the PCSA and ODJFS are expected to promote the effective and efficient service delivery of child protection services (CPS). Critical operative concepts of CPOE include regular data collection, analysis and verification, and continuous feedback.

An on-site review process concludes with a detailed report of the activities and findings of the
review. The report provides documentation of the review events and supported findings tailored to the needs of the PCSA and ODJFS program/policy sections.

Quality Improvement Plans (QIPS) are created by PCSAs based upon findings contained in the final report and are focused on the individual county’s identified areas of improvement, or areas that require effort to maintain progress. Any areas of concern that are addressed in the CPOE report are required to be included in the QIP and must be addressed by the PCSA. QIPS include steps for addressing effective change to the issues contained in the CPOE report and areas of strategic activity as prioritized by the PCSA. The QIPS are submitted to ODJFS and are then reviewed for approval. ODJFS has the responsibility for monitoring the PCSAs progress in achieving the specific goals identified in the plan. Several PCSAs have incorporated their CPOE QIPS into their five-year strategic planning process. Refer to Section V, Quality Assurance and Evaluation for additional information regarding CPOE

**Children Services Licensing**

The Children Services Licensing Section of the Bureau of Accountability and Regulation monitors and enforces compliance with OAC rules that govern PCSAs, PCPAs and private noncustodial agencies (PNA). The rules are considered minimum standards designed to provide safe, twenty-four hour out-of-home care for all children in Ohio when placement in out-of-home care has been deemed necessary. The OAC rules are written under the authority of Sections 5103.02-5103.19 of the ORC. Meeting these standards is therefore required by state law and the OAC.

Private agencies are certified as one of the two types of private agencies, PCPAs and PNAs are certified to perform specific functions. PCPAs are certified to accept temporary, legal and permanent custody of children and to place children for foster care or adoption. PNAs do not accept custody of children and do not place children for foster care and adoption; however, a PNA may be certified “to participate in the placement of children for foster care and/or adoption.” To participate means to facilitate a placement but not to make the actual placement decision.

For a PCSA, the foster home program on-site review is completed every 18 to 24 months. The timeframe for this review is flexible in that there is at least 18 months and no more than 24 months between the last entrance date to the current entrance date. This 18-24 month window of time is usually referred to as entrance to entrance. For the certified functions of PCSAs, PCPAs and PNAs the on-site review is scheduled according to the certificate date. In the two-year certificate period, three on-site reviews, including at least one unannounced review, are completed. The reviews, while compliance and enforcement driven, are also performance and strength based. The reviews identify the areas where an agency is operating in substantial compliance (90%-100%) with the rules. The reviews also identify areas where improvement could be made (75%-89% compliance). Agencies that are found to be in substantial
compliance with the rules are often used as resources for agencies who are struggling to maintain compliance.

A corrective action plan (CAP) is required for record review noncompliance that is below 75% for each individual line item on the record review forms. Policies must be found in 100% compliance. There is also no percentage score for on-site physical site rule requirements, such as beds for children. This noncompliance must be immediately corrected. CAPs are designed to prevent future noncompliance and to correct current noncompliance. CAPs must be systemic and case specific and must include a time frame for correction of the noncompliance, no more than 30 days unless special approval is granted. Implementation of the CAP is monitored during each subsequent on-site review until compliance is achieved. If for some reason the agency fails to implement a CAP, denial or revocation of the agency’s certificate may be initiated.

**Process Consultation**

The sixth component in the FFTQM is process consultation. Process consultation is provided to PCSAs with the highest percentage of noncompliance with the six core CPOE indicators and the non-core indicator on timeliness of initiating investigations of reports of child maltreatment. Data is reviewed in DART to select the two agencies that have the greatest adverse impact on overall statewide performance for each indicator. The steps in the process of process consultation include:

- Development of a county profile [e.g., whether child welfare levy (a tax targeted to the Child Welfare Program) is in effect, CPOE reports, staffing patterns].

- Review and analyze the data in DART for each of the six core CPOE indicators and the non-core indicator on timeliness of initiating investigations of reports of child maltreatment. For each of the identified counties, conduct an analysis of trends, entry and exit cohort data, and longitude data.

- Contact the identified counties to mutually identify possible factors causing the county to fall below the state standard for the outcome.

- Form a team which has expertise to address some of the issues identified. Teams could consist of state staff or county staff that has expertise in: fiscal planning, management information systems, data analysis, program design, training and mentoring. Additionally, ODJFS may seek assistance from one of the Resource Centers for on-site technical assistance.

- Evaluation of process consultation through evaluation of county data prior to and following technical assistance.
Share initiatives and strategies learned from the process consultation with PCSAs and PCPAs.

The two counties targeted for process consultation is Franklin (Columbus Metro) and Cuyahoga (Cleveland Metro) counties. Based upon the “August 2003 Ohio County Indicators” study released by Ohio Development of Development, these two counties represent 22% of the population base in Ohio and have the largest number of children under the age of 18. These two counties had the highest percentage of non-compliance with the “National Standards” and have the greatest adverse impact on overall statewide performance. In addition, these counties have the largest out-of-home care population in the state and would have the greatest adverse impact on overall statewide performance. The process consultation will be for CFSR PIP Items: #1, Timelines of Initiating Investigations of Reports of Child Maltreatment; #2A, Repeat Maltreatment: Recurrence of Child Maltreatment; #2B, Repeat Maltreatment: Child Abuse and/or Neglect In Foster Care; #5, Foster Care Re-entries; #6, Stability in Foster Care; #8, Reunification, Guardianship, or Permanent Placement with Relatives. Based upon “lessons learned” from these two counties during the process consultation, ODJFS will disseminate information via regional and statewide meetings with PCSA/PCPA staff, on the results of the process consultation strategies used by the two agencies.
II. SERVICES AND PROGRAMS

This section provides a discussion of Ohio’s Social Security Act Title IV programs and services including: Title IV-B, Subparts 1 and 2; CFCIP, ETV and CAPTA. Although not included as formalized components of Ohio’s CFSP, Title XX and Title XIX of the Social Security Act are program and service supports to Ohio’s child protective services system and are so identified in this section.

Title IV-B, Subpart 1

The Title IV-B, Subpart 1 program provides a broad base of direct and indirect child protective services, including adoption, foster care, protective services, staff development and training. These services cannot be denied solely on the basis of financial need, legal residence, social status, or religion and the determination of service need is the responsibility of the PCSA.

Title IV-B, Subpart 2

The Title IV-B, Subpart 2 program provides family preservation and family support services. OCF’s practice instructions for family preservation activities presently funded under Title IV-B, Subpart 2, allow "family preservation activities" to include services in support of maintaining adoptive placements and services in support of time-limited reunification goals. The program’s aim is assuring the safety of the child; promoting healthy child development; assisting children and families to resolve crises; preventing unnecessary out-of-home placement of children; helping children already in out-of-home care to be returned to and maintained with their families; and prevention activities designed to alleviate stress and promote parental competencies and behavior that will increase the ability of families to successfully nurture their children.

CAPTA

ODJFS develops statewide policy and program initiatives to address the problem of child abuse and neglect. Program goals include: promoting inter-agency coordination to protect children from abuse and neglect; allowing more effective delivery of services to families; providing strength-based, family-focused casework practice with an emphasis on child safety, permanency, and child and family well-being; and promoting statewide child abuse and neglect prevention through public education and public awareness campaigns. Additionally, the CPS program provides leadership in policy development to address the problem of child abuse and neglect. Refer to Section IX, Child Abuse Prevention and Treatment Act (CAPTA) for additional information regarding CAPTA and the CFSP.

In addition, the Ohio Children’s Trust Fund (OCTF) serves as the Ohio’s lead agency for the
Community-Based Child Abuse prevention (CB-CAP) grant, under CAPTA Title II, which focuses on strengthening and supporting families to reduce child abuse and neglect.

**CFCIP/ETV**

ODJFS’ implementation of the Chafee Foster Care Independence Program (Independent Living Program) provides services to assist youth preparing to live independent, self-sufficient lives upon leaving substitute care. Services include: outreach; individual and group counseling; preparation for GED or higher education; job search assistance and placement programs; instruction in basic living skills; parenting; health care; transportation; housing; self-esteem and self-confidence counseling; and interpersonal and social skills training and development. Refer to Section X, “Chafee Foster Care Independence and Education and Training Voucher Programs” for additional information regarding CFCIP/ETV and the CFSP.

**Title XIX**

The Title XIX program permits the availability of childhood medical care programs. Medicaid funds are claimed for health-associated child welfare services.

**Title XX**

The Title XX program offers a wide range of services directed at improving the quality of life for families and their children. More than 32% of the Title XX funds provide services to children known and unknown to the PCSAs. The Title XX program also supports ODJFS’ statewide child welfare and adult services training programs.

**Adoption Promotion and Supports**

A permanent family is an inherent right of every child, and for the children entering the child protection system, the family of choice is the child’s birth or kin family. However, at any given time, more than 3,500 children are in the permanent custody of a PCSA or PCPA, where returning to a birth or kin family is not an option.

When a suitable relative cannot be found, the PCSA or PCPA works to locate a suitable non-relative to assume custody, primarily through adoption.

**AdoptOHIO KIDS**

ODJFS provides outcome based financial incentives to the 88 public children service agencies (PCSAs) through the program, AdoptOHIO Kids. The specific adoption goals are two-fold. First, to increase the number of older children who receive permanent homes, the target being “Children Ages 9 or Older” and second, is to address an outcome from the
federal Child and Family Services Reviews which is to reduce the length of time it takes to achieve adoptions of children by increasing the number of “Children Adopted in Less Than 24 Months” specifically for children aged two years or less.

AdoptOHIO Kids goals include increasing the overall number of children adopted each year with a special emphasis on:

- Meeting the Child and Family Review (CFSR) national standard of 32 percent for finalizing the adoption of children within 24 months from their initial custody, and

- Finalization of children who are both ages 9 or older and who have been in the custody of the agency for 24 months or longer.

A total of $5.0 million dollars is available in SFY’05 for AdoptOHIO Kids Incentive funds to PCSAs. The funds are being disseminated in a manner which overcomes past issues and promotes specific adoption goals. One of the past issues is the time it took for PCSAs to receive funding. This year, funds were disseminated based on PCSA adoptions achieved during Calendar Year (CY) 2004.

There are four components to the AdoptOHIO Kids incentives which are as follows:

- Incentives to all PCSAs (except Cuyahoga and Franklin) based on the CPOE assigned county size which meet at least one of the following three baselines. Small to Medium-small sized counties that meet this measure will receive $10,000; Medium to Large counties will receive $20,000; and, Metro to Major-metro counties will receive $30,000;

- Incentives to all PCSAs (except Cuyahoga and Franklin) which exceed baseline performance for all adoptions by the end of December, 2004;

- Incentives to all PCSAs (except Cuyahoga and Franklin) which exceed baseline performance for specific target groups:
  - “Children Ages 9 or Older” and,
  - “Children Adopted in Less Than 24 Months;” and,

- Incentives to Cuyahoga and Franklin PCSAs for the adoption of “Children Ages 9 or Older.”

With the exception of Cuyahoga and Franklin counties the total amount of incentive funds that agencies will receive, including the base payment for meeting at least one of the incentives, shall not exceed $60,000 for Small to Medium-small counties, $120,000 for Medium to Large counties and $230,000 for Metro to Major-metro counties.
Specialized Support Services

Quality Assurance, Ohio Adoption Photo Listing and Marketing Vendors

The quality assurance vendor provides specialized administrative support for the implementation of AdoptOHIO KIDS program. The vendor monitors and evaluates the effectiveness of the various components of the AdoptOHIO KIDS program to ensure that it is having the intended effect and to continuously improve and enhance the program in an ongoing effort to reduce the number of children awaiting adoption in Ohio (i.e., statistical updates, evaluation of short and long term outcomes, effectiveness of promotion of collaboration.) The vendor has produced several reports that have been distributed, including:

- 2004 Adoption Performance Report;
- 2004 Timeliness to Adoption: An Analysis of County Performance;
- 2004 The Impact of Appeals on Timeliness to Adoption; and,
- Focus Group Result on Ohio AdoptOHIO Photo Listing Children’s.

The Ohio Adoption Photo Listing (OAPL) vendor publishes between 15 to 20 OAPL Features Books each year which provide more extensive narratives and pictures of children who have been waiting the longest. Additionally, ODJFS continues to maintain the AdoptOHIO Photo Listing Web Site which currently features over 1600 waiting children.

ODJFS is currently involved in negotiations to select a market event planner to assist in planning The Statewide Adoption and Foster Care Conference in November 2005.

Post Adoption Special Services Subsidy (PASSS)

Post Adoption Special Services Subsidy (PASSS) is a state-funded program designed to assist eligible families with “special needs” adoptive children after adoption finalization. This subsidy is available for all adoptive families except step parent adoptions. The child does not have to meet either state or federal definition of “special needs” except for the following criteria. The child with “special needs” is: due to physical, developmental, mental and emotional condition, that preceded the adoption finalization; expenses to address “special needs” are beyond the family’s economic resources and the family explored all other sources of assistance; the family is an Ohio resident and the child is not in custody of the PCSA or PCPA; and, the child must be under 18 of age (under 21 if mentally or physically handicapped). There are no income restrictions on receiving assistance; the subsidy is available to all adoptive families regardless of the type of adoption (international, attorney, public or private agency).
PASSS covers services that are not covered by other adoption subsidies, insurance programs or Medicaid. The services covered include:

- Medical and surgical services (including respite care services which shall not exceed $2,400);
- Psychiatric, psychological and counseling services (including respite care services); and,
- Residential treatment services (maintenance and treatment costs only).

Ohio Administrative Code rule 5101:2-44-13.1 defines the eligibility and application process for the PASSS program. The provisions are as follows:

- $10,000 per child per State Fiscal Year (SFY) unless “extraordinary circumstances” exist;
- If extraordinary circumstances exist, the limit may be increased to $15,000 per child per State Fiscal Year (SFY); and,
- Requests for additional PASSS funding must be submitted on the JFS 01051 form.

**Multiethnic Placement Act**

Multi-Ethnic Placement Act (MEPA) staff developed the action steps and measures relative to recruitment, as captured in the CFSR, PIP. The goal of the recruitment action steps is to increase the number of minorities in the statewide pool of approved adoptive applicants and families.

**Program Development for Gaps in Services**

ODJFS is currently involved in several joint initiatives with our sister agencies and community partners to assess gaps in service provision and to develop programming to meet identified needs. Some of these are described below:

**Access to Better Care**

The *Access to Better Care* project was convened by the Public Children’s Services Agency of Ohio (PCSAXO) in the fall of 2003 and is currently being promoted by the Governor to specifically address behavioral health care programming issues. Partners in this effort include: ODJFS (Office of Ohio Health Plans, Office for Children and Families, and the Directors’ Office), the Ohio Department of Mental Health, the Ohio Department of Health, the Ohio Department of Education, the Ohio Department of Alcohol and Drug Addiction Services, the
Ohio Department of Youth Services, the Ohio Department of Mental Retardation and Developmental Disabilities, Ohio Family and Children First, PCSAO, the Association of County Behavioral Health Providers, the Ohio Federation for Children’s Mental Health, the Ohio Citizen Advocates for Chemical Dependency Prevention and Treatment, and the Center for Innovative Practice. The goals of this group are to: define needed services throughout the State by specific population groups; develop coordinated funding mechanisms among the child serving departments; and to promote effective, research-based interventions.

**Intensive Home and Community-Based Services**

The establishment of *Intensive Home and Community-Based Services* is currently being undertaken by ODJFS and the Ohio Department of Mental Health. An amendment to Ohio’s Health Plan will be sought to enable the provision of Medicaid- reimbursable bundled mental health services that can be provided in the child’s natural environment. The goal of this project is to increase the availability of local, holistic services which can be tailored to better address the unique needs of each family.

**Shared Agenda and Mental Health Networks for School Success**

ODJFS is working with the Ohio Department of Education and the Ohio Department of Mental Health to promote the expansion of school-based mental health services via the *Shared Agenda and Mental Health Networks for School Success* projects. In addition, ODJFS is working with the Ohio Department of Mental Health and other partners to improve the provision of services to the 0-6 years of age population. The *Early Childhood Mental Health Initiative* is designed to promote healthy child social-emotional development, improve the detection of mental health problems, and provide necessary early intervention programming in a timely manner.

**ODJFS-Ohio Department of Health Partnership**

ODJFS is working with the Ohio Department of Health to increase utilization of public health care services by families involved in the child welfare system. The goal of improving accessibility to oral health care is being particularly targeted in these efforts.

Each of these projects, as well as others, is specifically addressed in Section III, Outcomes and Goals, Outcome 3: Child and Family Well-Being.
### III. OUTCOMES AND GOALS

#### OUTCOMES AND GOALS (CFSP FY2005 – FY2009)

<table>
<thead>
<tr>
<th>Outcome 1:</th>
<th>Safety</th>
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**Goal 1**  
*Children are protected from abuse and neglect and safely maintained in their home, whenever possible.*

**Objective 1.1**  
Improve the timeliness of initiating investigations of non-emergency reports of child abuse and neglect.

**Objective 1.2**  
Reduce incidents of repeat maltreatment.

**Objective 1.3**  
Improve the assessment of risk of harm to children through the use of new assessment tools.

**Objective 1.4**  
Promote greater understanding about child maltreatment and stimulate activity in support of prevention.

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<tr>
<th>Outcome 2:</th>
<th>Permanency</th>
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**Goal 2**  
*Children live in permanent and stable situations where the continuity of family relations and connections is preserved.*

**Objective 2.1**  
Reduce the number of children re-entering foster care within 12 months.

**Objective 2.2**  
Increase the recruitment and retention of resource families to assure safe, stable placements for children who are unable to remain safely in their own homes.
Objective 2.3
Increase the percentage of finalized adoptions.

Objective 2.4
Continue to provide for intercountry adoptions.

Objective 2.5
Increase the percentage of timely reunifications, guardianships or permanent placements with relatives within 12 months of entry into foster care.

Objective 2.6
Preserve the child's primary connections to family, community, and heritage.

| Outcome 3: Child and Family Well-Being |

Goal 3
Families have the enhanced capacity to provide for their children's physical, behavioral and educational needs.

Objective 3.1
Increase parent, child and caregiver participation in case planning.

Objective 3.2
Increase caseworkers' visits with all parties listed on the case plan.

Objective 3.3
Increase the capacity of medical, mental health, rehabilitative and family preservation resources for adoptive families.

Objective 3.4
Work with the Office of Ohio Health Plans, the Ohio Department of Health and local agencies to address the physical health care needs of children in the child welfare system.

Objective 3.5
Work with the Ohio Department of Education and local agencies to address the educational services needs of children in the child welfare system.

Objective 3.6
Work with the Office of Ohio Health Plans, the Ohio Departments of Mental Health and
Alcohol and Drug Addiction Services and local agencies to address the behavioral health care needs of children and families in the child welfare system.

Objective 3.7
Provide family support and prevention-focused services to under-served populations across Ohio’s 88 counties.

Objective 3.8
Actively collaborate with other prevention-focused entities in order to exchange ideas and resources, share expertise, coordinate prevention efforts statewide, eliminate duplication and competition, and maximize available resources.

Objective 3.9
Provide information and education to OCTF “Prevention Partners.”

Objective 3.10
Provide funding for prevention and family support services at the local/county levels.

Goal 4
The Ohio Department of Job and Family Services will work with state and local child serving agencies to provide and support services and programs that ensure the safety, permanency, and well-being of children and families.

Objective 4.1
Establish a state level team that works towards and coordinates a permanency continuum of services that meet the permanency needs of Ohio’s children.

Objective 4.2
Develop, implement and monitor compliance of the Multi-ethnic Placement Act (MEPA).

Objective 4.3
Ensure that every Guardian Ad Litem that is appointed in a judicial proceeding involving an abused or neglected child has received training appropriate to the role.

PROGRESS TOWARD MEETING THE GOALS AND OBJECTIVES
Over the past six years the State of Ohio has initiated numerous changes in the area of child welfare which have had a positive impact on children and families served by the child protection system. Changes were in the areas of state legislation; continuous building of cross-systems partnerships; focused initiatives for special populations served by the child protection system; approaches to child welfare practice; court practices; training and staff development; evaluation and monitoring; the Child and Family Services Review (CFSR); and the subsequent Program Improvement Plan (PIP). As result of these changes, ODJFS has developed the State’s Child and Family Services Plan (CFSP) for FYs 2005–2009, which is in part an integration and enhancement of the CFSR PIP and CFSR PIP Quarterly Reports.

In implementing the programs and service delivery system changes outlined in Ohio’s five year Child and Family Services Plan (CFSP), collaborative efforts across state departments, and public and private children services agencies were guided by the ODJFS and PCSAO joint state and county planning and implementation efforts for children, adult and family services in Ohio. The Child and Family Services Review and the Program Improvement Plan have assisted ODJFS in the coordination of these efforts aimed at the Safety, Permanency and Well-being for children and families. This coordination has targeted strategies both statewide and regional in implementing and accomplishing the goals and objectives of the CFSP for FYs 2005-2009.

This section reports on the accomplishments made over the past year and the progress the state has made in meeting identified goals and objectives of the CFSP for FYs 2005-2009.

### Outcome 1: Safety

#### Goal 1: Children are protected from abuse and neglect and safely maintained in their home, whenever possible.

**Objective 1.1:** Improve the timeliness of initiating investigations of non-emergency reports of child abuse and neglect.

Data from the Child and Family Services Review (CFSR) and subsequent Program Improvement Plan (PIP) indicate that significant improvement in the timely initiation of non-emergency reports of child abuse and neglect is needed in order for Ohio to be found in substantial conformity with this outcome measure.

**Strategies for improving the timeliness of initiating investigations of non-emergency reports of child abuse and neglect include:**
Provide process consultation to PCSAs on improving initiation timeframes. The information and experience gained from working with individual PCSAs will then be shared during regional and statewide meetings and conferences in order to assist other PCSAs that may be struggling with this issue.

**Strategy Update:**

ODJFS has initiated the process consultation approach (previously called process consultation) in Cuyahoga and Franklin County to identify the variables that impact the agency's ability to initiate investigations of non-emergency reports within the prescribed timeframes. ODJFS staff began meeting with Cuyahoga County in May 2005 as a follow-up to the implementation of their Quality Improvement Plan (required as a result of the agency’s CPOE review) to observe work, interview staff and gather data relative to initiating reports. ODJFS began meeting with Franklin County in December, 2004, and is continuing with process consultation on the identified issues and agency procedures.

Based upon evaluation of CPOE Stage 5 statewide data, the ODJFS determined that there were no consistent methods being used by counties to screen, classify and initiate reports of child maltreatment. The inconsistency in screening and classification of cases has impacted the assignment, and subsequently initiation, of reports of maltreatment. In an effort provide clearer direction in regard to what constitutes a report, ODJFS convened a screening work group comprised of county and state staff, and legal representatives to develop screening guidelines. The guidelines provide examples of information that should be screened in or out based upon the ORC. A pilot of the screening guidelines began in four counties on May 2, 2005. An evaluation of the pilot (scheduled to be completed in summer 2006) will inform further policy development. Regional/statewide meetings with PCSA staff regarding the initiation of investigations will be held after pilot data is reviewed and analyzed. Information gathered during the process consultation meetings with Franklin and Cuyahoga counties will also be used to develop strategies to improve timeliness of initiating investigations throughout the state.

Convene an Ohio Supreme Court Task Force charged with developing recommendations for changes to the ORC to address problems in the fragmentation of child maltreatment definitions among various sections of Ohio law; and, establishing a work group comprised of county and state staff to review the Child Protection Oversight and Evaluation (CPOE) Stage 5 findings and develop recommendations for changes to the OAC to include comprehensive statewide policies to guide PCSAs in taking appropriate uniform action in screening reports of maltreatment.

**Strategy Update:**
An Ohio Supreme Court Task Force is working to review and provide recommendations for changes to ORC definitions for abuse, neglect and dependency. This will ultimately become the foundation for a statewide screening policy.

In spring 2004, the ODJFS director requested that the membership of the Supreme Court of Ohio (SCO) Chief Justice Thomas J. Moyer’s standing committee, *The Advisory Committee on Children, Families & the Courts*, establish a subcommittee to:

- determine if Ohio’s statutory guidelines for the investigation and prosecution of child abuse and neglect properly serve children and families in need of government intervention;

- make statutory and administrative recommendations to improve Ohio’s system for accepting and investigating reports of child abuse and neglect; and,

- Make recommendations to standardize and make uniform Ohio statutes regarding abuse, neglect, and dependency cases.

The ODJFS director volunteered to chair the subcommittee and committee membership voted to authorize the activities of the subcommittee. Subsequently, SCO released a Request-for-Proposal seeking a vendor to perform the following activities:

- a review of Ohio’s civil and criminal statutes regarding the investigation and prosecution of child abuse, neglect, and dependency to identify:
  - archaic and inconsistent language;
  - ambiguities in statutory language that contribute to the absence of consistent statewide criteria for investigating and prosecuting child abuse, neglect and dependency;
  - ambiguities in statutory language that lead to conflict or chronic variance in court interpretation between jurisdictions;
  - if current language offers public entities (e.g. child welfare, law enforcement, judicial) the most appropriate and/or effective options to serving families;
  - if current language promotes investigative and judicial handling of cases in a manner that reduces additional trauma to the child victim and the child victim’s family; and,
  - if current language promotes investigative and judicial handling of cases in a manner that ensures procedural fairness to the accused.
a review of the dispositional categories of child abuse, neglect and dependency (substantiated report, unsubstantiated report, indicated report) defined in Ohio Administrative Code 5101:2-1-01 to identify:
  o ambiguities in language that cause a disparity in case handling between counties; and,
  o If criteria for dispositional decision-making is sufficiently defined to permit entry of the public children services agency’s findings in court proceedings.

• A comparative review of other states’ “model” statutes and/or alternative practices, when appropriate.

• An analysis of current Ohio practice as indicated appropriate by Item A.

The outcome of the review is to be a final report that has been approved by the Subcommittee that does the following:

• describes the activities of the study;

• proposes statutory changes, including specific language, to address items identified in the report;

• proposes changes to the Ohio Administrative Code or the Rules of Superintendence to address items addressed in the report;

• proposes practice and/or administrative changes that address items identified in the report;

• makes recommendations regarding experimental, model and/or demonstration programs;

• identifies a fiscal impact analysis of proposed recommendations, including both direct and indirect cost benefits and costs; and,

• Sets forth necessary steps for implementation of recommendations, including possible training needs.

The American Bar Association and the National Center for Adoption Policy and Law were selected as co-vendors. The following work schematic is being followed in the review process:

Research Components
Objective 1.2: Reduce incidents of repeat maltreatment.

The statewide data indicator for repeat maltreatment at the time of the CFSR was 8.59%. By the time this baseline was established for the PIP, Ohio had improved performance to 8.2%. PCSA interpretation of state screening policy creates variation in how they respond to reports of child maltreatment on open cases.

Strategies for reducing incidents of maltreatment include:

- Clarifying the ODJFS’ expectations and the definition of “new incident”. The unclear direction and expectations from the ODJFS and the question of what constitutes a “new incident” will be addressed by developing state level policy (OAC) including the outlining of criteria for identifying the requirements for documenting duplicate report information. Practice guidelines on screening and documenting information on open cases are also being developed.

- Developing and providing process consultation to caseworkers. The ODJFS Central and Field Office staff will work with PCSAs to identify reasons why children and families recidivate and develop strategies to address the presenting issues.
Strategy Update:

Following the CFSR and CPOE Stage 5 case record reviews, it was apparent that clearer policy and direction from the state was needed with respect to what constitutes a new report on a case open for assessment/investigation or ongoing protective services.

In addition to the development of screening guidelines, ODJFS has developed a specific tool (Ongoing Case Assessment/Investigation Tool or OCAIT) and instructions to address the assessment and documentation of a new report on an open protective services case. Using the screening guidelines and OCAIT, a report received on an ongoing protective services case would be assigned for a full assessment and addressed using the same standards as a report in the intake investigation stage. Evaluation of the CAPMIS (Comprehensive Assessment and Planning Model – Interim Solution) pilot will assist ODJFS in determining whether implementation of the screening guidelines and OCAIT establishes greater consistency in the classification and documentation of reports of maltreatment throughout the life of the case.

Discussions about the documentation and handling of duplicate report information will also be included in the process consultation meetings in Franklin and Cuyahoga counties.

Objective 1.3: Improve the assessment of risk of harm to children through the use of new assessment tools.

Although the two CFSR items assessed for Safety Outcome 2 were individually rated as strengths; the number of cases in which both items was rated as a Strength was insufficient to meet the 90% requirement for substantial conformity.

Strategies for improving the assessment of risk of harm to children through the use of new assessment tools include the following:

- As part of the pilot, the ODJFS reviewed baseline data on repeat maltreatment, foster care re-entries, and average length of placement for each of the pilot PCSAs. These data will be tracked during the duration of the pilot, officially ending in March 2004 (PCSAs will continue to use the model; however, the data collection activities will cease). The data will be outlined in the pilot evaluation report due to the ODJFS in June 2004 and will assist the ODJFS in determining whether this model helps workers to accurately identify and address service needs for children and families.

- Revisions to the tools may be made based on the findings from the evaluation report as
well as other information received as a result of an independent review of research by
Dr. Mark Testa, Children and Family Research Center in Chicago, Illinois. Once the
FAPM is finalized, the ODJFS will provide statewide briefings on the FAPM and
evaluation findings for PCSAs and stakeholders.

- Statewide training and implementation of the new assessment and planning model is
tentatively scheduled for 2006. The training will include information on the constructs
and philosophies of safety and risk assessment as well as guidance on completing the
tools. It is anticipated that PCSAs will require on-going technical assistance to
implement the model as designed, and the implementation plan developed by the
ODJFS will include strategies for providing this support.

- At this time, the duration of the provision of follow-up technical assistance is unknown;
however, in the interim, the ODJFS Field Offices will continue to work with PCSAs on
improving these outcome indicators via our CPOE process.

**Strategy Update:**

Based upon the Family Assessment and Planning Model (FAPM) evaluation and the
recommendations from Dr. Mark Testa of the Children and Family Research Center in
Chicago, Illinois, ODJFS modified several FAPM tools and developed some new tools
to create CAPMIS. An actuarial risk assessment was added to the FAPM clinical
Family Assessment tool. By combining the two assessment philosophies,
caseworkers will be able to identify families most likely to re-maltreat as well as
services and interventions to address assessed needs.

Even though ODJFS plans to pilot CAPMIS for a full year (May 2005 – May 2006), the
Department is still on track to begin statewide training and implementation of the
assessment and planning model in 2006. CAPMIS was built into SACWIS and
counties will receive training on the model in advance of SACWIS training.

Additionally, ODJFS is working with a consultant to develop activities and strategies to
prepare the non-pilot agencies for the upcoming CAPMIS training and implementation,
which will need to include a process for identifying and providing for follow-up technical
assistance needs.

**Objective 1.4: Promote greater understanding about child maltreatment, and
stimulate activity in support of prevention**

The Ohio Children’s Trust Fund (OCTF) Board is a quasi-public entity that is statutorily vested
with responsibility for providing statewide leadership and funding to prevent child abuse and
neglect. OCTF efforts are exclusively directed at primary and secondary prevention activities and services through a comprehensive approach at both a statewide level and a local/county level.

**Strategy Update:**

OCTF addresses its responsibilities from a comprehensive systems-oriented approach, based on a framework called *The Spectrum of Prevention.* This model was developed by Larry Cohen of The Prevention Institute and has been successfully utilized in the fields of injury prevention, suicide prevention, general violence prevention and chronic disease prevention. The theoretical foundation of *The Spectrum* is based on the premise that when a prevention agent undertakes action simultaneously at six different levels, a synergy is created, which results in a greater impact on the problem. The six levels for action according to *The Spectrum* are:

- Influencing Policy & Legislation;
- Changing Organizational Practices;
- Fostering Coalitions & Networks;
- Educating Providers;
- Promoting Community Education; and,
- Strengthening Individual Knowledge and Skills.

A copy of the *Spectrum of Prevention* with current OCTF activities outlined for each of the six levels is attached as Appendix, Attachment E.

In order to stimulate prevention-focused activity by members of the general public, OCTF has continued the campaign theme: ‘Attention Adults: **YOU** are the **KEY** to preventing child abuse and neglect’.

Awareness materials, such as bookmarks (See Appendix, Attachment F) provide suggestions for ‘everyday ways’ people can promote child well-being and prevent maltreatment:

- in their family;
- in their neighborhood;
- in their spiritual community;
- in their workplace; and,
- in their larger community.

A document outlining several dozen ‘everyday ways’ is posted on the OCTF web site at
In addition to spotlighting April as Child Abuse/ Neglect Prevention Month, The OCTF works very hard to keep the importance of prevention visible in the public eye during the other eleven months of the year. This is accomplished in part by distribution of annual Family Well-Being Calendars, which went to 107,000 Ohio households for 2005. A sample page from the calendar, which features suggested activities each month to strengthen family relationships, is contained in Appendix, Attachment G. The visual foundation for the calendars is artwork done by 5th graders, which depicts their unique conceptualization of the state’s prevention theme. Coloring contests are held at the county level, with each county winner going on to a statewide competition which identifies the 12 most popular pieces for the calendar. Through this process, multiple levels of the public (individual students, classes, teachers, parents, schools, Family & Children First Councils at the county level, and ultimately, everyone who uses the calendar throughout the year) all have heightened awareness and exposure to prevention-focused activities.

Similarly, OCTF sponsorship of the annual Beyond the Blue Ribbon awards functions to recognize those who have made outstanding contributions to preventing child abuse/neglect, and promote additional attention to the cause. These awards honor six categories of recipients:

- Outstanding Prevention Volunteer,
- Outstanding Media Contributor,
- Outstanding Business Contributor,
- Outstanding Early Care Professional (new category for 2005),
- Outstanding Prevention Professional; and,
- Outstanding Prevention Program.

Nominations are widely solicited throughout the state, which again, promotes broad involvement from the community. The award winners are publicly recognized at a special Beyond the Blue Ribbon luncheon and awards ceremony conducted in April. The twelve students who won the Family Well-Being Calendar contest are also honored at this event. A newsletter with photo highlights of the event and award winners is also distributed.

Awareness about child abuse, neglect and prevention is further promoted via the OCTF web site which can be accessed at www.odjfs.ohio.gov/octf The site offers a variety of educational information such as:

- child abuse & neglect statistics;
- free prevention publications;
• tip sheets for parents;
• quick facts about the Ohio Children’s Trust Fund;
• a comprehensive chapter on prevention; and,
• tips for conducting a successful prevention campaign.

OCTF staff distributed various brochures and other print materials through a variety of channels, such as conferences, through personal contacts, during presentations, by OCTF service providers, and at community information fairs. Examples of these materials are included in Appendix, Attachment H.
Outcome 2: Permanency

Goal 2: Children live in permanent and stable situations where the continuity of family relations and connections is preserved.

Objective 2.1: Reduce the number of children re-entering foster care within 12 months.

The CFSR state data profile indicated that Ohio met this outcome indicator 13.7% of the time—well above the national standard of 8.6%. The PIP baseline of 13.1% showed that Ohio had made insignificant improvement on this indicator in the 18 months following the on-site review.

Strategies for reducing the number of children re-entering foster care within 12 months include:

- Piloting a Reunification Assessment as part of the Family Assessment Planning Model (FAPM). This tool addresses progress on the issues which brought the children into care as well as service needs and/or other issues anticipated as a result of the reunification. Results of the FAPM evaluation will inform the ODJFS as to the efficacy of this Assessment. The FAPM is tentatively scheduled for implementation in FFY 2006.

- Developing and providing county specific, process consultation to address re-entry of children into foster care. Strategies for addressing the issues will be implemented in the targeted counties and shared with the remaining PCSAs to assist those struggling with this indicator.

Strategy Update:

The Reunification Assessment tool and instructions developed as part of the FAPM did not undergo any major revisions as a result of the FAPM pilot evaluation and subsequent creation of CAPMIS. From a caseworker perspective, it was viewed as a very helpful tool that served the purpose, for which it was designed, i.e., to ensure that reunification decisions were based primarily on child safety, not completion of case plan activities and services. The caseworker reviews and documents past and present safety issues; family and child’s reunification readiness; each child’s vulnerability; family and community protective capacities; family cooperation and motivation; agency monitoring capacity; past history; and accessibility and availability of resources. Caseworkers must also identify what, if any, services are necessary for the child to return home safely and diminish the likelihood of the child’s return to placement.
The length of the FAPM pilot was too short to conduct an outcome evaluation, however, the four (4) pilot agencies continued to use the FAPM tools while CAPMIS is under construction. Because the Reunification Assessment is virtually unchanged from the FAPM pilot, evaluators for the CAPMIS pilot will have almost three (3) years of data available (July 2003 through May 2006) in order to analyze the efficacy of the tool for reunification decisions. ODJFS is in the midst of contracting with a vendor to conduct the CAPMIS evaluation.

Although a Reunification Assessment may be completed at any time the PCSA deems appropriate regardless of the number of days the child is placed out of the home, the Reunification Assessment is required:

- When the safety response determined by completion of a safety re-assessment is “modify” or “discontinue,” and the child has been placed out of the home for more than 30 days; or,
- Within 30 days prior to any court hearing where the agency is anticipating the child will be returned home.

Foster care re-entries is another outcome measure being addressed through process consultation in Cuyahoga and Franklin counties. Process consultation is being used to identify what variables in the normal flow of work, and in the formal or informal agency policies, procedures and practices impact the number of children re-entering foster care in those agencies.

**Objective 2.2:** *Increase the recruitment and retention of resource families to assure safe, stable placements for children who are unable to remain safely in their own homes.*

In response to the CFSR, Ohio, in its Program Improvement Plan (PIP) has committed to the recruitment of resource families to meet the needs of children in care. An expanded pool of families in which to place children provide agencies with more choices to allow for matching of skill and expertise to better meet children’s needs at the first placement.

Foster and adoptive families need training and support to be able to provide appropriate services to the children in their care, particularly those with serious emotional or behavior problems. Training and educational opportunities will be provided to foster families to enhance the skills to meet the needs of children as a way of preventing placement moves and retaining families.
Strategies for increasing the recruitment and retention of resource families include:

- Analysis of data of PCSAs with significant populations of children in care as indicated by FFY 2002 AFCARS data submissions.

- Collecting, compiling and sharing information from other states regarding their practices around the recruitment and retention of resource families.

- Developing and disseminating a best practice resource manual.

- Providing presentations at annual workshops including the Public Children Services Association of Ohio’s Annual Child Welfare Conference and the ODJFS’ Annual Foster and Adoption Conference.

- Integrating efforts to recruit and retain resource families by partnering with the Adopt US Kids initiative to promote permanency by increasing the number of available resource families for children. The first strategic planning session was held on March 17 - 18, 2004 in partnership with Ohio’s major metropolitan counties – the counties representing the largest number of children in custody. ODJFS, as well as each county represented, developed goals to begin working toward retaining foster families and diligent recruitment of foster families. These goals are congruent with ODJFS’ commitments in its PIP developed in response to the CFSR, which are as follows:
  
  - Kinship, foster and adoptive parents are empowered to effectively parent children from the foster care system.
  - Kinship, foster care and adoption are fully integrated and functioning as one system.
  - Practice and policy for kinship, foster care and adoption are supported by data and resources.

- Providing and promoting public awareness materials to local agencies to supplement their efforts during May, Foster Care Recruitment Month.

**Strategy Update:**

**Placement Stability**

ODJFS began development of a “best practice” survey to be completed by county agencies that met or exceeded the national standards for stability in foster care. The
The purpose of the survey was to gather information regarding how these agencies are structured, as well as how their program philosophies and practices contribute to the stability of placements in their counties. It was originally intended that the results of the survey would be used to develop a best practice manual to be disseminated to all PCSAs. During further development of the survey instrument, it was determined that it would be more appropriate for the product of the survey to be a report on the practices of these counties, and that counties of various sizes, as well as counties that did not meet the compliance level related to stability, should also be represented in the survey. Furthermore, the name “Best Practice” survey was changed to “Placement Stability Survey”, and its purpose was to capture policies and practices used to address stability of substitute care placements.

Twenty PCSAs were selected for the survey. Using data from Adoption and Foster Care Analysis Reporting System (AFCARS) for Federal Fiscal Years (FFY’s) 2002, 2003 and Data Analysis Reporting Tool (DART) for FFY’s 2001, 2002 and 2003, ten counties were selected that met the national standard for three consecutive years, and ten were selected that did not meet the national standard for three consecutive years. Each of the ten selected counties included from the groupings (e.g., Small, Medium-Small, Medium, Large, Metro and Major–Metro) used for Child Protection Oversight and Evaluation (CPOE). CPOE is ODJFS’ mechanism for evaluating performances of PCSAs. Eighteen counties (90%) responded to the survey. These were evenly divided between those that met the national standard and those that did not.

The survey consisted of 37 questions designed to elicit the following information:

- Children experiencing the greatest number of placement moves;
- Type of substitute care placements;
- Individuals involved in the initial placement decision;
- Criteria used for determining placements;
- Genograms;
- Agency use of Supplemental/Concurrent Planning;
- Number of workers assigned to a case;
- Average caseload;
- Case transfer processes;
- Services provided to children and substitute caregivers;
- Efforts to preserve family connections; and,
- Resource families’ recruitment strategies.

The results of the survey were analyzed and a report developed (See Appendix, Attachment J). The survey indicated some of the distinct differences/commonalities of counties that met and those that did not meet the national standard. In particular, children adjudicated unruly and delinquent experienced the greatest number of
placement moves, followed by sexually abused children in both county types. Regardless of whether the county met or did not meet the national standard, children who experienced the greatest placement instability remained the same.

The counties in this study differed on their placement practices. Most counties based their decision on the availability of relatives. However, usage of least restrictive placements (parents or relative/extended family) was practiced more in counties that met the national standard. Counties that did not meet the national standard tended to utilize licensed foster families more. Both the caseworker and supervisor in all counties made recommendations on the initial placement of a child.

The average caseload per worker was almost equal between counties. For the counties that transfer cases from one section to another, it takes an average of eighteen (18) days. Over one half of these counties did not have a written policy or procedure for case transfer. Counties that did not meet the national standard had a higher caseload and seemed to transfer cases faster. The counties that met the national standard did not always assign a new caseworker when a case was transferred; however, when they did, they included the child’s family in the communication. The counties that met the national standard also had more parent-child visits per month and the substitute caregivers allowed these visitations to occur in the substitute caregiver’s homes.

The most effective strategy for recruiting resource families was “word of mouth” for counties that met the national standard. Counties that utilized informal means to recruit substitute caregivers fared better in placement stability than the counties that used formal means.

In order to share the results of the survey, copies of the report were disseminated to all 88 PCSAs, and a presentation to PCSAs was held March 21, 2005 via video conference.

**AdoptUS Kids Initiative**

Through working with HHS executive consultants, John and Judith McKenzie, ODJFS joined the AdoptUS Kids initiative. This initiative is designed to help managers prepare for upcoming national campaigns and give states guidance in developing their CFSP and working to get local agency staff involved in foster care and adoption recruitment efforts. The McKenzie’s came to Ohio for a two-day strategic planning session on March 17, 2004 and March 18, 2004. The first strategic planning session included Ohio’s Major metro counties, which have the greatest number of children in custody. The Department, as well as each county represented, developed goals to be achieved. ODJFS has also sent staff to participate in meetings and roundtable
discussions for the preparation and development of outcome measures for the AdoptUS Kids campaign. ODJFS staff also attended a Recruitment Summit and the National Campaign Kick-off on July 15, 2004, and participated in a survey that was used to determine the demographics of each state in order to prepare for the campaign.

As part of the initiative, AdoptUS Kids contracted with the Ohio Family Care Association (OFCA) to assist in the national recruitment effort of resource families. OFCA has created a web site www.ofcaonline.org for individuals interested in becoming foster or adoptive parents. Each Ohio county has been entered into the AdoptUS Kids website database and a county coordinator is responsible for ensuring that county workers have access to the database. Each worker will then be given their own individual web page where they will list and track the children and families they serve. All PCSAs have received an AdoptUS Kids guide for their use as they participate in this effort.

Distribution of Recruitment Materials

Over the past few years, foster family recruitment items have been distributed at the end of March 2004 to all 88 PCSAs in order to assist in their recruitment efforts. Items included tote bags and license plate frames which included the slogan, “Foster a Brighter Tomorrow, Become a Foster Parent.” In order to gauge the effectiveness of these types of materials, ODJFS conducted a survey of 40 Ohio PCSAs in December 2004. A random sampling of county agencies, based on size, was contacted via telephone, and the following questions were asked of the PCSA staff responsible for recruitment of resource families (foster care and adoption).

- On a scale of 1 to 3 (3-very satisfied, 2-somewhat satisfied, 1-not satisfied), how would you rate the effectiveness of the recruitment materials provided to you by ODJFS in the past?
- On a scale of 1 to 3 (3-very satisfied, 2-somewhat satisfied, 1-not satisfied), how would you rate the effectiveness of the recruitment materials provided last year (bags and license plates frames)?
- Do you feel the logo, “Foster a Bright Tomorrow”, aided in your recruitment efforts?
- ODJFS sends out recruitment materials to be used during National Foster Care month in May. Is this the time of year your agency needs these materials most? Yes/No, Please explain?
- What type of recruitment materials do you think would increase your success in recruiting resource families?

The results of the survey are included in the Appendix, Attachment J of this report and
demonstrate that PCSAs have been generally satisfied with the types of recruitment materials that were provided. The responses to both questions 1 and 2 indicated that PCSAs were somewhat satisfied with the effectiveness of the recruitment materials provided. One agency, however, was not impressed at all, and pointed out that they “did not think trinkets are an effective way of recruiting; they do not raise awareness and are a complete waste of tax-payer’s money.” The representative from that agency felt that ODJFS should use the money that has previously been spent on “trinkets” to conduct a statewide awareness campaign. According this respondent, “Giving away trinkets is an easy cop-out for the state and not strategically thought out.”

In regards to question 3, most counties thought the various logos over the years were "cute" or “catchy.” However, many stated they could not say if it aided in their efforts to recruit resource families. Most of the respondents to question 4 (29 of the 40 surveyed) felt that the distribution of materials prior to National Foster Care Month in May works well for them. Of the agencies that did not feel that this was the best time, most stated that they would prefer to receive materials at various times throughout the year -- especially during November (for National Adoption Month), April (Child Abuse and Neglect Month), and at the beginning of the school year.

Respondents were also asked their thoughts on the types of materials that might aid in their recruitment success. Most PCSAs suggested that anything people can use on a daily basis (such as pencils, bags, key chains, pens, cups/mugs, hats, magnet picture frames, and rulers) would be quite useful. Agencies also requested that more posters, flyers, pamphlets, brochures, and videos be provided. Because most families inquire about younger children, a couple of counties said they would like to receive more materials directed to recruit homes for teens; and, some agencies suggested money for stipends to pay current foster homes for recruiting new homes.

The results of the survey have been, and continue to be, considered as ODJFS plans for future recruitment activities. For example, based on the results of the above survey, ODJFS will continue to provide funding for access to training for resource families as opposed to purchasing promotional material and providing recruitment materials to PCSAs. During 2004, ODJFS entered into a contract with OFCA in order to sponsor training for resource families. From that contract, more than 425 individuals were trained at various conference events. In February 2004, a conference addressing treatment foster care was held; a conference for resource families was held in June 2004; and a conference for teens and their foster and adoptive parents stressing “interdependent” living was held in August 2004. Subjects covered at the various conferences included mental health treatment, respite, prescription drug abuse, parenting the hurt child, conflict resolution, preventing abuse allegations, stress management, and various tropics related to helping youth achieve self-sufficiency.
Objective 2.3  Increase the percentage of finalized adoptions.

Ohio did not meet the 32% national standard for the CFSR item “Improving the Length of Time to Achieve Adoption”. In FFY 2000, Ohio achieved 29.2% of adoptions within 24 months from initial entry into custody; the percent dropped slightly in FFY 2003 to 28.3%. While Ohio continues to increase the overall number of finalized adoptions, ODJFS recognizes and acknowledges the urgency to achieve permanent custody in a timely manner, if appropriate, and to reduce the barriers to finalizing adoptions.

Strategies for increasing the percentage of finalized adoptions include:

- Partnering with the Supreme Court of Ohio (SCO) to improve the timeliness of hearing cases.

During a statewide planning session in March 2001, which included representatives from the public, private agencies, foster and adoptive parents, it was anecdotally reported that the court system played a role in delaying adoption finalizations, due to the timelines associated with hearing cases. Other PCSAs have indicated that there is a delay due to continuances and receiving journal entries.

With these issues in mind, the ODJFS is seeking to determine how the PCSAs can enhance their relationships with the courts and to determine if there are any practices or polices within the agencies that are creating barriers to timely court hearings and decisions.

Strategy Update:

ODJFS sought the input of SCO and the Ohio Association of Juvenile Court Judges as how to best approach this activity. The result was Ohio Courts’ Response to the CFSR: Beyond the Numbers, a state-level collaboration to improve local court practice in child abuse, neglect and dependency cases and respond to the court-connected findings of the CFSR.

Beyond the Numbers a three-stage process:

- **Statewide** Judicial Symposium to:
  - increase judges’ understanding of the CFSR findings;
  - review the challenge to “look through the eyes of a child;” and,
  - define and encourage the concept of judicial leadership in this arena.

- **Regional** Gatherings in the seven judicial districts throughout Ohio:
Judicial District Meeting (judges only) to facilitate judges’ understanding of the measurements, outcome and data of the CFSR and prepare them for the Stakeholders’ Session;

Regional Stakeholders’ Session (team of county judge, PCSA Executive, Court Administrator and PCSA attorney) to:

- identify common goals;
- assess the meaning of local data; and,
- begin planning for local meetings.

- County Meeting (participants defined by stakeholders) for the purpose of:
  - evaluating current processes;
  - developing strategic plan; and,
  - strengthening oversight. The Supreme Court of Ohio supplies facilitators and other needed resources.

In 2003 and 2004 state-wide judicial symposiums were held in concert with SCO and its judicial training authority, the Ohio Judicial College. SCO and the Ohio Judicial College also established a planning committee comprised of judges and magistrates from across the state; public child welfare representation has been added. Additionally, SCO hired a program administrator with the sole responsibility of project oversight.

Currently, three judicial districts have completed their regional sessions and are planning for, or engaged in, community strategic planning. A fourth judicial district will begin regional sessions in July and the remainder of Ohio’s seven districts is scheduled throughout the year.

ODJFS places continuing emphasis on determining how the PCSAs can enhance their relationships with the courts and to determine if there are any practices or polices within the agencies that are creating barriers to timely court hearing and decisions. The Timeliness to Adoption report was derived from information gathered from an on-line survey conducted in March of 2004 and released by ODJFS in January of 2005. The purpose of the survey was to explore what factors (e.g., organizational structures or events occurring during the course of casework) enhance or impede the speed with which children are adopted. Counties were specifically asked to identify factors which impede their ability to achieve adoptions within 24 months of initial custody. More than half of the agencies expressed frustration over the court’s decision to accept appeals after time guidelines have legally expired (See Appendix, Attachment K, Length of Time to Adoption On-Line Survey Results).

ODJFS convened a Task Force comprised of county and state to design a TPR tracking tool which includes tracking compelling reasons for not filing TPRs in a timely
manner. After several meetings the committee concurred that one strategy to achieve the goal to improve relationships with the courts and improve case flow through the courts was to decrease the length of time to achieve permanent custody by reviewing and structuring interventions that decrease the length of time to achieve termination of parental right in appropriate cases.

As a result of the Task Force Committee, ODJFS developed a TPR tracking Tool that will allow PCSAs to document TPR delays, compelling reasons for not filing for termination of parental rights in a timely manner and document other hearings that exceed deadlines. In May of 2005 the tracking tool was disseminated to counties in an Excel format. The tool contains information such as dates of initial custody, permanent custody, other hearing dates and explanations for delays in filing for permanent custody.

The Tracking Tool collects information on those children entering permanent custody in a given quarter. The first data collection is for children who entered permanent custody between October 1, 2004 and December 31, 2004.

To reduce the burden, particularly on those agencies with large numbers of children entering permanent custody, only a sample of the children entering permanent custody in a given quarter will be included in the Tracking Tool (See Appendix, Attachment L). The sampling method employed will permit statistically valid estimates for each quarter for each county. To avoid increasing the sample sizes, the margin of error of the quarterly estimates is relatively wide. However, the precision of the estimates will increase substantially, (i.e., the margin of error will be reduced) as more data are collected and results can be tabulated for each county across two or more quarters.

During SFY 2006, ODJFS will analyze the tracking tool on a quarterly basis and disseminate the analysis to PCSAs and the courts.

- Receiving technical assistance from the National Resource Center for Permanency and provide training to county agencies to assist them in developing effective concurrent processes that establish viable primary and secondary case plan goals.

In the 2003 Adoption Performance report by Steven Howe, analysis indicates that foster to adopt placements are completed more quickly than adoptions with an unknown individual. Additionally, if a child is placed with a relative the adoption can proceed more quickly. The ODJFS has requested assistance from the National Resource Center for Permanency Planning to assist Ohio in determining increased efficiency in transitioning foster parents to adoptive parents and for assistance in promoting the use of concurrent case planning in Ohio.
Strategy Update:

The ODJFS contacted 88 PCSAs, via questionnaire, consisting of 12 questions, to solicit information. Over 90% of the PCSAs responded. The responses indicated that 60% of the responding PCSAs implement Concurrent Planning activities in their cases; the remaining 40% do not (See Appendix, Attachment M).

ODJFS state level personnel discussed the possibility and implications of introducing concurrent case planning legislation to the counties. Based on ongoing discussions with stakeholders and input from Lorrie Lutz from the National Center for Permanency Planning it was decided to pursue a statewide best practice model of concurrent planning via another method.

Various counties have employed elements of concurrent planning to increase the percentage of finalized adoptions. These activities have included:

- At the administrative review process starting the case plan immediately and then completing reviews of the case plan within 3 months versus the traditional 6 months mandated by OAC rule. This process allows the casework team to evaluate where the family is in completing case plan goals; and,

- Some PCSAs that review case plans at three months then have a review at court called the “show cause” hearing to document where the family is in the process if they have not attended counseling, Alcohol Anonymous, etc. During this process the family is informed of the type of consequences that may occur (filing of TPR) after the 12 month time frame if they have not shown any progress. In addition, when the twelve months timeframe is approaching the agency calls a forum of the caseworkers and supervisors to discuss the case and case plan. The worker assigned to the case gives a presentation on what has happened and the progress of the family.

Recommendations from all involved are recorded and discussed. A decision as to what will happen with the case is made. If the family has made no effort and no progress is exhibited the agency pursues TPR.

During SFY2006, ODJFS will continue to provide process consultation to counties regarding promising practice that prevent delays in achieving permanency for children.
• Providing funding and developing relationships with local agencies to assist in the recruitment of potential resource families. The ODJFS will increase the amount of adoption incentive funding provided to PCSAs to develop faith based partnerships. Over the next five years the ODJFS will coordinate efforts at the state level to provide the PCSAs with opportunities to strengthen existing partnerships with the faith based community.

**Strategy Update:**

The Faith-Based Partnership is intended for the purpose of recruitment and retention of adoptive, foster, and resource families. The goal of the program has been to increase the awareness of Ohio waiting children who need safe permanent homes. ODJFS encourages counties to place emphasis on the recruitment of minority and adolescent resource homes that reflect Ohio’s population of waiting children.

During SFY2004, ODJFS provided funding to 31 PCSAs that participated in the Faith-Based program (See Appendix, Attachment N). The majority of participating PCSAs felt their agencies did not have enough personnel to respond to the magnitude of foster and adoptive family inquiries received.

In November of 2004, interviews were conducted with selected PCSAs which had received allocations for faith-based partnerships in 2004. A booklet entitled “A Focus on Ohio’s Faith-based Partnerships” was developed and highlights six faith based partnerships. The purpose of the publication is to share the strategies that were employed and the lessons learned from the collaboration between public agencies and faith-based organizations. The booklet will go through clearance and will be posted on the ODJFS website for PCSAs to download copies (See Appendix, Attachment O).

During November 2004, the annual Ohio Adoption and Foster Care Conference was held. The theme of the conference was “Integrating System: The Journey to Permanency”. Concurrently, the Faith-based Pastor’s Brunch, Faith United to Achieve Permanency for Children, was held. The event was to increase the awareness and effectiveness of statewide recruitment and retention efforts at securing resources in the faith community. Keynote speaker for the Pastor’s Brunch was Father George Clements, Founder of “One Church, One Child.” He stressed the need of the community comprised of lay-persons, clergy, private and public agencies to recognize that each of them must support others working toward the goal of finding and providing homes for children. The luncheon was a successful event that reaped many positive comments from participants.

During SFY 2006, ODJFS will continue to maintain established relationships with public agencies and their faith-based partners.
• Enhancing the OAPL website to add components that make the system user friendly for kinship, adoptive and foster families.

Strategy Update:

The OAPL website receives over 600 prospective adoptive parent hits in an eight month period. The majority of people who access the AdoptOhio website are seeking information regarding children available for adoption and to learn information about adoption and foster parenting processes. ODJFS has enhanced the website by adding publications and frequently updated information regarding adoption events occurring throughout the state.

During SFY 2006, ODJFS will continue to update publications and events on the website.

• Developing a hybrid of the previous AdoptOHIO and current AdoptOHIO Kids initiatives that represents a strong legislative, financial and administrative commitment to reducing the number of waiting children.

Strategy Update:

In October 2004, ODJFS announced the availability of $5.0 million in SFY 2005 for AdoptOHIO Kids incentives for public children service. The incentives are aimed at the promotion of permanent families for children through adoption. The specific adoption goals are two-fold. The first is to increase the number of finalizations for children ages 9 or older. The second addresses an outcome measure from the federal Child and Family Services Review, which is to increase the number of children adopted in less than 24 months.

The Components of AdoptOHIO Kids Incentives

The four components to the AdoptOHIO Kids incentives:

• Incentives to all PCSAs (except Cuyahoga and Franklin), based on the Child Protection Oversight Evaluations (CPOE) assigned county size, which exceed at least one of the three baselines listed in 2 and 3 below. Small to Medium-small sized counties that meet this measure receive $10,000; Medium to Large PCSAs receive 20,000; and, Metro to Major-metro counties receive $30,000;

• Incentives to all PCSAs (except Cuyahoga and Franklin) which exceed baseline
performance for all adoptions by the end of December 2004. The amount of these incentives is calculated according to the number of adoptions above the baseline in each PCSA;

- Incentives to all PCSAs (except Cuyahoga and Franklin) which exceed baseline performance for specific target groups (again with the amount determined by the number of children above each baseline):
  - Children Ages 9 and Older, and,
  - Children Adopted in Less Than 24 Months; and,

- Incentives to Cuyahoga and Franklin PCSAs for the adoption of “Children Ages 9 or Older.”

With the exception of Cuyahoga and Franklin PCSAs the total amount of incentive funds that agencies receive, including the base payment for meeting at least one of the incentives, will be limited to $60,000 for Small to Medium-small counties, $120,000 for Medium to Large counties and $230,000 for Metro to Major-metro counties.

Cuyahoga and Franklin PCSAs have the greatest number of children awaiting adoption statewide, therefore, they will receive payments of $350,000 and $150,000 respectively for a total of $500,000, should they exceed the baseline for adoption of “Children Ages 99 and Older” in CY 2004.

**SFY 2005 Incentive Payments to PCSAs**

The total earned by each PCSA is shown in Appendix, Attachment P.

- Amounts are earned for exceeding at least one of the established CY2004 achievement baselines;

- The baselines, CY2004 achievements, number of adoptions over the baseline and amounts earned for each PCSA are as follows:
  - Total adoptions;
  - Adoptions of children ages 9 or older;
  - Adoptions of children in less than 24 months; and,
  - Baselines, CY2004 achievement and amounts earned by Cuyahoga and Franklin counties for the adoption of children ages 9 or older.

All performance based funding awarded to PCSAs were reflected as a reimbursed credit against the PCSA’s non-allocated and unallocated costs distributed under the Social Services Cost Pool for a future quarter and will be carried forward into subsequent quarters, if needed.
Twenty-eight out of 38 PCSAs received the 1st incentive payment, twenty-one counties received the 24 month incentive and twenty-four counties received the 9 and older incentive. The total amount encumbered to counties was $4,600,000.

Contingent on the availability of incentive funding, ODJFS will continue to support PCSAs in achieving 32% National standard for the "Improving the Length of time to Achieve Adoption" during SFY2006.

- Partnering with PCSAs and private agencies to target recruitment efforts at addressing the diverse needs of children in foster care, adoption and kinship care placements (See Outcome 4, Systemic; Objective 4.1, Second Bulleted Strategy)

**Objective 2.4 Continue to provide for intercountry adoptions.**

Ohio provides inter-country services to international agencies and families adopting abroad. Three areas in which Ohio provides for intercountry adoptive services are through regulatory compliance, the provision of information, and the provision of pre and post-adoption services. Services are provided to adoptive agencies, adoptive applicants pursuing home study assessment, and to the adoptive child and his/her family after pre and post legalization of the adoption.

Each agency involved in an international adoption is mandated to be licensed and certified by the ODJFS to perform adoption duties. These agencies are monitored on a bi-annual basis, including a review of their policies, case records and procedures to ensure compliance with the Ohio Administrative Code. Agencies are required to adhere to placement rules, including collaboration, pre and post placement activities. Adoption studies are conducted by an assessor in the employment of or under the contract of a licensed PCSA, PCPA or PNA. All applicants pursuing adoption, including those adopting abroad, must complete pre-service training. In addition, agencies are expected to comply with the U.S. Immigration and Naturalization Services requirements leading to and following finalization in the child’s country of origin.

Strategies for the continuation of services for intercountry adoptions include:

- Cooperating with the United States Department of State and other Central Authorities in matters related to compliance with the Hague Convention on Intercountry Adoptions.

**Strategy Update:**

ODJFS recognizes that International adoptions can be complex subject matter due
to adherence to the laws and regulations of the state, which are based upon the U.S. federal laws and regulations, and laws and regulations governing the international placement of children in the child’s country of origin. Each agency involved in an international adoption is mandated to be licensed and certified by the ODJFS to perform adoption duties. These agencies are monitored on a bi-annual basis, including a review of their policies, case records and procedures to ensure compliance with the Ohio Administrative Code.

During SFY 2006, ODJFS will begin to research amendments and modifications to the Hague Convention. In addition, ODJFS will establish a relationship with a local international adoption group.

- Tracking data, including the number of children who were adopted from other countries; children who enter into State custody as a result of the disruption of a placement for adoption or the dissolution of an adoption; the names of agencies who handled the placement or the adoption; and the plans for the child, and the reasons for the disruption or dissolution.

**Strategy Update:**

ODJFS provides services to adoptive agencies and adoptive applicants pursuing home study assessments. Adoption studies are conducted by an assessor in the employment of or under the contract of a licensed PCSA, PCPA or PNA. All applicants pursuing adoption, including those adopting abroad, must complete pre-service training. In addition, agencies are expected to comply with the U.S. Immigration and Naturalization Services requirements leading to and following finalization in the child’s country of origin. All agencies that are licensed by ODJFS must be adoption assessors and must submit verification of completing the adoption assessor training. ODJFS tracks all adoption assessors via an adoption assessor log. Significant practice violations that are not in compliance with ORC and OAC are reported to the Social Work and Marriage Counseling Board.

During SFY2006, ODJFS will continue to monitor adoption assessor verifications.

- Providing Post Adoption Special Services Subsidy to eligible families that reside in Ohio who have adopted a special needs child, including those families that have adopted abroad.

**Strategy Update:**

Families that adopt internationally are potentially eligible to receive funding to pay for services through the Post Adoption Special Services Subsidy (PASSS)
program and the federal Nonrecurring Reimbursement Subsidy.

- Continuing to provide information to agencies and persons interested in adopting internationally.

**Strategy Update:**

The OAPL website is available to anyone that has access to a computer. The Adoption Guidebook provides a list of PCPAs which families may contact to find out about various types of adoptions, including international. ODJFS will provide technical assistance to families who call regarding international adoptions.

During SFY06, ODJFS’ expectation is to develop a relationship with private and public entities that focus on international adoption in order to assist Ohio in obtaining compliance with the Hague Convention.

**Objective 2.5 Increase the percentage of timely reunifications, guardianships or permanent placements with relatives within 12 months of entry into foster care.**

Data from the CFSR and PIP indicate a need for improvement in the percentage of timely reunifications, guardianships or permanent placements with relatives within 12 months of entry into foster care. This outcome measure was rated by reviewers as a strength in 92% of the cases reviewed on-site; however, the state data profile indicated that the percentage of reunifications occurring within 12 months of entry into foster care was 74% - which is below the national standard of 76.2%.

In addition, the Statewide Assessment reports that over the previous three years, there has been an increase in the number of children reunified with their families within 6 and 12 months. This can be attributed to the provision of intensive services to children and families.

Factors contributing to non-conformity include:

- Limited availability of mental health, drug and alcohol and other identified service needs to families;
- Lack of early identification and assessment of kinship resources in the case planning process;
- Lack of involvement of the prospective caregiver in the permanency planning process;
- Lack of early and appropriate assessment of families’ strengths;
- Lack of timely determination of a permanency goal and implementation of concurrent case planning;
- Lack of caregiver effort to comply with the case plan; and,
- Lack of adequate post-placement supports to permanent caregivers.
The baseline AFCARS data for State Fiscal Year 2002 show Ohio to be at 73.0%. The goal, over the next two years, is to increase the percentage of timely reunification, guardianships or permanent placements with relatives within 12 months of entry into foster care from 73.0% to 75.4%.

Strategies to increase the percentage of timely reunifications within 12 months include:

- Proposing legislation to change discretionary “supplemental planning” to mandatory “concurrent case planning” to standardize the use of concurrent case planning by PCSAs. Approval from HHS has been received for technical assistance from the National Resource Center for Permanency to develop best practices and to provide strategies on the use of concurrent planning. The ODJFS will continue to work with the OCWTP to assure the integration of concurrent case planning into the CORE training curriculum for caseworkers and supervisors. Emphasis will be on the early identification, assessment and involvement of kinship caregivers in the placement selection and permanency planning process.

- Standardizing the process of informing parents of their rights by developing and providing a pamphlet for parents – highlighting the parent’s involvement in the case planning process. Caseworkers will distribute this information upon initial contact with the parents.

- Providing support to the PCSAs and the kinship caregivers. Identification of and placement of children with kin allows an agency to maintain continuity of family relationships, preserve connections and expedite reunification and/or permanency. Based on the 2000 U. S. Census Bureau data, Ohio had 86,000 grandparents raising 165,000 children without a parent in the home. Many of these placements are informal and not known to Ohio’s child welfare system. Some kinship caregivers have assumed legal responsibility of these children from the PCSA to provide a permanent placement for the child, or to facilitate the reunification of the child with the parent(s). ODJFS will provide support, through policy and technical assistance, to the PCSAs and the kinship caregivers in order to meet the goal for this objective.

- Utilizing data to identify those PCSAs that are successful with reunification efforts and work with them to develop a best practice guide for statewide use. Data will also be utilized to identify PCSAs that are not meeting the goal of reunification within 12 months and provide process consultation. The data will be monitored on a quarterly basis to determine improvement.

*Strategy Update:*
Supplemental Planning

Ohio sought and received technical assistance from the National Resource Center for Permanency Planning in 2004. ODJFS held conference calls with resource center staff, resulting in Lorrie Lutz providing on-site technical assistance on three different occasions. Through these discussions, ODJFS formed a state level planning committee. It became clear that, in order for a mandatory concurrent case planning model to be successfully implemented, all of the systems within which child welfare practice in Ohio function have to be involved in the planning, training and implementation efforts. The planning committee included representation from: foster care licensing; legal; ODJFS/OCF management; program policy staff from the safety, placement, adoption and kinship sections; Field Office staff; rules coordinator; quality assurance and child welfare training staff.

The planning committee reviewed Ohio’s previous efforts to implement mandatory concurrent case planning. As part of the changes in statute to comply with the new child welfare provisions in the Adoption and Safe Families Act, Ohio enacted Amended Substitute House Bill 484 (HB 484) in 1998. One of the components to address permanency efforts was the provision which allowed agencies to develop a supplemental plan. The specific language in the Ohio Revised Code (ORC) Section 2151.412 (I) states: “A case plan may include, as a supplement, a plan for locating a permanent family placement. The supplement shall not be considered a part of the case plan for purposes…of…. (the case plan) section.” ODJFS apprized counties that a supplemental plan allowed two plans to be in place at the same time—one for family reunification and one for permanent placement. In Ohio when there is court involvement, the case plan document (ODJFS 1444) is journalized by the judge or the magistrate in juvenile court. State law does not permit the supplemental plan to be a part of the case plan, and therefore it is not journalized. At the time this law was enacted, there were major battles, particularly driven by the legal community, opposing mandatory concurrent planning. The Legislature compromised, enacting legislation allowing the use of supplemental planning. The department supported supplemental planning by developing a Model Supplemental Plan form with instructions that were provided to the counties during HB 484 statewide training.

The way communities chose to implement concurrent planning differed widely. This was clearly seen when ODJFS/OCF recently conducted a survey to ascertain the usage of Supplemental/Concurrent Planning by the PCSAs. Self-reporting by county agencies revealed that 58% of the PCSAs implement concurrent planning activities. The majority of counties have adopted many of the action steps and strategies related to this practice.

Work commenced on the development of a concurrent case planning model. All of the
planning committee members decided that Ohio’s model should include the following component parts: engagement of birth parents, full disclosure to birth family and resource family, rigorous search for kin, differential prognostic assessment based on a strength approach, frequent parent-child interaction and visitation, timely case plan reviews, scrupulous documentation and family centered case planning. To implement the model, a "Practice Framework for Creating an Environment of Successful Concurrent Planning" was developed with the assistance of Lorrie Lutz. Program staff volunteered to facilitate workgroups that would develop activities and implementation strategies for the following areas: kinship identification, role of resource families, managing resources, frequent visitation (for children in foster care), case planning and case review process, family engagement, father engagement, documentation excellence and legal environment.

**Parental Rights Pamphlet**

The subcommittee on Child Abuse, Neglect and Dependency met in April 2005 to review drafts of the brochures that had been developed by Howard Davidson of the American Bar Association (ABA). Group discussion focused on:

- The timing of the brochures. Since it is anticipated that the definitional and practice changes that will be recommended by the subcommittee will significantly affect the content of the brochures, it was questioned whether this activity should be suspended until the subcommittee had completed its report and recommendations were adopted.

- The language of the brochures. Committee members had a wide range of comments focusing on various language aspects of each document:
  - Does it convey the correct tone?
  - Does phrasing accurately reflect the conditions/services that are applicable to all 88 counties?
  - Is it legally and practice accurate?
  - Are the terms common to Ohio?

The following conceptual consensus was reached:

- The proposed length, concept and format of separated brochures are supported.
- The federal time frames that have been established through Ohio’s PIP do not permit delay of this activity. The brochures will be revised as necessary to reflect any changes brought by the subcommittee’s recommendations.
- There are portions of the brochure(s) where language should be changed to more reflect actual practice versus exact statute.
- Brochures are to focus on intra-familiar cases of abuse and neglect only. Later versions may be developed for non-familial incidents.
• The “removal” brochure was incorporated into the “court” brochure so as to not be unduly duplicative or confusing.

Significant written and verbal comments have been submitted to the ABA. The subcommittee will meet again in August 2005 to vote on the final text. Upon acceptance of final text by the subcommittee, the Supreme Court of Ohio has agreed to oversee design and print of the brochures, as well as participate in initial dissemination of the brochures.

**Process Consultation**

During the development of Ohio’s PIP, ODJFS determined that on-site focused technical assistance and process consultation meetings with PCSA staff should take place. The purpose of the meetings was to review data related to reunification and to gain an understanding of local practices and their effectiveness. Two metropolitan counties, Cuyahoga and Franklin, were chosen because of the effect that their statistics have on the aggregate statistics of the state.

**Cuyahoga County**

During the month of May 2005, ODJFS staff will meet with management staff from Cuyahoga County regarding issues related to reunification. Discussion will be held about how the agency works to reunify children with their families, different programming that is implemented, and various follow-up activities that the county engages families in so that reunifications remain stable and children do not come back into care.

**Franklin County**

ODJFS met with staff from the Franklin County several times during 2004. During these meetings, agency staff described the structure of the agency, which areas of the agency are responsible for various services, and how casework is managed from Intake through adoption.

Staff from the Intake area of the agency described how referrals are accepted and how assignments are made regarding investigations and visits with a family. Franklin County has contracts with two private managed care providers and share responsibility for providing services to county residents. Franklin County and the managed care entities do all casework, including planning, accessing services, making placement decisions, and working with the family towards reunification. When discussing the management of open cases, Franklin County staff pointed out that when a case is opened, family conferencing is used to make decisions with the family right from the start. Franklin County utilizes a formalized Family-to-Family concept where they have contracts with various community agencies in specified “catchment areas” that work
with caseworkers to develop service plans and put families in touch with services in their communities. The agencies also help recruit foster homes so that children can remain in their own communities, schools, and churches so that connections can be preserved.

During the month of May 2005, OJFS staff met again with management staff from Franklin County regarding issues related to family reunification. The agenda for the meeting included a discussion regarding agency practice related to reunification, and the types of activities that are implemented in order to keep reunified families stable so that children do not come back into care.

**Data Analysis**

ODJFS performed an analysis of the data related to reunification. The data in HostFACSIS related to 12-month reunifications was reviewed closely. Staff suspected that some of the Public Children Services Agencies (PCSAs) were utilizing one of the values for the FACSIS Event 084: Terminate Custody incorrectly. To test the validity of this hypothesis, the data validation process for the CPOE Stage V review included activities to test this hypothesis.

The FACSIS 084 Client Event is used to document the legal termination of the PCSA’s custody of the child. This Client Event documents the reason the Agency no longer has legal custody of a child. All of the values for this Client Event must be based on the termination of custody by the court (except for the value - Voluntary Agreement Expired). There is a value 02 Court Termination listed. The PCSAs are instructed in the FACSIS Usage Document, that the value 02 refers to an action taken by the court, upon motion, to terminate the Agency’s custody against the recommendation of the Agency.

For the CPOE Stage V Data Validation Review, a statewide sample of 50 cases was reviewed among thirteen counties to determine if the FACSIS Event, Court Termination, was being properly used as a custody termination reason. From the statewide sample, it was determined that the Court Termination Event was improperly entered for the custody termination reason in 30 of the 50 (60%) cases sampled. For those 30 cases, the custody termination reason should have been recorded as reunification. Therefore, staff concluded from this review that Ohio’s numbers for reunification are under reported.
The following table illustrates the under reporting for reunification:

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<th>Year  (1)</th>
<th>Total number of custodies terminated.* (2)</th>
<th>Number of custodies terminated due to court termination reason* (3)</th>
<th>% of cases that should have been recorded as reunifications (4)</th>
<th>Additional cases that should have been classified as reunifications. (5) (3X4=5)</th>
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<td>8784</td>
<td>693</td>
<td>60%</td>
<td>416</td>
</tr>
<tr>
<td>2003H1</td>
<td>7835</td>
<td>546</td>
<td>60%</td>
<td>328</td>
</tr>
<tr>
<td>2003H2</td>
<td>7895</td>
<td>556</td>
<td>60%</td>
<td>334</td>
</tr>
</tbody>
</table>

Calculations were based on the 5/7/04 FACSIS Statewide data run for Indicator 12 (Percentage, by reason, of custody termination).

The results were sent to the 88 PCSAs, requesting county staff review the cases where the FACSIS Event, Court Termination, was utilized and if the event was properly used as a custody termination reason. If the FACSIS Event was not used properly, PCSAs will be asked to modify the data and transmit the revised data using the correct FACSIS value. The results will be analyzed and monitored closely.

For the period ending December 31, 2004 Cuyahoga County was at a compliance rate of 50.77% while FCCS was at a 74.20% compliance rate.

**Objective 2.6 Preserve the child’s primary connections to family, community, and heritage.**

While Ohio’s data indicates that 85.9% of all children in foster care for 12 months or less had not more than two placement settings, the state did not meet the national standard of 86.7% during the CFSR.

Furthermore, case review resulting from the CFSR regarding the preservation of connections and relative placements achieved substantial outcomes in 84% of the cases, but did not meet the 90% required for substantial conformity. Twenty-seven percent of the cases reviewed indicated that agencies did not notify Tribes of Native American children in foster care, therefore, failure to facilitate relationships and maintain children’s connections to family, community, and heritage contributed to a percentage of the non-conformity.

PCSAs efforts to locate and assess relatives as potential placement resources as identified in the CFSR will be an active part of their everyday practice, as the OAC which now specify guidelines for the agency in placing children with relatives and non-relatives.
Strategies for preserving the child’s primary connections to family, community and heritage include:

- Increasing caseworkers’ skills in engaging families in the areas of visitation and placement with non-custodial parents (generally fathers), unless it is not in the child’s best interests; and, utilizing family group decision making to engage parents and others in addressing the needs of children and allow children to remain in their own homes or be safely reunified.

- Monitoring the preservation of connections and relative placements via the CPOE case record review instrument.

- Increasing caseworkers’ knowledge of the Indian Child Welfare Act (ICWA). ODJFS has begun providing training sessions aimed at increasing caseworkers’ knowledge of ICWA. In addition, the ODJFS created and distributed a guidance letter containing background information regarding the ICWA and a protocol for contacting Tribal representatives.

- Follow up analysis will occur of statewide data to determine the number of children identified in AFCARS as having Indian heritage. ODJFS will provide any needed technical assistance to PCSAs to comply with ICWA.

**Strategy Update:**

**Engaging Families and Involving Fathers**

ODJFS requested and received approval for 10 days of technical assistance from the National Resource Center to conduct workshops and offer a training of trainers session regarding involving fathers in case planning and engaging the family in group decision making. It was determined that it would be best for the National Resource Center to conduct a preliminary dialogue with all of the applicable state level staff who work with and provide technical assistance to county administered agencies. The dialogue was deemed necessary to bring everyone at the state level on the same page and assure that there was some uniformity and consistency in communication with the counties. During this initial session, held on August 20, 2004, Lorrie Lutz from the Resource Center presented her work on concurrent planning, family engagement, and the involvement of fathers to ODJFS central office and technical assistance field staff. State staff provided the preliminary results of a survey of county agencies which gauged county practice in regards to concurrent planning. Ms. Lutz facilitated a discussion among staff members related to how Ohio counties currently view the process of concurrent planning, and how to implement it statewide. Since that meeting,
ODJFS staff have continued to work the National Resource Center to refine the content of future technical assistance sessions. Cuyahoga and Franklin, the two counties that were selected for process consultation and process consultation, were also identified for intensive on-site sessions conducted by the National Resource Center on concurrent planning and family engagement.

ODJFS also provided training to county and private agency staff on the engagement of fathers in case planning and decision making. On February 17, 2005, ODJFS held a Quarterly Statewide Child Welfare Manager’s Meeting where workers from across the state participated in a training conducted by Phillip Washington. Mr. Washington is a certified trainer through the Institute for Human Services and owns the consulting agency, Washington Training and Consulting, Inc. The workshop addressed promising practices for increasing the involvement of fathers, and covered the following topics:

- the history of fatherhood;
- differences in parenting styles;
- barriers and challenges; and,
- service planning.

More than 60 participants attended the workshop, and evaluations demonstrated an overall satisfaction with the training. Forty-four percent of the participants indicated that the training addressed their questions and concerns in the area of engaging fathers. Thirty-seven percent of the attendees felt the trainer helped them identify ways to use the knowledge and skills on their job. One respondent stated that the training was confirmation of the need to engage father’s in case planning. Several respondents stated they learned new approaches in engaging fathers.

Survey of Local Implementation of the Indian Child Welfare Act (ICWA)

Information obtained from HostFACSIS during November 2004 indicated that 55 children in the custody of Ohio agencies were listed as Native American/Alaskan Native. ODJFS staff who have worked with these agencies in the past indicate that the actual number of children listed who meet the ICWA definition of Native American/Alaskan Native (Indian) child is much lower (perhaps as much as 50%). Based on this information, ODJFS staff developed a survey to be conducted with agencies that have custody of children determined to be Native American/Alaskan Native. The purpose of this survey was to determine if the children identified by the counties fit the ICWA definition, and to determine each agency’s compliance with ICWA protocol.

The survey was conducted by ODJFS staff viatelephone during the week of November 23, 2004 (the results can be found in the Appendix, Attachment Q). Sixteen agencies
(15 PCSAs and 1 PCPA) were contacted. All respondents were either casework management staff or representatives of the legal department at the agency being surveyed. To help guide the discussions during the survey, ODJFS staff utilized mandates from established protocols and the Ohio Administrative Rules that govern the provision of services under ICWA.

The results of the survey indicate that most agencies contacted at least understand that there is a protocol and guidelines that must be followed when serving a child determined to be a Native American/Alaskan Native (Indian). Some indicated that they have no set “definition” of an Indian child, but rely heavily on information provided by the child’s parents and other family members. They then work to confirm this information and establish tribal membership by contacting “the tribe”. However, only one agency surveyed mentioned a contact for this and other services by name; all other agencies just mentioned contacting “the tribe” or “BIA” (Bureau of Indian Affairs). All agencies indicated a desire to work with fathers and other relatives, especially when it comes to securing a placement for the child.

Of the agencies surveyed, only three indicated that they do not ascertain whether the child is of Indian descent at the beginning of the case. One agency stated that they do not work on this issue until the point of filing for permanent custody. Another agency admitted that they should be working to formalize how they document their efforts at making the determination regarding Indian heritage.

As agencies answered questions related to providing services and selecting placement resources for Indian children in their care, it was obvious that they rely heavily on the advice and recommendations of tribal councils. Most agencies welcome the direct tribal involvement, and the exercise of tribal jurisdiction, when it comes to cases involving Indian children and their families. One private agency was surveyed (an agency that places children for adoption), and this organization has connections in many areas of the U.S. where tribal organizations locate placements for their young members. Those agencies responding that have the most Indian children in their care, or in are in large metropolitan areas, have ongoing communication and working relationships with tribal entities in their communities.

From the information gathered during the survey, it was clear that Ohio agencies have the desire to follow the protocols and rules governing the implementation of ICWA. However, more work is needed to be done with those county agencies that indicated they did not address the issues of Indian heritage at the beginning of their work with families. Representatives from these agencies (Sandusky County PCSA and Allen County PCSA) were contacted for the purpose of providing technical assistance on 3/4/2005. In discussing agency procedures with staff from Sandusky County, ODJS staff ascertained that the agency relies heavily on the word of the parent and does not seek much input from other family members. They often only deal with the issue when a
member of the family actually brings it up, but they do not actively seek to establish the child’s heritage without this input. Staff at the agency pointed out that it is very infrequent that a child comes to the attention of the agency where there is a question of their heritage, and this is something that is not made a priority. As the agency representative put it, “there are other more important things to worry about when a child comes to our attention.” ODJFS staff pointed out that although this is true, it is still very important that the proper protocols and guidelines be followed. When ODJFS staff informed the agency representative that HostFACSIS listed one child in the custody of the agency who is Indian, the representative was surprised. She did admit that they received the ODJFS Procedure Letter outlining ICWA, and would work to implement it more thoroughly.

On March 7, 2005, ODJFS staff contacted Allen County in order to provide any needed technical assistance. However, when speaking with the representatives from Allen County, ODJFS staff found that there have been many changes made to their agency procedures regarding the implementation of ICWA. Allen County has improved in their overall knowledge regarding ICWA and the protocols surrounding it. They have instituted a procedural checklist to be used by workers when they begin work with a family, and have also developed a handbook to provide to parents to help guide the discussion around family heritage so that information is made more readily available to the worker. The agency representative pointed out that the assistance provided by ODJFS staff via technical assistance and the distribution of the ODJFS Procedure Letter mentioned below outlining ICWA was very helpful as they developed internal practice. Although there has been major improvement made to agency procedure, the agency representative did stress the need for more training to be done with staff, especially new staff. Discussions are underway inside of the agency to develop and provide training to all staff and supervisors.

**Increasing Worker Knowledge of the Indian Child Welfare Act (ICWA)**

The attached guidance letter (See Appendix, Attachment R) containing background information regarding ICWA and a protocol for contacting tribal representatives was provided to public and private agencies in January 2005, and a video conference was conducted in concert with Jack Trope, a consultant with the National Indian Child Welfare Association (NICWA) on April 18, 2005. The guidance letter was originally developed in early 2004, and was subsequently revised to provide more clarity to agencies regarding issues such as “active efforts” requirements and the need to identify Indian families as early in the life of a case as possible in order to assure that active efforts are employed. Mr. Trope’s discussion of the sovereignty of Indian Nations preceding the colonization of America and the formation of the United States, the intergovernmental relationship between Indian Nations and the United States, and the historical issues in regard to attempts to acculturateg Indian children were invaluable
in providing county staff with the proper context for understanding the impetus behind the ICWA. Mr. Trope also discussed ICWA’s intersection with other legislation (such as the Interstate Compact on the Placement of Children) and perspectives on practice issues, which enriched participants’ experience and made the presentation relevant to their work. Registrants for this video conference included 48 public agencies, and 14 private agencies.

ODJFS plans to continue its collaboration with NICWA by encouraging agencies to utilize NICWA’s on-line Indian Child Welfare Course to develop caseworker’s knowledge of ICWA and practice issues. The course will allow workers to update their knowledge and skills at their own pace, receive continuing education credits, and not have to spend time away from work.

At ODJFS’ annual Adoption and Foster Care Conference held in November 2004, ODJFS sponsored two workshops specific to Indian Child Welfare. The first workshop, “Implementing ICWA and the Adoption and Safe Families Act (ASFA),” was conducted by Chey A. Clifford-Stoltenberg, Policy Specialist from the National Indian Child Welfare Association. She discussed how ICWA and ASFA intersect to serve Native American children and families. The second, “Macaroni at Midnight,” was conducted by Don Bartlette, a Native American Consultant. He provided a personal perspective of his experiences growing up as a Chippewa Indian and the severe childhood disadvantages he overcame. Both workshops received good evaluations from attendees. The first had 19 child welfare workers in attendance. The second had 59 attendees, and included child welfare workers, as well as resource families.
Outcome 3: Child and Family Well-Being

Goal 3: Families have the enhanced capacities to provide for their children’s physical, behavioral and educational needs.

Enhanced capacities to provide for their children’s needs....

Objective 3.1 Increase parent, child, and caregiver participation in case planning.

The CFSR found that Ohio does not involve parents or children in the case planning process when it is appropriate to do so. According to Ohio’s Statewide Assessment, it was anecdotally reported by parents and foster parents that they are not involved in the development of the case plan and that case planning is a cookie cutter approach. In addition, the Statewide Assessment indicated that parents have reported that they are afraid to use the court process to dispute the contents of the case plan, that their court appointed attorney is unhelpful, and that the PCSA is unresponsive to their input.

**Strategy Update:**

A work group comprised of ODJFS and county PCSA staff was convened in July, 2004 to make the case plan and Semiannual Administrative Review tools more “family friendly” and easier for clients to understand, and make the case plan consistent with the other CAPMIS tools (the case plan was not revised when FAPM and CAPMIS were developed). Draft revisions to the format of both tools were completed and are in the process of being finalized for inclusion in SACWIS.

The workgroup was also charged with development of a discussion guide to assist caseworkers in engaging families in the case planning process. The guide will be designed for use in the field and contain a summary tool that caseworkers can provide to the family and caregivers to help them link safety and risk assessment concerns to case plan activities. A section on Case Planning was written and added to the CAPMIS Worker Manual (pilot version) to provide case workers with a “desk reference” for case plan development. The booklet, Child Protective Services: a Guide for Caseworkers, published by the U.S. Department of Health and Human Services was a valuable resource for this section of the manual.

Work on discussion guide was halted pending approval of the revised case plan format. Activities related to this task will resume during summer, 2005.
Objective 3.2 Increase worker visits with all parties listed on the case plan.

The CFSR reviewed both caseworker visits with the child and with the parents and found that Ohio does provide sufficient, frequent and quality visits with children. However, the CFSR indicated that caseworker visits with parents were not sufficiently frequent or of sufficient quality to promote the safety and well-being of the children or enhance attainment of permanency.

Strategies to increase parent, child and caregiver participation in the case planning process and to increase caseworkers' visits include:

- Collaborating with the National Resource Center for Foster Care and Permanency Planning to develop discussion guides and summary tools for PCSA workers to use with families. The discussion guides will assist workers in engaging families to participate in the development of the case plan while the summary guides will help families and caregivers link safety and risk assessment concerns to their case plan activities. Both documents will require caseworkers to conduct outcome-based, focused visits with families.

- Developing and providing Ohio Child Welfare Training Program (OCWTP) CORE training for new caseworkers and supervisors. Refer to Section IV, Training and Staff Development for additional information about OCWTP.

- Developing and providing skill enhancement training for experienced caseworkers and supervisors.

Strategy Update:

ODJFS contacted the National Resource Center for Foster Care and Permanency Planning for guidance in identifying and obtaining current and available research, literature, and/or materials to assist in developing the discussion guide and summary tool mentioned above as well as a second discussion guide aimed at enhancing caseworkers’ skills in conducting outcome-focused visits with parents, children and caregivers.

To address the issue of outcome-focused visits, the work group convened in July, 2004 drafted an outcome based home visit tool that functions primarily as a task list and will be used with the family, child and/or caregiver during the actual home visit. The use and purpose of the task list tool will be described in the case plan. Essentially, the caseworker will be able to break down the larger case plan objectives into the specific activities and tasks that the family members, caseworker and/or service provider(s) are
expected to complete prior to the next home visit. The tool will be printed on NCR paper, so that both the worker and family receive a copy at the time of the home visit. This will also help with tracking assignment and completion of activities and help the family see their own progress towards meeting the case plan objectives. As a reminder for caseworkers, OAC rules are referenced within the tool.

**Objective 3.3 Increase the capacity of medical, mental health, rehabilitative and family preservation resources for adoptive families.**

As noted during the CFSR case reviews and the Statewide Assessment, adoption delays can be attributed to a variety of reasons. The primary challenges center around recruiting, nurturing and retaining prospective families which are willing and able to provide for children in need of permanent homes. The ODJFS recognizes that the challenge of providing permanency for children does not stop after adoption finalization. Once a child is placed in a permanent living situation, it is imperative that supportive services are in place to promote safety, stability and the families’ ability to sustain a permanent living situation.

Previous statewide forums and surveys with adoptive, kinship, foster caregivers and child welfare advocates have identified the lack of behavioral health, medical and rehabilitative resources as causing the of adoption finalizations.

**Strategy Update:**

The ODJFS kinship program will continue to: provide information about kinship, available services and technical assistance to PCSAs, kinship navigators and kinship caregivers; keep current with the national trends, information, resources and legislation; provide data and information to the state legislature; network and collaborate with other state agencies to develop and access services for kinship caregivers; and be a liaison to the Ohio Grandparent/Kinship Statewide Coalition, State Pro Bono group and the Statewide Kinship Advisory Board. ODJFS continues to implement the four recommendations of the Kinship Care Services Planning Council. The remaining seven recommendations continue to be reevaluated for implementation. The following is the status of the recommendations.

Recommendation #1: To create a kinship caregiver affidavit and power of attorney.

**Status:**

H.B. 130 in the 125th General Assembly was passed. The legislation’s objective is as follows:

- Permits in specified circumstances the execution of a power of attorney or caretaker authorization affidavit that provides a grandparent with whom a child resides authority over the care, physical custody, and control of the child,
including ability to enroll the child in school and to consent to medical care for the child;

- Provides that a military power of attorney executed under federal law to grant authority over the care, custody, and control of a child is considered a power of attorney under the act;
- Establishes procedures and forms for executing a power of attorney or caretaker authorization affidavit;
- Requires the power of attorney or caretaker authorization affidavit to be filed in the juvenile court of the county in which the grandparent resides or any other court that has jurisdiction over the child under a previously filed motion or proceeding;
- Provides that execution of a power of attorney or caretaker authorization affidavit does not affect the rights and responsibilities of the parent, guardian, or custodian regarding the child, does not grant legal custody, and does not grant authority to consent to adoption or marriage of the child;
- Provides that generally a caretaker authorization affidavit may be executed only if both of the parents, or the child's guardian or custodian, cannot be located;
- Permits a parent, guardian, or custodian to take action to negate or reverse any decision made by a grandparent granted authority over a child pursuant to a caretaker authorization affidavit;
- Provides for termination, and notifications that must be made on termination, of a power of attorney or caretaker authorization affidavit;
- Provides immunity from civil and criminal liability for all persons who, in good faith, rely on or take action in reliance on a power of attorney or caretaker authorization affidavit;
- Prohibits the creation of a power of attorney or execution of a caretaker authorization affidavit for the purpose of enrolling a child in school so the child may participate in interscholastic athletic programs or academic programs provided by a specific school or school district;
- Requires the grandparent to include certain specified information with the filing of the power of attorney or caretaker authorization affidavit, including whether the grandparent previously had been convicted of or pleaded guilty to any criminal offense involving any act that resulted in a child being an abused or neglected child;
- Allows the court to report the above described information related to acts resulting in a child being an abused or neglected child to the Public Children Services Agency and requires the PCSA, upon receipt of that information, to initiate an investigation; and,
- Allows the court, if the court has reason to believe that a power of attorney or caretaker authorization affidavit is not in the best interest of the child, to report that information to the PCSA and requires the PCSA, upon receipt of that information, to initiate an investigation and submit a report of its investigation.
Recommendation #2: Developing an information and referral service.

Status:
- In addition to the Relatives Caring for Children: Ohio Resource Guide, ODJFS had previously entered into a contract with the Ohio Department of Mental Health to produce Relatively Speaking, a publication that addresses issues about kinship caregivers raising children in their care. Both resources are available from ODJFS and the statewide information and referral system Help Me Grow (HMG). A Relatives Caring for Children: Ohio Resource Guide is available at: www.state.oh.us/odjfs/ocf/publications.stm; and,
- “Help Me Grow” continues to provide information and referral services to kinship caregivers.

Recommendation #3: Statewide Kinship Care Advisory Board.

Status:
- The Kinship Care Advisory Board is comprised of representatives from public and private child caring agencies, ODJFS, Area Agencies on Aging, Ohio Family and Children First, Legal Aid, and kinship caregivers. The Advisory Board continues to meet quarterly to discuss and evaluate Ohio’s kinship care program and provide recommendations and feedback to the Director of ODJFS on the implementation of various program components recommended by the Kinship Care Services Planning Council. A letter was written from the Advisory Board to the ODJFS director, advocating for the use of TANF funds to support the navigator program and subsidized guardianship.

During SFY 2006, ODJFS will continue to work to develop Kinship resources.

Strategies for increasing the medical, behavioral health, rehabilitative and family preservation resources include:

- Implementing changes to the Interstate Compact on Adoption and Medical Assistance (ICAMA) to ensure that families have access to Medicaid providers that can meet the treatment needs of adopted children.

**Strategy Update:**

ODJFS continues to provide reciprocity to special needs children in receipt of an adoptive assistance agreement. Over the past five years, the process has been simplified; however, the consensus is that a system similar to the families’ receiving
Medicaid through the Title IV-E program would be of greater benefit to children and families. The perception of numerous adoptive families in receipt of an Ohio Medicaid card is that there are insufficient Medicaid providers to meet their treatment needs. During the November 2004 Adoption and Foster Care conference, several workshops were offered that assisted adoptive and foster parents in advocating for the assistance in meeting their child's treatment needs.

- Continue funding and developing the Mental Health Institute focusing on adoption related issues and specifically targeted to mental health providers. In addition, the ODJFS hopes to expand the Mental Health Institute to include State University Partners.

**Strategy Update:**

ODJFS continues to work with the mental health providers on adoption related issues via offering a Mental Health Institute. The Mental Health Institute is a six hour educational training venue for therapists focusing on many of the diagnoses and traditional or newer treatments. During the 2004 Adoption and Foster Care conference, Zoe Breen Wood from the Mandel School of Applied Social Science, Case Western University discussed key issues in “Adoption Participants: What Every Mental Health Professional Need to Know” (See Appendix, Attachment S).

- Revise the Post Adoption Special Services Subsidy program to preserve, support and prevent imminent disruption of an adoption placement after finalization.

**Strategy Update:**

The Post Adoption Special Services Subsidy (PASSS), a state subsidized program unique to Ohio, was implemented in 1992. PASSS is funded at 75% through Title IV-B funding, subpart II and 25% through GRF (General Revenue Funds), funding, therefore, the yearly amount allotted to the program is subject to change depending on the status of the state’s budget bill. The July 2004 thru April 2005 report shows that 527 children have utilized PASSS services during this time period (See Appendix, Attachment T).

**Enhanced capacities to provide for their children’s physical needs...**

**Objective 3.4**  
Work with the Office of Ohio Health Plans, the Ohio Department of Health and local agencies to address the physical health care needs of children in the child welfare system.

The CFSR determined that ODJFS does not adequately address the health care needs of
children in foster care and in - home services cases. While PCSAs are completing assessments in a timely manner, keeping medical files in the child’s case records and providing medical records to foster parents at the time of placement, they are not doing an adequate assessment of the child’s health care needs. In addition, key problems identified with respect to physical health services include:

• Health screening and services are delayed for some children;
• Some children are not receiving preventive healthcare services; and,
• Some children are not receiving services to meet identified health needs.

Stakeholders interviewed in the CFSR identified access, availability and provision of oral health care services as problems. The number and accessibility of medical personnel willing to accept Medicaid payments is limited, and this situation worsens in rural areas where the number of medical personnel decreases and the travel requirements increase to obtain services.

Inconsistent coordination of screenings, diagnostic assessments and treatment interventions, as well as under-utilization of inter-departmental programming compromised Ohio’s ability to meet the physical needs of children in the child welfare system.

Strategies to enhance health care services for foster children include:

• Reviewing the Ohio Administrative Code rules governing health care screening to determine whether revision is required to clarify expectations in assessing health care needs; coordinate the provision of appropriate services to meet health care needs; and document services needed and provided or services needed but unable to be provided and the reason.

**Strategy Update:**

A review of OAC rules governing health care was completed in March 2004 to determine whether revisions were required so that agencies could better understand their responsibilities to the children under their care. The rules reviewed included OAC rules 5101:2-42-43, 5101:2-42-66, 5101:2-42-66.1, 5101:2-42-66.2, 5101:2-42-90, 5101:2-39-07, and 5101:2-42-082. The following chart summarizes the specific rules reviewed:
<table>
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<tr>
<th>Rule #</th>
<th>Title</th>
<th>Content</th>
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<tbody>
<tr>
<td>5101:2-39-07</td>
<td>Supportive Services</td>
<td>Directs PCSAs on their responsibility to provide supportive services to children and their families in order to prevent removal from the home; enable reunification, or transition youth to independent living. Discusses the need for all services provided to be coordinated with community agencies.</td>
</tr>
<tr>
<td>5101:2-39-082</td>
<td>“Child’s Education and Health Information” Form</td>
<td>Indicates the PCSA’s responsibility to complete the JFS 1443 “Child’s Education and Health Information” form for each child placed in substitute care or at the time a case plan document is completed; and to update the form whenever changes are necessary.</td>
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<tr>
<td>5101:2-42-43</td>
<td>Requirements of Semiannual Administrative Review (SAR)</td>
<td>Directs agencies (PCSA and PCPA) to conduct an SAR no later than six months after the original case plan was completed, a complaint was filed or the child entered substitute care, or a case plan was filed with court.</td>
</tr>
<tr>
<td>5101:2-42-66</td>
<td>Administrative Procedures for Comprehensive Health Care for Children in Placement</td>
<td>Defines the federally mandated program of comprehensive preventative health services available to Medicaid-eligible children. The rule points out that a health exam and screening constitutes comprehensive health care for all children in placement, and that the agency must develop written interagency procedures to implement comprehensive health care for children in placement.</td>
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<tr>
<td>5101:2-42-66.1</td>
<td>Comprehensive Health Care for Children in Placement</td>
<td>Directs PCSAs, PCPAs, and PNAS in their responsibility for the supervision of comprehensive health care including physical health exams and developmental/psychological assessments, for each child in their care or custody and placed in substitute care. Includes requirements around timeframes for securing exams and assessments, and instructions for documentation.</td>
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<tr>
<td>Rule #</td>
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<tr>
<td>5101:2-42.66.2</td>
<td>Documentation of Comprehensive Health Care for Children in Placement</td>
<td>Provides instruction to PCSAs, PCPAs, and PNA s on how health care information is to be maintained in the case record, including documentation of information that was not obtained and the reasons why.</td>
</tr>
<tr>
<td>5101:2-42-90</td>
<td>Information to be Provided to Caregivers, School Districts and Juvenile Courts; Information to be Included in Individual Child Care Agreement</td>
<td>Delineates the PCSA/PCPA’s responsibility to provide health information (both physical and mental) to caregivers, the courts, school districts, and other service providers. Requires that health information be included as part of the individual childcare agreement made with the substitute caregiver.</td>
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The results of this review indicated that no rule revisions were needed. Rules 5101:2-42-66, 5101:2-42-66.1, and 5101:2-42-66.2 clearly spell out the responsibilities of agencies for securing and documenting physical and mental health screenings and treatment for children in care or custody. OAC rule 5101:2-39-082 delineates how agencies are to document specific health information and how regularly it is to be updated. OAC rule 5101:24-2-43 reinforces the above mentioned rules by requiring that a Semi-annual Administrative Review (SAR) of the child’s case plan be undertaken every six months, including an examination of all services provided to the child and their family, future health activities, and related case documentation.

- Reviewing CPOE reports to determine compliance with health care requirements. PCSAs not in compliance will be required to do a Quality Improvement Plan (QIP) - within 30 days of the final report; and the ODJFS will monitor PCSAs’ progress in achieving compliance.

**Strategy Update:**

PCSAs were monitored on completion of the JFS 01443 for documentation of medical information and providing health care exams within required timeframes. In June 2004, 88 county CPOE Stage 5 reports were completed. The rate of statewide compliance for documenting medical information was 68%; for providing health care exams within required timeframes, 78%. To address this issue, some of the following health care requirements were included in the QIPS:

- Creation of a system that notifies workers 90 days in advance of medical exam;
Inclusion of reminder notices for foster parents to turn in medical forms in newsletters;
• Development of checklists for completing the medical/education form;
• Sending letters to foster parents notifying them of the child’s exam date; and,
• Having clerical workers in the PCSAs track all medical exams.

All QIPs reviewed by March 2005 demonstrated achievement by the PCSAs in obtaining their established goals.

• Increasing awareness of available, local health care services and providers.

**Strategy Update:**

ODJFS is working with the Office of Ohio Health Plans (OHP-Medicaid) to develop resource listings for the PCSAs by local HealthChek providers. Once completed, these will be distributed from one local entity to another. It is hoped that this process will also strengthen networking at the local level.

• Meeting with the Ohio Department of Health staff to increase their knowledge regarding the needs of families in the child welfare system.

**Strategy Update:**

ODJFS (OCF and OHP) and the Ohio Department of Health are currently working together with other State Departments (i.e., Alcohol and Drug Addiction Services, Aging, Mental Retardation and Developmental Disabilities, Education, Rehabilitation and Corrections, Mental Health, and Youth Services); the Governor’s Office; Family and Children First; treatment providers, and parents to address the unique needs of children born pre-natally exposed to alcohol. Given the high prevalence of substance abuse among the child welfare populations, this initiative directly supports ODJFS goals. Highlights of the workgroup activities are as follows:

• In February 2004, Ohio’s First Lady Hope Taft, and the Directors of ODH, ODADAS, and ODMRDD met with members of the Governor’s Cabinet Council to inaugurate Ohio’s Fetal Alcohol Syndrome Project. With technical assistance provided by the Substance Abuse and Mental Health Services Administration (SAMHSA), this multi-system initiative has been designed to holistically address issues associated with pre-natal substance exposure and to launch prevention strategies;

• On May 17, 2004, ODJFS, Office of Ohio Health Plans, presented an overview of Medicaid claims data associated with FAS/E to Ohio’s Fetal Alcohol Syndrome Project Workgroup;

• On September 9, 2004, Ohio First Lady Hope Taft co-chaired a statewide Town
Hall Meeting with the Ohio Departments of Mental Retardation and Developmental Disabilities, Health, and Alcohol and Drug Addiction Services to address issues associated with Fetal Alcohol Spectrum Disorders. The Substance Abuse and Mental Health Services Administration (SAMHSA) provided technical assistance to the planning committee which was comprised of representatives from the co-chairing entities as well as the Ohio Departments of Job and Family Services (OCF and OHP), Education, Mental Health, Rehabilitation and Correction, Youth Services and Aging; Ohio Family and Children First; parents, service providers, kinship care providers and advocates. At the Town Hall Meeting, parents, service providers, and individuals struggling with the effects of FASD presented testimony to the First Lady, State Department Directors, State Legislators, and representatives of Congressional delegates regarding their experiences and needs for supportive programming. Their testimony reflected the following recommendations:

- Increased awareness campaigns regarding the risks associated with substance use during pregnancy;
- Cross-system education regarding the impact of pre-natal substance exposure, diagnostic indicators, and effective interventions/treatment;
- Improved means of diagnosis and early intervention;
- Supportive family services including respite care, and “one-stop” resource centers, and flexible employment schedules;
- A continuum of accessible care, including but not limited to: therapeutic foster care, residential treatment, educational supports, medical care, legal assistance, and long-term housing options as the children transition to adulthood;

- Last fall, Ohio was awarded a federal grant from the Substance Abuse and Mental Health Services Administration’s FASD Center for Excellence to: identify, build and maintain a task force; design, and conduct needs assessment with written results; and develop, implement and evaluate a strategic plan. Subsequently, a steering committee comprised of representatives from the Ohio Departments of Health, Alcohol and Drug Addiction Services, Mental Health, Job and Family Services, Education, Rehabilitation and Correction, Youth Services, Mental Retardation and Developmental Disabilities; parents; services providers; and family advocates met with researchers from The Ohio State University to design a research-based needs assessment process;

- In April and May 2005, researchers from the Ohio State University Center for Learning Excellence facilitated focus group sessions to better assess perceptions associated with Fetal Alcohol Spectrum Disorders, existing programming, and gaps in needed services;

- A subcommittee of the FASD Steering Committee has been meeting to plan a FASD-specific conference. This event will be held on August 16, 2005 and co-
sponsored by various state department agencies. The conference will feature leading researchers in the areas of prevention, assessment and intervention of FASD. In addition, a keynote presentation will be made by a birth mother currently in recovery. Parental impact statements will be integrated into each plenary session; and,

- Working with the Ohio Department of Health to forward information to local providers regarding child welfare needs.

**Strategy Update:**

On September 28, 2004, The Ohio Department of Health (ODH) sponsored an inter-system planning meeting to begin strategic planning for children’s health care service delivery. In attendance were representatives from ODJFS (OCF, OHP, and OFS); ODMH, the SE Ohio Consortium, ODH, local Help Me Grow service providers, and public health practitioners. Topic areas included, but were not limited to:

- Maternal depression;
- Early childhood mental health.
- Home visitation programs;
- Screening and assessment;
- Service coordination;
- EPSDT;
- Treatment capacity;
- Diagnostic barriers; and,
- Eligibility.

Discussions have previously been held with ODH staff regarding training opportunities for school nurses regarding issues specific to the child welfare population. These opportunities continue to be explored.

- Working with the Ohio Department of Health to analyze, through monitoring of utilization reports, the local capacity to provide oral health services.

**Strategy Update:**

The Ohio Department of Health, Bureau of Oral Health Services (BOHS) conducts comprehensive assessments through multiple surveys approximately every five years. The most recent series of surveys occurred in 1998-99. In addition, BOHS began conducting annual surveys of third grade students at 25 sentinel schools across the state in 1999. Surveys of special groups (e.g., homeless, and preschool children and children of migrant farm workers) have also been conducted from time to time.
Analysis of available oral health services has identified 46 Dental Health Professional Shortage Areas. (HPSAs) A HPSA is a geographic area county, city, neighborhood or group of census tracts in which residents have limited access to dental services due to an inadequate number of dentists to serve the population and/or there are financial, geographic, cultural or language barriers to accessing dental care. The federal Bureau of Health Professions designates dental HPSAs. To be considered for a dental HPSA designation, a community must have a higher than generally accepted population to dentist ratio (5,000:1 or 4,000:1 with special considerations) and must document barriers to accessing dental care in neighboring communities.

The Ohio Department of Health has instituted specialized programming in effort to increase service accessibility. These initiatives include:

- **Dentist Shortage Areas and Loan Repayment:** General dentists and dental hygienists working in sites in underserved areas are eligible to apply for repayment of school loans related to their professional training;

- **School Programs:**
  - The BOHS awards grant funds and assists local agencies with implementing and maintaining school-based dental sealant programs. Teams of dental hygienists and dental assistants place sealants on children’s teeth (with parental consent), following a dentist’s written instructions teeth to prevent the most common type of tooth decay;
  - Dental FUNdamentals is a 170-page oral health instructional guide for teachers of grades K-6. It includes teacher content, lesson plans, resources and updates via a newsletter;
  - The Fluoride Mouthrinse Program (FMRP) helps to prevent tooth decay and is available to elementary schools in non-fluoridated communities and/or those that serve a majority of students from low-income families. Currently about 250 schools participate;
  - Operation T.A.C.T.I.C., Teens Against Chewing Tobacco In the Community, is a comprehensive teaching module containing lesson plans and accompanying activities for primary, intermediate and secondary grades on the dangers of smokeless or spit tobacco;

- **Dental OPTIONS (Ohio Partnership To Improve Oral health through access to Needed Services):** a program offered by the Ohio Dental Association in partnership with the Ohio Department of Health to assist Ohioans with special health care needs and/or financial barriers to obtain dental care. Eligible patients are matched with volunteer OPTIONS dentists who have agreed to reduce fees;

- **Dental Treatment Programs in Ohio (Safety Nets):** These programs provide dental treatment services and generally are operated by local health departments, community health centers, hospitals and other organizations within a community. These programs offer sliding fee schedules or reduced fees;
Healthy Start/Healthy Families: Children (up to age 19) and pregnant women can obtain low cost dental care through Healthy Start/Healthy Families coverage, one of Ohio’s Medicaid programs;

Promoting the utilization of public dental providers via awareness campaigns.

**Strategy Update:**

An activity to promote the caseworker awareness of local public dental providers is currently underway. It is anticipated that a website linkage will be established between ODJFS and ODH by December 31, 2005. This site will be promoted to local PCSAs via OCF and PCSAO.

**Enhanced capacities to provide for their children’s educational needs...**

**Objective 3.5**  
*Work with the Ohio Department of Education and local agencies to address the educational services needs of children in the child welfare system.*

The ODJFS did not achieve substantial conformity in regard to children receiving appropriate services to meet their educational needs. Specifically, the PCSAs were inconsistent in assessing children’s educational needs and providing appropriate services to meet those needs.

While some stakeholders expressed the opinion that the PCSAs assign a high priority to meeting children’s educational needs, particularly children in foster care; key problems were identified pertaining to cases in which children showed evidence of school-related behavioral problems, developmental delays, learning disabilities, and/or poor school performance yet no assessment of needs was completed and services were not provided.

Strategies to address the educational services needs of children in the child welfare system include:

- Partnering with the Ohio Department of Mental Retardation and Development Disabilities (ODMRDD) to assist school districts which are/would like to become Community Alternative Funding System (CAFS) providers. For such school districts, dedicated funding is available to provide services for Medicaid-eligible children who are mentally retarded/developmentally disabled or who have specialized educational needs.
Strategy Update:

In the fall of 2004, the Centers for Medicare and Medicaid Services (CMS) raised concerns regarding how Ohio was administrating services for mentally-retarded, developmentally disabled clients. Specifically, the delegation of authority by the single state Medicaid agency (ODJFS) and its sub-recipient (ODMR/DD) to allow local governmental entities (county boards of MR/DD) to perform certain functions and issues associated with comparability of services. Impacted programming included Targeted Case Management, Home and Community-Based Waivers, and CAFS. As a result, CAFS was discontinued in 2005 at the request of CMS.

Ohio has subsequently submitted a “Vision for Medicaid Services for the MR/DD System” to CMS. The Vision serves both as a response to continued questions about the Medicaid compliance of its system, and as a blueprint by which CMS will measure Ohio’s progress toward improving Medicaid compliance. Continued federal funding for Medicaid services for the MR/DD system is contingent upon Ohio providing deliverables to CMS according to the timelines detailed in this document. In regard to CAFS, the realization of the Vision includes the following activities:

• ODMR/DD has begun a process with the county boards of MR/DD to address the CMS’ concerns associated with the delegation of authority issues. A proposal, shared with CMS through ODJFS, has been developed and will implement the elimination of a contract between the county boards of MR/DD and Medicaid providers;
• An emergency rule was filed to continue the approved rate methodology in CAFS from December 2004 through June 2005. A permanent rule is being developed regarding needed changes as well as an amendment to the Medicaid State Plan;
• “Skills development and supports” as defined in CAFS will be deleted and “day habilitation” will be added as a waiver service in Level I and IO. This change will require the submission of a state plan amendment, submission of waiver amendments, and changes to existing administrative rules. Additional tasks that may be required include: changes in the definitions of homemaker/personal care in the Level I and IO waivers, and Supported Employment in the IO waiver. The Waiver Reimbursement rule will also need to be revised to accommodate the newly developed rate for “day habilitation;”
• “Active treatment” will be deleted from the current CAFS program and the payment for this service will be transferred to certified ICFs/MR. This alternative will involve changes in legislation, the Medicaid State Plan, and existing administrative rules;
• All professional services currently through CAFS will be eliminated. Therapy services will continue to be offered on the state plan where available. This
change will require the submission of a state plan amendment, changes to existing administrative rules, and notices to be distributed regarding the elimination of services through CAFS. Consideration will be given to adding extended state plan services in the ODMR/DD administered waivers; and,

- Necessary changes will be made associated with covered transportation services regarding each of the above changes. Discussions with CMS regarding transportation for HCBS services may have an impact on the changes in this area. Any changes involve, at a minimum, submission of a state plan amendment and changes to existing administrative rules.

- Assisting PCSAs in understanding students’ rights and how to request development of an Individual Education Plan (IEP). The improved documentation of needs and services via the IEPs will assist the PCSAs and local school systems in the development of reasonable accommodations and services needed for a child’s academic success.

**Strategy Update:**

ODJFS is currently working with state partners at the Ohio Department of Education to develop website linkages that will provide local caseworkers with current resources associated with obtaining needed academic supportive programming for their clients. It is anticipated that this will be completed by December 31, 2005.

- Analyzing PCSAs’ compliance in providing a child’s updated educational needs information to all individuals involved with the case plan.

PCSAs are required to complete the JFS 01443, “Child’s Education and Health Information” form at the time a child is placed into substitute care. In addition, the PCSAs are required to update the information at the time of a semi-annual administrative review (SAR), any time there is a placement change, or any time there is a change in any of the information contained on the JFS 01443.

ODJFS will monitor the completion of the JFS 01443 through the statewide CPOE process.

**Strategy Update:**

ODJFS has monitored the completion of the JFS 01443 through the statewide CPOE process. During the CPOE Stage 4 reviews, which ended on June 30, 2003, PCSAs were monitored on completion of the JFS 01443, Education Services. Of the 85 counties reviewed (three counties were not reviewed during CPOE Stage 4 because they participated in the CFSR review) it was determined that statewide compliance was at 63%. CPOE Stage 5 commenced on July 1, 2003. As of March 2005, 88
county CPOE Stage 5 reports have been completed, statewide compliance with this requirement is currently at 70%. Thus far, there has been a 7% level of improvement in completion of the JFS 01443.

- Supporting the Ohio Department of Mental Health’s Alternative Education Challenge Grant Program and the Ohio Mental Health Network for School Success Initiative targeted to children at risk of academic failure.

Untreated mental health issues compromise educational achievement of Ohio’s students. Ohio’s Alternative Education Challenge Grant Program funds projects that provide behavioral health services to students who are at high risk of academic failure.

The Ohio Mental Health Network for School Success is co-sponsored by the Ohio State University Center for Learning Excellence, the Substance Abuse and Mental Health Services Administration, the Ohio Departments of Mental Health and Education. Through this project, regional collaborative networks have been developed to identify local needs and opportunities to provide a continuum of supportive services. Memberships to the regional networks include families, educators, mental health boards, mental health providers and other community partners.

**Strategy Update:**

The prevention subcommittee of the Behavioral Health Care Budget and Policy Initiative, now known as Access to Better Care (ABC) identified specific school-based behavioral health care program recommendations that were forwarded to the Governor in November 2004. The recommendations included expansion of Student Assistance Teams, continuation of After-School Alliance services, and fulfillment of the goals and objectives of the Shared Agenda Initiative.

Also in the Fall of 2004, the Ohio Department of Education published Ohio’s School Climate Guidelines. This document identified comprehensive goals and targeted objectives necessary for the creation of environments conducive to students’ academic success. Some of these guidelines include:

- Professional staff development incorporating topics of child development, brain development, school safety, and identification on non-academic barriers to learning;
- Establishment of core standards which align curricula, student supports, professional development, policies and resources for consistent implementation;
- Improved community connections, including family support activities and adult educational opportunities;
- Continuous quality improvement through on-going assessment and evaluation;
• Resource assessments to determine existing programs which support safe and supportive learning environments, including the provision of comprehensive services to students and staff;
• Safety plans and the establishment of crisis response teams;
• Methods by which to increase a student’s sense of “belonging” in the classroom so as to encourage classroom participation, positive interactions, and good study habits;
• Increased engagement with parents and family members;
• Youth involvement in forming school policies and procedures; and,
• Nutritional programming.

ODE was awarded a $1.2 million State Action for Education Leadership Project grant in November 2004. (This grant is renewable for up to two additional years, based on evidence of progress, for a total of up to $3.6 million.) Funded by The Wallace Foundation, these dollars will be used to:
• Develop individualized leadership training programs for eight of the state’s largest urban school districts;
• Create state policies around educator preparation, recruitment and training;
• Measure progress by analyzing student assessment data; and,
• Develop a statewide data system to inform instructional and leadership training decisions.

The Ohio Mental Health Network for School Success is co-sponsored by the Ohio State University Center for Learning Excellence, the Substance Abuse and Mental Health Services Administration and the Ohio Departments of Mental Health and Education. Through this project, regional collaborative networks have been developed to identify local needs and opportunities to provide a continuum of supportive services. Memberships to the regional networks include families, educators, mental health boards, mental health providers and other community partners.

ODMH and ODE are jointly implementing Shared Agenda, a project designed to increase school-based mental health programming and improve awareness of mental health issues by students and school personnel. ODJFS serves in an advisory capacity on this project. A summary of the Steering Committee activities include:
• The Eliminating Barriers Initiative- a 3-year, federally funded project to address the stigma of mental illness among students in a school-based setting;
• The establishment of a legislatively commissioned Educator Standards Board;
• The draft Ohio Guidelines for School Safety being reviewed for approval by the State Board of Education;
• An Inter-Agency Data reference guide;
• The Goals and Objectives document;
  o Guiding Principles:
Mental health is crucial to school success;
There are shared opportunities for improvements;

Goals and Objectives:
Develop a common understanding among education, mental health, families and other stakeholders of key shared agenda concepts related to the critical links between mental health and school success;
Identify/expand/implement evidence-based practices that support the critical links between mental health and school success;
Positively influence allocations at the state and local levels;
Positively influence the FY 06-07 state budget; and,
Expand capacity that will support mental health in schools through pre-service and in-service education, training and professional development.

Ohio has continued implementation efforts of the recently enacted SB2. This piece of legislation specifies the required provision of training to college students majoring in education regarding indicators of behavioral health problems.

The Ohio Department of Mental Health was awarded a grant by the National Association of State Directors of Special Education in early 2005. These dollars serve to support Ohio’s ability to:

- Develop a common understanding among education, mental health, families and other stakeholders of key shared agenda concepts related to the critical links between mental health and school success;
  - Foster partnerships among families and students, educators and mental health professionals;
  - Reduce stigma surrounding children’s mental health issues;
  - Promote a better understanding of the impact of mental health on academic performance and school success;
- Identify, expand, and implement evidence-based practices that support the critical links between mental health and school success;
  - Identify and disseminate strategies and best practices for family engagement in addressing the critical links; and,
  - Continue to promote the development/expansion of Positive Behavior Support programming.

Ohio’s School Mental Health Education Program has initiated a project funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). Once implemented, this project will: expand the number of university partnerships; utilize an innovative state-local-academic council to identify and disseminate effective school-based mental health practices; provide four county-based pilots engaged in community
planning with additional support needed to more effectively address the mental health needs of children and youth.

Ohio’s Alternative Education Challenge Grant Program continues to fund projects that provide behavioral health services to students who are at high risk of academic failure.

**Enhanced capacities to provide for their children’s behavioral health care needs...**

**Objective 3.6**  
*Work with the Office of Ohio Health Plans, the Ohio Departments of Mental Health and Alcohol and Drug Addiction Services and local agencies to address the behavioral health care needs of children in the child welfare system.*

The CFSR found that ODJFS was not consistently effective in meeting children’s behavioral health needs. The key problems identified were:

- Some children had behavioral health care needs but were not receiving services to address those needs;
- Mental health services were delayed for some children; and,
- The services were provided too infrequently to be effective.

In addition, all stakeholders commenting on this issue expressed the opinion that there are significant problems pertaining to obtaining behavioral health services for children because of the scarcity of resources. In some areas, limited array of services is available, and there may be waiting lists before families can access services. Specifically, in rural areas, the necessity to travel long distances to access services and limited transportation services present significant challenges to local child welfare agencies’ efforts in accessing services for children and families.

Although basic mental health and substance abuse services are provided in each county, most are unable to maintain a full spectrum of care (e.g., detoxification, home-based, outpatient, inpatient and residential treatment). The varying array of services often limits the ability of family members to participate in treatment and consequently may negatively impact the effectiveness of treatment. The need for psychological and mental health assessments was identified as critical in the CFSR.

Strategies to address the behavioral health care needs of children in the child welfare system include:

- Partnering with the Ohio Department of Mental Health on their efforts to increase the consistent utilization of assessment tools.
Strategy Update:

ODMH presented an overview of the Ohio Scales at a meeting hosted by PCSA on September 2, 2003.

Increasing PCSA staffs’ awareness of mental health assessment instruments was featured in a training regarding use of a level of care placement tool on September 15, 2004.

On February 3, 2005, two teleconferences were held featuring Benjamin Ogles, Ph.D. regarding the use of Ohio Scales as part of the FAST RAP training Series. This workshop was telecast to 88 county agencies by ODJFS and co-hosted by the ODMH. Local participants included representatives from child welfare, mental health and substance abuse treatment providers, administrative board members, and family advocates. Dr. Ogles’ presentation focused on how youth consumer outcomes can be used to support treatment objectives, and how Ohio Scales can be used as a validated Level of Care instrument. Dr. Ogles also detailed recent research findings regarding typical differences in how parents and youth evaluate “normal” vs. problem behaviors and how these differences can affect treatment planning, use of services, ultimately the effectiveness of services rendered.

- Providing training to therapists, caseworkers, adoptive and foster parents regarding the special behavioral health care needs of children in out-of-home care and in adoptive placements.

Strategy Update:

The ODMH, in conjunction with local child welfare staff and private providers presented two workshops at the ODJFS Directors’ Association conference in April 2004. These trainings provided information regarding risk and protective factors, resiliency and asset building, and recommended strategies for effective interventions for children aged 0–6. Seventy-five participants attended these workshops. The average evaluation score was 3.5 on a 4.0 scale. Comments reflected a high degree of satisfaction with the presenter and use of audio visual materials.

In response to growing concerns regarding Ohio’s behavioral health care system, an inter-departmental initiative, Family and System Teams (FAST) was launched in July 2004 to increase local service capacity and family involvement in treatment activities. The development of a coordinated advocacy program was a key component of this project’s design. Related training activities of this initiative included:

- On August 25, 2004 a session was held to provide interested parties an overview of Ohio’s Access to Better Care initiative. In addition, presentations
were made to specifically address children’s mental health and substance abuse issues and related programming needs;

- On September 10, 2004, a presentation was made regarding evaluation requirements of the family advocacy project component;
- On September 17, 2004, training was held to review referral and service tracking processes. In addition, information was presented regarding research-based functioning assessment tools (i.e., Ohio Scales) and Family Decision-Making models; and,
- On November 20, 2004, representatives of the FAST Parent Advocacy Program presented two workshops to participants attending the ODJFS Adoption and Foster Care Conference. These trainings provided resource families with information regarding how to successfully navigate the behavioral health care and special educational systems to obtain needed services. Specific topics that were presented included: an overview of the FAST project and how to access local family advocacy services, entitlement and benefit programs, jargon/acronyms, and the range of social service options for children with multiple needs and their families.

On November 18, 2004, ODJFS sponsored a Mental Health Institute to increase awareness of the unique issues faced by adopted children and their families. 21 practitioners, including adoption placement specialists, clinical social workers, marriage and family therapists, substance abuse treatment providers, and students attended this event. The evaluations indicated that the participants found the workshop to be helpful and had application for their work. (100% noted that the trainer had significant knowledge, 65% of whom rated this as excellent; 99% indicated that the instructor had conducted activities that helped transfer the material presented to their jobs.) Participant comments reflected an interest in additional training, and increased knowledge of: attachment reactive disorder, the impact of adoption issues throughout the child’s life, and the benefits of multi-disciplinary teaming to adequately address adjustment issues needed for successful adoption.

In the fall of 2004, ODMH and ODJFS initiated a series of monthly teleconference trainings that were provided to multi-systemic representatives all 88 counties. Hosted by the local DJFSs/PCSAs, participants have included childwelfare staff, members of the ADAMHS/ADAS/MH Boards, Family and Children First Councils, and service providers. These presentations, a component of the FAST project, have been designed to provide technical assistance on program implementation as well as to provide participants with information regarding current best practice methods. To date, the following topics have been featured:

- November 1: Wrap-around Basics;
- November 30: Preparing Families for Wrap-around Teams;
- January 7, 2005: Three Core Competencies of Wraparound Practice;
Partnering with Families, Cultural Competence and Strengths-Based Practice;

- February 3, 2005: Use of Ohio Scales to support treatment objectives and outcomes;
- March 3, 2005: Crisis and Safety Planning as part of Wraparound programming;
- April 7, 2005: Wraparound Family conferencing and Team Decision-Making- Similarities and Differences;
- May 5, 2005: Supervision of Wraparound Practice; and,

On January 26, 2005, staff from ODADAS and ODJFS conducted a workshop to inter-system service providers in Delaware County. This presentation was designed to improve communication and increase collaboration among county partners. Sixty-one people attended this event representing the fields of child welfare, behavioral health treatment, juvenile court, education, mental retardation and developmental disabilities. 72% of the participants evaluated this session. The workshop received an average score of 3.7 on a 5.0 scale in terms of perceived value. Comments noted that this workshop helped identify limitations and strengths, increase understanding of each agency’s role, and develop more effective relationships among team members.

On March 4, 2005 representatives of the National Alliance for the Mentally Ill (NAMI), OSU Division of Research, and ODMH staff co-presented information regarding effective implementation of the FAST program at the Northeast Ohio Regional Family and Children First Coordinators’ meeting.

- Working with the Ohio Department of Alcohol and Drug Addiction Services to promote the provision of specialized substance abuse programming for families involved with the child welfare system.

**Strategy Update:**

Amended House Bill 484, Ohio’s response to the Adoption and Safe Families Act, exceeded federal standards by specifying that child abuse or neglect associated with parental substance abuse and failed treatment could be grounds for termination of parental rights. House Bill 484 also emphasized the need to provide timely and appropriate treatment necessary to facilitate family reunification.

The Ohio General Assembly has allocated $4 million annually to the Ohio Department of Alcohol and Drug Addiction Services for the provision of such programming at the local level. To better meet the special needs of children in the child welfare system whose parents struggle with substance abuse, the Ohio Department of Alcohol and
Drug Addiction Services expanded the use of these dollars to fund prevention and educational services.

In February 2004, the Ohio Department of Alcohol and Drug Addiction Services underwent a restructuring process which resulted in each of Ohio’s 88 counties being assigned both a treatment program specialist as well as a preventionist. The staff regularly meet with local service providers, prevention coalitions, board associations and provider councils to promote the use of House Bill 484 dollars to expand the provision of Alcohol and Drug prevention and education services to parents of children in the child welfare system.

On June 30, 2004, the ODJFS and the Ohio Department of Alcohol and Drug Addiction Services presented the 2004 Joint Report to the Governor and selected members of the General Assembly. This document described Ohio’s progress toward prioritizing substance abuse services to families in the child welfare system. The report detailed information regarding multi-systemic needs assessments, service capacity, and the number of individuals who received care supported by specialized earmarked funds. This document also highlighted some of Ohio’s innovative programs that are effectively addressing the unique needs of this population.

On April 22, 2005, staff of ODJFS and ODADAS met with the local Family and Children First Coordinators to discuss 484 implementation issues and recommended program development.

- Working with advocacy groups and the Ohio Departments of Mental Health and Alcohol and Drug Addiction Services to identify behavioral health care treatment capacity, gaps in services and needs for specialized programming.

**Strategy Update:**

In the Fall of 2003, PCSAO established the Behavioral Health Care Policy and Budget Initiative (now known as Access to Better Care- ABC) a project designed to develop collaborative strategies for addressing gaps in mental health and substance abuse programming for Ohio’s children and their families. With the goal of determining service needs and funding issues across multiple systems, workgroup members include the Directors of ODJFS, ODMH, ODADAS, the Ohio Department of Mental Retardation and Developmental Disabilities (ODMRDD), the Ohio Department of Youth Services (ODYS), and ODE; the County Commissioners Association of Ohio; PCSAO; the OACBHA; Ohio Children and Families First; the Center for Innovative Practice; and the Governor’s Office. To date, this group has completed the following activities:

- Representatives of each discipline presented an overview of the ideal statewide BHC system from their perspectives (October 2003);
Representatives of each system provided a needs assessment based on 41 identified services for varying population groups (i.e., children in custody; children in secure, residential treatment; children not in custody, but with identified needs; children exhibiting early signs of illness; and those of risk) (December 2003);

Participants analyzed placement trends and expenditures for services across levels of care (January 2004);

Staff developed an inter-system glossary to improve communication across disciplines (February 2004);

ABC Workgroup members identified three areas for targeted program development. These are: Prevention and Early Intervention for Children, Youth and their Families; Early Screening, Assessment and Treatment for Behavioral Health Care Needs of Children and Youth 0-18; and Treatment of Multi-need Children, Adolescents, and Families (May 2004);

Subcommittees representing the following areas of ABC program development convened to prioritize needed services. The recommendations were then presented to the Governor’s Office in November 2004 for consideration in the upcoming budget process. The recommendations were as follows:

- **Prevention:**
  - Finalize and support a shared prevention framework;
  - Offer the Partnerships for Success strategic planning model to additional counties;
  - Continue support for Early Childhood Mental Health specialists and target resources to academic emergency school districts;
  - Support Intervention Assistance Teams in schools in academic emergency; and,
  - Target resources to prevent and address Fetal Alcohol Spectrum Disorder.

- **Assessment/Early Intervention:**
  - Expand proven effective parent and caregiver training and education;
  - Conduct behavioral health assessments in early childhood settings;
  - Conduct behavioral health assessments in schools (e.g., Columbia Teen Screen for Depression and suicide risks); and,
  - Expand effective school-behavioral health partnerships, including Care Teams.

- **Treatment:**
  - Include and empower parents in planning for their high-need children;
  - Reduce treatment gaps and begin to expand service capacity for children involved in juvenile justice and child welfare; and,
Assure collaboration to meet child and family needs.

- On December 9, 2004, the OCTF Board voted to support the Prevention recommendation of increasing service capacity via the provision of funding to ODMH’s Early Childhood Mental Health Initiative. The Board approved the transfer of $1.5 million from ODJFS to ODMH for SFY06. These dollars will underwrite the costs of consultation services, parent education, curricula, and training for programming targeted to children aged 0-5 who had been identified as being of high risk; and,

- Throughout the spring of 2005, the child-serving departments worked together to establish joint programming through the pooling of dollars. These budget recommendations were forwarded to and approved by the Governor. At the time of this writing, the budget continues to be deliberated by the Ohio Senate.

- Working with the Ohio Department of Mental Health to jointly expand the continuum of care to allow Medicaid reimbursement for bundled, community-based mental health services. Once federal approval is received, providing cross-systems training with PCSAs and local mental health providers around effective utilization of these services.

**Strategy Update:**

ODJFS and ODMH continue to work together to establish Medicaid-funded Intensive Home and Community-Based Services. While the proposal has yet to be submitted to CMS, the activities to date on this project include:

- Monthly workgroup meetings convened by ODMH and comprised of State level personnel, private providers, county ADAMHS/MH Boards, and client advocates to design the services, standards of practice and reimbursement structures;
- Submission of an ODMH proposal to OHP for expansion of Medicaid State Plan services on February 6, 2004;
- A conference call convened by OHP to a subcontractor who has worked with other states on the establishment of ACT/IHCHS-type programming on May 28, 2004 to review ODMH’s proposal;
- Consultation with CMS by OHP to determine needed revisions;
- Internal meetings among ODJFS staff (OHP and OCF) to detail programmatic concerns and potential implementation issues;
- On-going processes between the two departments to ready the proposal for CMS review;
- ODMH sponsored meetings with constituents to present an overview of proposed programming and to elicit additional provider input regarding implementation needs; and,
- Publication of proposed implementation rules by ODMH for public comment. The rules are slated for review by legislators serving on the Joint Committee on

- Establishing multi-disciplinary teams and other collaborative models for assessments, case planning and the monitoring of service provision to address issues that require the involvement of multiple agencies (e.g., domestic violence, mental health, education, substance abuse, mental retardation/developmental disabilities).

**Strategy Update:**

**Ohio Network of Child Advocacy Centers**
Ohio has identified Child Advocacy Centers (CAC) as the most effective venue for facilitating skilled, interdisciplinary investigations and state-wide access to services. Ohio has focused on establishing and maintaining a state association of CAC for the purpose of promoting local programs and developing its own supporting resources. The past year’s activities can be grouped in the following general categories:

**Administration**
The Ohio Network of Children’s Advocacy Centers [ONCAC] is incorporated in the state of Ohio as a private, not for Profit Corporation and is a 501 [C] 3 agency. ONCAC has relocated its central office to the Center for Child and Family Advocacy, 655 East Livingston Avenue, Columbus 43205. ONCAC is an Accredited Chapter of National Children’s Alliance [NCA] and participates in all NCA activities. Two Ohio representatives serve on the NCA Board and the ONCAC Executive Director is an NCA site visitor for accreditation studies and a grant reviewer for NCA program development grants. ONCAC staff and board members are regularly featured in state and national skill-development conferences, including NCA’s Leadership Conference. ONCAC is governed by a twelve member board of directors which meet quarterly. Additional meetings were held this year to examine new structural organization. The board was divided into two components to focus on the two primary responsibilities of the board: 1) Program and Services which directs efforts towards the development of new centers and services to member agencies; and 2) Development which concentrates on board and office issues, including financial resources, outside support and board structure and development.

Membership criteria and member services were distributed to prospective members in May of 2004. The criteria are based on NCA standards. The criteria are in the agency brochure and on the web site. Fifteen agencies paid membership dues for 2004-2005.

**Public Awareness and Advocacy**
ONCAC maintains the website, [www.oncac.org](http://www.oncac.org), and updates it on a regular basis. The website contains extensive information on local, state and national organizations, trainings and funding opportunities. The website currently is averaging 23,000 hits per
month by 1,000 individual users. The website is an effective means of receiving and communicating information. ONCAC is working with Ross and Stark Counties on developing and hosting their websites as a member service. Newsletters are published and distributed each quarter. The ONCAC newsletter currently is distributed to eight hundred Ohio professionals.

Program Support and Development
The primary mission of ONCAC is to promote the provision of skilled and timely services to child sexual abuse victims through the development of accredited Ohio CAC. The following chart shows the CAC development that has occurred since the incorporation of ONCAC:

<table>
<thead>
<tr>
<th>CAC Status</th>
<th>May 2003</th>
<th>May 2004</th>
<th>May 2005</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accredited Member</td>
<td>1. Canton (Stark)</td>
<td>1. Canton (Stark)</td>
<td>1. Canton (Stark)</td>
</tr>
<tr>
<td></td>
<td>2. Chillicothe (Ross)</td>
<td>2. Chillicothe (Ross)</td>
<td>2. Chillicothe (Ross)</td>
</tr>
<tr>
<td></td>
<td>3. Cincinnati (Hamilton)</td>
<td>3. Cincinnati (Hamilton)</td>
<td>3. Cincinnati (Hamilton)</td>
</tr>
<tr>
<td></td>
<td>4. Dayton (Montgomery)</td>
<td>4. Dayton (Montgomery)</td>
<td>4. Dayton (Montgomery)</td>
</tr>
<tr>
<td></td>
<td>5. Toledo (Lucas)</td>
<td>5. Ravenna (Portage)</td>
<td>5. Ravenna (Portage)</td>
</tr>
<tr>
<td></td>
<td>7. Steubenville (Jefferson)</td>
<td>7. Toledo (Lucas)</td>
<td>7. Springfield (Clark)</td>
</tr>
<tr>
<td></td>
<td>(Mahoning, Trumbull, Columbiana)*</td>
<td></td>
<td>9. Toledo (Lucas)</td>
</tr>
</tbody>
</table>
| Associate Member | 1. Akron (Summit)                             | 1. Akron (Summit)                             | 10. Youngstown (Mahoning, Trumbull, Columbiana) *
|                  | 2. Columbus (Franklin)                        | 2. Athens (Athens)                            | 11. Columbus* (Franklin)                      |
|                  | 3. Springfield (Clark)                        | 3. Columbus (Franklin)                        | 12. Akron* (Summit)                           |
|                  | (Mahoning, Trumbull, Columbiana)               | 5. Wooster (Wayne)                            |                                               |
| Developing Center| 1. Bellefontaine (Logan)                      | 1. Bellefontaine (Logan)                      | 1. Batavia (Clermont)                         |
|                  | 2. Cambridge (Guernsey)                       | 2. Cambridge (Guernsey)                       | 2. Bellefontaine (Logan)                      |
|                  | 3. Findlay (Hancock)                          | 3. Cambridge (Guernsey)                       | 3. Cambridge (Guernsey)                       |
|                  | 4. Lima (Allen)                               | 4. Findlay (Hancock)                          | 4. Findlay (Hancock)                          |
|                  | 5. Sandusky (Erie)                            | 5. Hamilton (Butler)                          | 5. Hamilton (Butler)                          |
|                  |                                               | 6. Lancaster (Fairfield)                      | 6. Lancaster (Fairfield)                      |
|                  |                                               | 7. Lima (Allen)                               | 7. Lima (Allen)                               |
|                  |                                               | 8. Mansfield (Richland)                       | 8. Mansfield (Richland)                       |
|                  |                                               | 9. Sandusky (Erie)                            | 9. Sandusky (Erie)                            |

* Application filed: awaiting site visit
Training

ONCAC has provided or sponsored a range of educational events to both improve the functioning of multidisciplinary teams and investigation of child abuse cases, and enhance services to child victims and their non-offending family members. In addition to its ongoing forensic interviewing program, *Beyond the Silence*, ONCAC has made the following opportunities available for its membership and interested communities:

- **Two Days in May**: ONCAC was a co-sponsor in this state-level conference for victim advocates and related personnel;
- **Prosecutor’s Training**: As an adjunct to *Two days in May*, ONCAC cosponsored training for Ohio Prosecutors. Victor Veith, Director of the American Prosecutor’s Research Institute, trained on the effective prosecution of child sexual abuse cases;
- **Sexual Assault, Date Rape Drugs and Internet Exploitation**: ONCAC was a co-sponsor for a one day training attended by over one hundred professionals representing child protective services, law enforcement, victim advocacy and medical disciplines;
- **New Children’s Advocacy Center Directors Training**: ONCAC staff conducted two day training for new children’s advocacy center directors and coordinators with one-on-one training follow-up for directors unable to attend;
- **5th Annual Child Abuse Training**: In collaboration with Tri-County Child Advocacy Center, ONCAC cosponsored training on the medical and mental health aspects of child abuse and domestic violence, as well as a special session on cultural diversity in children’s advocacy centers;
- **Forensically Sensitive Therapy and Forensic Evaluation**: ONCAC and Clark County Child Advocacy Center sponsored one day training on forensically sensitive therapy and evaluations. The target audience was mental health providers who are members of multidisciplinary teams and provide therapy for child victims of sexual abuse. Linda Cordisco Steele, lead trainer for National Children’s Advocacy Center Training Academy, was the trainer;
- **Taking Child Abuse Investigations into the 21st Century**: ONCAC cosponsored training by The Kid’s Team of Licking County on internet crimes involving children. The training focused on the motivation and methods of the on-line predator;
- **National Conference Attendance and Scholarships**: Believing that attendance at national conferences exposes participants to national experts and the latest research and practice in the field, as well as providing invaluable opportunity to network with colleagues performing similar functions, ONCAC staff attend and provide member agency scholarships to national child advocacy center events. These include:
  - National Children’s Alliance Leadership Conference in Washington, DC;
  - Midwest Regional Children’s Advocacy Center Child Abuse Symposium;
  - National Symposium on Child Sexual Abuse; and,
Case Management Data Collection
The ability to monitor services and ensure accountability is an important consideration for a community considering interdisciplinary collaboration and/or the establishment of a CAC. ONCAC is actively working with Network NINJA of Chicago and a user committee comprised of member agency representatives to develop a web-based data collection and case management system that:

- Produces performance and demographic reports;
- Maintains case files;
- Permits electronic case management and oversight;
- Facilitates meaningful research; and,
- Provides a reliable basis from which to make informed programming and case-specific decisions.

The system went live in January 2005. Cincinnati Children’s Hospital hosts the server without cost to ONCAC; software and access is provided without cost to ONCAC member agencies. Currently, eleven pilot centers have received training and use the system. New programs will be added to the network when it is ensured to be functioning in a secure, time-economical and outcome-producing manner.

Forensic Interviewing
This objective also was intended to establish a state system for making forensic interviewing instruction financially and geographically accessible to all professionals that interview alleged child abuse victims. Over the past year, twelve sessions of Beyond the Silence—a three day multidisciplinary forensic interviewing course—have been conducted, training 234 professionals from twenty six counties. ONCAC recently has formed a working relationship with the Ohio Child Welfare Training Program’s Regional Training Centers (RTC) to provide broader training opportunity. The pre and post tests administered to all training participants show an increase in knowledge after the training. Training evaluations indicate a positive attitude toward the forensic interviewing model being taught. The training stresses joint investigations by multidisciplinary teams, which should enhance investigations and services to child victims. Although it is impossible to quantify changes in methods or improvement in the quality of child forensic interviews, the training of 234 front line professionals will improve the child protection system in participating counties in the state of Ohio.

Interdisciplinary Training
Ohio sees interdisciplinary training as critical both to enhancing professional skills and to promoting collaborative approaches. Using the Ohio Child Welfare Training Program Regional Training Centers to facilitate this training helps promotes interaction between disciplines and sharing of community resources. This past year’s courses experienced waiting lists for registration availability. Programs over the past year included:
• Collaboration in Working with Domestic Violence Cases;
• 5-Day Forensic Interviewing Training (Childhood Trust);
• Child Abuse and Exploitative Investigative Techniques Training; and,
• Violence In The Media and The Impact on Child Abuse and Youth Violence

Family Drug Courts
As detailed in prior reports, Ohio has encouraged the development of Family Drug Courts throughout the state. A Family Drug Court is a specialized docket that focuses on parents who abuse or neglect their children as a result of substance abuse or addiction. Family Drug Courts are based upon the concepts of traditional adult drug court: frequent and regular oversight by the court; specific and strictly enforced conditions to diversion; regular drug testing; and, accessible and mandated ancillary treatment services. Since 30 to 80% of active child protection cases and 80 to 90% of court dependency cases are reported as involving substance abuse and/or addiction by a family member, the integration of substance treatment, child protection and criminal justice services is vital to effective intervention. Traditional criminal and civil remedies do little to address child-related and recidivism issues or facilitate the birth of drug-free infants, but Family Drug Court offers a nexus where these factions can converge. Additionally, Family Drug Courts model the inter-disciplinary team collaboration that the Task Force has prioritized. Ohio currently leads the nation in the number of Family Drug Courts that are developing and/or operational. This past year, Ohio has supported the operational (second year) stage of three Family Drug Courts:
  • Erie (Sandusky) – Nine families currently enrolled with a graduation scheduled for June 2005;
  • Sandusky (Fremont) – Three families currently enrolled; two families recently graduated; and,
  • Logan County (Bellefontaine) – Eight families currently enrolled

Ohio also has supported the planning and implementation stage of new Family Drug Courts in:
  • Belmont (St. Clairsville) – Operational since January 2005 and currently serving ten families;
  • Mahoning (Youngstown) – Seven families currently enrolled with a graduation scheduled for June 2005; and,
  • Fairfield (Lancaster) – In planning and developmental stage

As agreed upon, SCO has absorbed the costs of the Family Drug Court Manager into the general state budget. Funds previously allocated towards salary have been used to develop programs such as the Ohio Drug Court Practitioner Network. The Network facilitates peer discussion and informational exchange among all disciplines involved in the state’s drug courts, including child welfare staff and treatment providers.
• Providing technical assistance to local communities to increase utilization of resources and promote effective programming for families in the child welfare system who struggle with substance abuse.

**Strategy Update:**

In February 2004, Ohio’s First Lady Hope Taft, and the Directors of ODH, ODADAS, and ODMRDD met with members of the Governor’s Cabinet Council to inaugurate Ohio’s Fetal Alcohol Syndrome Project. With technical assistance provided by the Substance Abuse and Mental Health Services Administration (SAMHSA), this multi-system initiative has been designed to holistically address issues associated with prenatal alcohol exposure and to launch prevention strategies. (Please refer to Goal 3, Child and Family Well Being, Objective 3.4, Fourth Bullet Strategy.)

Amended House Bill 484, Ohio’s response to the Adoption and Safe Families Act, exceeded federal standards by specifying that child abuse or neglect associated with parental substance abuse and failed treatment could be grounds for termination of parental rights. House Bill 484 also emphasized the need to provide timely and appropriate treatment necessary to facilitate family reunification. The Ohio General Assembly has allocated $4 million annually to the Ohio Department of Alcohol and Drug Addiction Services for the provision of such programming at the local level. To better meet the special needs of children in the child welfare system whose parents struggle with substance abuse, the Ohio Department of Alcohol and Drug Addiction Services expanded the use of these dollars to fund prevention and educational services. (Please refer to earlier program description in Goal 3, Objective 3.6.).

**Objective 3.7: Provide family support and prevention-focused services to underserved populations across counties**

**Strategy Update:**

Since local prevention needs are identified through a needs assessment process conducted at the county level, services differ based on the particular demographics of each county. Some of the underserved populations which receive family support and prevention-focused services as a result of Ohio Children’s Trust Fund (OCTF) funding include:

- Somalia families;
- Migrant farm workers;
- Parents with deaf and hard of hearing children;
- Spanish-speaking parents;
- The Amish community;
- Teen parents; and,
- Fathers.
Objective 3.8: Actively collaborate with other prevention-focused entities in order to exchange ideas and resources, share expertise, coordinate prevention efforts statewide, eliminate duplication and competition, and maximize available resources

Strategy Update:

OCTF staff, continue to provide coordination for the Prevention Partners Leadership Group, which met four times during this reporting period. New members include representatives from the Ohio Network of Children’s Advocacy Centers, the Ohio Domestic Violence Network and the Family Violence Prevention Center.

On-going collaboration continued with the Ohio Department of Health to conduct the annual training on December 9, 2004 for Child Fatality Review Boards, and to contribute to the needs assessment for the five year Maternal and Child Health Plan.

In a new endeavor, the OCTF Executive Director and a Board member participated on the Prevention Committee of the multi-system Access to Better Care (ABC) Initiative to improve mental health services to children and youth. This involvement resulted in a new partnership where OCTF will fund early childhood mental health consultation services in conjunction with the Ohio Department of Mental Health.

In another new endeavor, OCTF was successful in getting legislation passed which will pave the way for a partnership with children’s advocacy centers in the state. OCTF will provide start-up money to multi-disciplinary teams seeking to establish a child advocacy center, provided the team agrees to maintain a primary prevention component. Additionally, as a result of the legislation, child advocacy centers will be able to submit grant requests directly to OCTF for annual funding to support their primary prevention activities.

A third new prevention-focused partnership has been established between OCTF and the Ohio Association for the Education of Young Children (OAEYC) to implement the “Strengthening Families through Early Care and Education” framework. This model, developed by the Center for the Study of Social Policy, and supplemented by the National Association for Education of Young Children (NAEYC), embeds prevention elements in early childhood settings, which function to increase parental resilience and create protective factors for children. An overview of the plan is attached as Appendix, Attachment U.
Objective 3.9: Provide information and education to OCTF Prevention Partners

Strategy Update:

In April 2005, the OCTF again co-sponsored an annual Prevention Month Conference in partnership with Prevent Child Abuse Ohio and several other organizations. The conference theme was: “Protecting Ohio’s Children 2005: Together We Can Prevent Child Abuse and Neglect”, and more than one hundred seventy-five were in attendance.

OCTF awarded grants to 3 child advocacy centers and 2 agencies to collaborate on developing a standardized curriculum for preventing Shaken Baby Syndrome. These agencies are training direct service providers to deliver the curriculum to seven audiences targeted by OCTF. The Children’s Trust Fund provides door hangers and brochures for everyone attending the training sessions, so there is consistency of content and supporting materials across trainers and across audiences throughout the state.

Objective 3.10: Provide funding for prevention and family support services at the local/county level

Strategy Update:

During State Fiscal Year 2005, OCTF made $3,804,400 available to counties for prevention and family support services at the local level. Eighty-six of Ohio’s eighty-eight counties took advantage of this opportunity. Since determination of services is a needs-driven process, one size doesn’t fit all; there are more than twenty different services which receive OCTF monies at the local level:

- Parenting classes;
- Parent support groups;
- Parent life skills training;
- Home visitation;
- Information & Referral;
- Case management;
- Crisis stabilization;
- Respite care;
- Parent-child family life education;
- Family strengthening activities;
- Mentors (for parents & children);
- Child development screening;
- Child safety training;
- Youth life skills training;
- Awareness materials;
• Awareness activities;
• Parenting supplies; and,
• Training (for professionals & volunteers)
Goal 4: The Ohio Department of Job and Family Services will work with state and local child serving agencies to provide and support services and programs that ensure the safety, permanency, and well-being of children and families.

Objective 4.1 Establish a state level team that works towards and coordinates a permanency continuum of services that meet the permanency needs of Ohio’s children.

Over the past six years, the ODJFS has revised and implemented many strategies to promote adoption and supportive services. In an effort to increase permanency for Ohio’s children, a state level team – consisting of PCSA staff, stakeholders and public/private agencies - will be created to primarily focus on the permanency continuum of services, including the organization of the Ohio Administrative Code, training, and resources.

Strategies on coordinating a permanency continuum of services include:

- Development of an infrastructure comprised of licensing, adoption, kinship and foster care state level personnel to develop a common agenda to achieve safety, permanency, and stability for Ohio’s children.

**Strategy Update:**

This infrastructure has been created through the joint coordination of the Child and Family Services Review, Program Improvement Plan (PIP). Management representatives from ODJFS meet on a biweekly basis to discuss the implementation goals of the PIP: to achieve safety, well being and permanency for Ohio’s children. Strategies to provide process consultation with identified PCSAs have been coordinated to assure consistency in overall ODJFS guidance.

Additionally, the same team plans the agendas for the statewide Quarterly Child Welfare Managers meetings, which are attended by PCSAs, PCPAs and PNA personnel. Agenda items focused on the gamut of services that are either required for compliance with OAC rules, federal law or are viewed as promising practices to achieve safety, well being and permanency for children.

During SFY2006, this team will continue to meet and hold in-depth discussions regarding achieving permanency for children.
• Partnering with public and private agencies to ensure that training needs are met for kinship, foster care and adoptive parents.

**Strategy Update:**

Per OAC rules, PCSAs, PCPAs and PNAs are to provide pre-service training to all foster caregivers and adoptive applicants. During the months March through May, 2005, ODJFS has reviewed pre-service training material being used for persons seeking to become foster caregivers/adoptive parents. All agency pre-service training materials pertaining to “cultural”, race, color, or national origin issues were reviewed by ODJFS to determine their compliance with Title VI, MEPA and the ODJFS rules governing adoption and foster care placements in Ohio. The ODJFS Pre-Service Training Review Tool (See Appendix, Attachment V) is being used for this review. Materials that have been found to be out of compliance were returned to the agency for corrective action. One hundred seventy PCSAs, PCPAs and PNAs were reviewed and letters regarding compliance issues were mailed to agencies on April 5, 2005. The findings of the review included 3 compliant, 7 incomplete (training materials submitted were incomplete/outline), 32 non compliant, and 128 OCWTP (54 PCPAs/PNAs and 74 PCSAs use OCWTP training curriculum.)

The annual 2004 Adoption and Foster Care conference provided an opportunity for foster caregivers, adoptive parents and kinship providers to network and attend a wide array of workshops and plenary sessions focused on child welfare issues. Foster parents were able to apply certain hours earned towards annual required foster care training hours. The ODJFS Quality Assurance vendor analyzed the evaluations from the conference to ensure that the attendees’ needs are being addressed. To achieve maximum accessibility, there is no charge for this conference and child care is provided. The conference brochure is attached. (See Appendix, Attachment W).

During SFY 06, ODJFS will revise the OAC rule to require agencies submit their Pre-service Training Curriculum for review when there are any changes to the Pre-service Curriculum or when a new agency develops their Pre-service Curriculum.

• Development of mechanisms - supported by statistical data- to ensure that limited resources are directed to the geographical areas with the greatest need and to assist public/private agencies in supporting kinship, foster care and adoptive parents. The ODJFS will involve its Quality Assurance vendor to determine gaps of services in specific geographical regions of Ohio.

**Strategy Update:**

One of Ohio’s greatest areas of need is the recruitment and retention of African-
American families for adoption. It has been noted in previous reports that while 51 percent of the children waiting adoption are African-American, only 27 percent of families waiting to adopt are African-American.

ODJFS has approved an allocation of $538,000 to targeted PCSAs which have been identified as having the largest variance between the percentages of African-American children waiting and African-American families waiting to adopt. The six PCSAs are listed in the chart below. These PCSAs are being asked to increase the number of approved African-American families in order to achieve parity with the percent of their waiting African-American children. The level of each PCSA’s allocation was influenced by the total families required to achieve parity and the total available dollars.

<table>
<thead>
<tr>
<th>PCSA</th>
<th>Total Waiting Children</th>
<th>AA Waiting Children</th>
<th>Percent AA Children Waiting</th>
<th>Total Waiting Families</th>
<th>AA Families Waiting</th>
<th>Percent of AA Families</th>
<th>Numerical Parity</th>
<th>Number of AA Families Required To Reach Parity</th>
<th>Dollar Award</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cuyahoga</td>
<td>1057</td>
<td>818</td>
<td>77%</td>
<td>288</td>
<td>150</td>
<td>52%</td>
<td>223</td>
<td>73</td>
<td>$146,000</td>
</tr>
<tr>
<td>Franklin</td>
<td>225</td>
<td>123</td>
<td>55%</td>
<td>322</td>
<td>119</td>
<td>37%</td>
<td>176</td>
<td>57</td>
<td>$114,000</td>
</tr>
<tr>
<td>Summit</td>
<td>204</td>
<td>107</td>
<td>52%</td>
<td>194</td>
<td>51</td>
<td>26%</td>
<td>102</td>
<td>51</td>
<td>$102,000</td>
</tr>
<tr>
<td>Hamilton</td>
<td>218</td>
<td>160</td>
<td>73%</td>
<td>112</td>
<td>45</td>
<td>40%</td>
<td>82</td>
<td>37</td>
<td>$74,000</td>
</tr>
<tr>
<td>Montgomery</td>
<td>146</td>
<td>91</td>
<td>62%</td>
<td>105</td>
<td>38</td>
<td>36%</td>
<td>65</td>
<td>27</td>
<td>$54,000</td>
</tr>
<tr>
<td>Stark</td>
<td>239</td>
<td>97</td>
<td>41%</td>
<td>111</td>
<td>21</td>
<td>19%</td>
<td>45</td>
<td>24</td>
<td>$48,000</td>
</tr>
</tbody>
</table>

The next to last column indicates the number of additional families the agency should attain to meet the parity requirement. However, because some families will drop out and others will become unavailable as they finalize adoptions, the number of families needing to be recruited is likely to be larger than the numbers shown above.

The allocation will be available for the period July 2005 through June 2006.

During SFY2006, ODJFS will contract with the Quality Assurance vendor and continue to analyze gaps in services.

**Objective 4.2 Develop, implement and monitor compliance of the Multi-ethnic Placement Act (MEPA).**

In April 1999, the HHS Administration for Children and Families (ACF) provided the HHS Office of Civil Rights (OCR) information regarding allegations contained in a Cincinnati, Ohio, newspaper report and in a complaint filed in John Doe v. Hamilton County Department of Human Services (DHS). This complaint alleged that Hamilton County DHS was individually and systematically violating Title VI, MEPA and/or Section 1808. Consequently, OCR
commenced an investigation.

In October 2003, as a result of that investigation, OCR issued a letter of findings concluding the Hamilton County DHS committed numerous violations of Title VI and MEPA in individual cases. The letter also concluded that the ODJFS committed systemic violations in two OAC rules that were subsequently amended in 1999 and found to be in compliance. In November 2003, the ACF issued a letter incorporating the findings of the OCR and citing the ODJFS for failure to supervise and ensure that all of its agencies adhere to the anti-discrimination provisions of the Ohio Title IV-E State Plan and MEPA. The letter assessed a penalty against the ODJFS for 2% of the quarterly IV-E budget, approximately $1.8 million.

Since the receipt of these letters, ODJFS has been negotiating with OCR and ACF regarding a corrective action plan. ODJFS submitted its most recent Corrective Action and Resolution Plan (CARP) on March 18, 2004. If executed as it is currently written, the CARP would require ODJFS to amend and develop rules around placement, home study assessment and data tracking. The CARP extends over a period of five years and calls for monitoring and oversight of PCSAs, PCPAs, and PNAs.

In addition to executing the statewide CARP, ODJFS has engaged in a PIP which in part, aims at increasing the number of African-American families in Ohio’s pool of available foster and or adoptive resources. According to the requirements of MEPA, all states in receipt of federal funding albeit direct or indirectly, must have in place a process for ensuring the diligent recruitment of families that reflect the racial and ethnic background of children in need of foster and or adoptive homes. In Ohio, minority families constitute approximately 27 percent of the pool of available foster and adoptive resources, while minority children make up nearly 55 percent of the population of children in care awaiting a foster or adoptive placement. According to the CFSR, ODJFS must improve recruitment efforts until its pool of families reflects the ethnic and racial diversity of the children in the state awaiting placement.

According to a forum compiled in response to the CFSR, statewide data indicates that the majority of children waiting are of: African-American descent; older; and/or part of a large sibling group. In comparison, prospective foster and adoptive parents are:

- Classified as foster-to-adopt parents;
- Potential adoptive parents contained in the databases were missing race data;
- Parents of the Caucasian descent with a preference to parent a Caucasian child with no perceived special needs, such as white infant or an international child; and,
- Race data was missing for 3,352 persons included in the overall pool.

Other factors interfering with conformity include jurisdictional issues and lack of knowledge and resources. PCSAs, especially those where the majority of children in care are classified as Caucasian, at times overlook diligent recruitment responsibilities and their role in developing diverse families for children within and outside county borders. Some PCSAs reported that they are not aware of how to recruit needed families.
Strategies for ensuring compliance with Federal Diligent Recruitment Standards and the MEPA Corrective Action Plan include:

- Increasing the number of African-American parents who apply and ultimately adopt until the overall pool of family resources reflects the ethnic and racial diversity of children for whom foster and adoptive homes are needed.

- Implementing procedures to better assure child and family formation in FACSIS is accurate and up-to-date.

**Strategy Update:**

The African American families recruitment allocation discussed in Objective 4.1 is the result of considerable work focused on increasing the accuracy of data pertaining to race elements in FACSIS. It became evident that the first step in the process of achieving the goal of increasing the number of approved African American families to be equal to the percentage of African American children who are waiting for adoption was to review the FACSIS data and assure its accuracy. The main consideration was the agencies’ correct entry of the race and ethnicity events in FACSIS. PCSAs that have missing demographic data were e-mailed quarterly reports listing the names of open adoption resources that were missing a race or ethnicity value. A summary of the results from the quarterly reports are as follows:

**Summary of Quarterly Reports**

In September 2004, Missing Demographic Data Reports went out to 29 PCSAs. Each report included a list of resource family record ID numbers for which the race and/or ethnicity of the primary caregiver was missing from FACSIS. Additionally, resource family records with missing family structure data were included in the reports. The initial reports included all resource families with adoption home study expiration dates on or after August 1, 2004. The table below shows the PCSAs with missing race, ethnicity and/or family structure data. In total, 279 (4%) of the 6,684 resource family records in September’s reports had missing race data, 342 (5%) did not have the ethnicity of the primary caregiver and family structure was omitted from 250 records (4%). As of the beginning of January, 31 percent of the missing race data had been entered into FACSIS. One-quarter of the data on ethnicity had been completed and 14 percent of the records had updated family structure data.
Resource Families with Missing Demographic Information by PCSA
Total Resource Families=6,684
(September 2004)

<table>
<thead>
<tr>
<th>PCSA</th>
<th>Missing Race</th>
<th>Missing Ethnicity</th>
<th>Missing Family Structure</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASHLAND</td>
<td>3</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>ASHTABULA</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>BROWN</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>CARROLL</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>COSHOCTON</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>CRAWFORD</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>CUYAHOGA</td>
<td>57</td>
<td>68</td>
<td>65</td>
</tr>
<tr>
<td>FAIRFIELD</td>
<td>0</td>
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</tr>
<tr>
<td>MONTGOMERY</td>
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</tr>
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<td>MORROW</td>
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</tr>
<tr>
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<td>UNION</td>
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</tr>
<tr>
<td>WARREN</td>
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<td>2</td>
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</tr>
<tr>
<td>WAYNE</td>
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</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>279</strong></td>
<td><strong>342</strong></td>
<td><strong>250</strong></td>
</tr>
<tr>
<td><strong>Percent Missing</strong></td>
<td><strong>4%</strong></td>
<td><strong>5%</strong></td>
<td><strong>4%</strong></td>
</tr>
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December 2004
The second quarterly demographic data reports were distributed to PCSAs in December 2004. Thirty-five PCSAs received reports. It is important to note that a revised methodology was used in December. This set of reports included only those resource families who were waiting to adopt as of September 30, 2004. Families who have been waiting to adopt for more than six years were excluded. So, while the table below shows that 35 PCSAs had resource family records with missing demographic data, there are a relatively small number of prospective adoptive families (79) for which the race of the primary caregiver is not recorded in FACSIS. These families represent four percent of all of the waiting families. In fact, just 15 PCSAs had any waiting families with missing race data. There were 261 waiting adoptive families (12%) for whom the ethnicity of the primary caregiver was not recorded in FACSIS and 226 families (11%) for whom family structure was not recorded.

<table>
<thead>
<tr>
<th>PCSA</th>
<th>Missing Race</th>
<th>Missing Ethnicity</th>
<th>Missing Family Structure</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADAMS</td>
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</tr>
<tr>
<td>ASHTABULA</td>
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</tr>
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<td>ATHENS</td>
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<td>5</td>
<td>5</td>
</tr>
<tr>
<td>BUTLER</td>
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</tr>
<tr>
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<tr>
<td>CLINTON</td>
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<td>1</td>
</tr>
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<td>FRANKLIN</td>
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</tr>
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<td>LAWRENCE</td>
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<tr>
<td>LICKING</td>
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<td>4</td>
<td>4</td>
</tr>
<tr>
<td>MAHONING</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>MARION</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>
### Prospective Adoptive Families with Missing Demographic Information by PCSA

**Total Resource Families = 2,150**

(December 2004)

<table>
<thead>
<tr>
<th>PCSA</th>
<th>Missing Race</th>
<th>Missing Ethnicity</th>
<th>Missing Family Structure</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEDINA</td>
<td>0</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>MONTGOMERY</td>
<td>3</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>MORROW</td>
<td>1</td>
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</tr>
<tr>
<td>PERRY</td>
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<td>1</td>
</tr>
<tr>
<td>PREBLE</td>
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<td>1</td>
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</tr>
<tr>
<td>STARK</td>
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</tr>
<tr>
<td>SUMMIT</td>
<td>1</td>
<td>68</td>
<td>13</td>
</tr>
<tr>
<td>TRUMBULL</td>
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</tr>
<tr>
<td>UNION</td>
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<td>2</td>
</tr>
<tr>
<td>VAN WERT</td>
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<td>1</td>
<td>1</td>
</tr>
<tr>
<td>VINTON</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>WARREN</td>
<td>0</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>WAYNE</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>WYANDOT</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>79</strong></td>
<td><strong>261</strong></td>
<td><strong>226</strong></td>
</tr>
<tr>
<td><strong>Percent Missing</strong></td>
<td><strong>4%</strong></td>
<td><strong>12%</strong></td>
<td><strong>11%</strong></td>
</tr>
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</table>

Approximately three weeks after PCSAs received the December Missing Demographic Data reports, 11 percent of the resource family records had been updated with race information. Twenty-four percent of the records with missing ethnicity data were updated and four percent records were updated for family structure.

The January 2005, FACSIS download of resource family data also indicated that just three counties (i.e., Cuyahoga, Hamilton and Summit) had new waiting adoptive families with missing demographic data.

<table>
<thead>
<tr>
<th>PCSA</th>
<th>Missing Race</th>
<th>Missing Ethnicity</th>
<th>Missing Family Structure</th>
</tr>
</thead>
<tbody>
<tr>
<td>CUYAHOGA</td>
<td>8</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>HAMILTON</td>
<td>0</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>SUMMIT</td>
<td>2</td>
<td>6</td>
<td>6</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>10</strong></td>
<td><strong>16</strong></td>
<td><strong>18</strong></td>
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</table>
While the quarterly reports of missing demographics will continue to be distributed to effected PCSAs through December 2005, ODJFS feels more confident in the data and moved on to the next goal of Providing Market Analysis information to PCSAs by having the Quality Assurance vendor develop the comprehensive report, “Waiting Children, Waiting Families” (See Appendix, Attachment x.).

During SFY2006, ODJFS will produce the “Waiting Children, Waiting Families” report.

- Providing market analysis information to PCSAs to assist them in driving effective recruitment campaigns.

Strategy Update:

The report “Waiting Families, Waiting Children,” which provides profile information on waiting families was e-mailed to PCSA directors on February 24, 2005. This report is posted on the ODJFS OCF Internet Web page at: http://jfs.ohio.gov/ocf/publications.stm.

This report is designed to assist ODJFS in identifying where it needs to focus its recruitment and retention efforts for prospective adoptive parents to ensure that all of its children achieve permanency. In pursuing that purpose, the report explores the following questions:

- Who are the families who are currently waiting to adopt?
- Are these prospective families different from those who have adopted?
- What types of children are the waiting families willing to adopt?
- Are the preferences of the waiting families different than the preferences of those families who have already adopted?
- How do the preferences of waiting families compare with the children available for adoption?

Part 1 explores the first two questions above. It examines trends in the number of both waiting and adopting families and in the characteristics of those families. In addition to their demographic characteristics, the amount of time families have been waiting to adopt is also explored. Timeliness is important in the retention of prospective adoptive families, because delays can lead them to become discouraged or disillusioned with the adoption process.

Part 2 compares the children available for adoption with the types of children prospective families want to adopt. The specific focus is on those children who are traditionally difficult to place: older children; African American children; and, children with special health needs. The comparison is intended to identify areas where the preferences among waiting families will make it especially challenging to achieve permanency for certain children.
A summary of the findings and the implications for recruitment of prospective adoptive families are included in Part 3.

Some of the highlights from the “Waiting Children, Waiting Families” report regarding the increase in African-American families is as follows:

- At the end of FFY2004, there were 2,150 waiting families approved by PCSAs, an increase of 29 percent from the end of FFY2003 and a 161 percent since the end of FFY2001.

<table>
<thead>
<tr>
<th></th>
<th>FFY2001</th>
<th>FFY2002</th>
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<tr>
<td>Adopting Families</td>
<td>1994</td>
<td>2118</td>
<td>2124</td>
<td>1942</td>
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For the purposes of this report, “adopting families” includes families who have adopted and families with children in their home in an adoptive placement.

On its face, an increase in waiting families would seem like a positive trend, but it is only positive if it translates into increases in the number of families actually adopting children. The number of families actually adopting children has remained fairly steady over the past four years. Given that increases in the number of waiting families have not translated into increases in the number of families adopting, it would appear that increasingly smaller percentages of the recruited families are actually adopting children, producing a growing backlog in the pool of waiting families. In fact, approximately one-half of all the families waiting at the end of each of the above fiscal years had been waiting longer than one year, meaning both that the number of families recruited each year is increasing (from 396 in 2001, to 565 in 2002, to 807 in 2003 and to 926 in 2004), and that the backlog of waiting parents is growing at roughly the same rate.

**Demographic Characteristics of Waiting and Adopting Families**

Exploring the demographics of prospective and actual adoptive families can serve two functions. On the one hand, it can help agencies target their recruitment efforts on the kinds of families who actually adopt. On the other hand, it can serve as a means of identifying which types of families have not been recruited into the pool of adoptive parents and who, therefore, might represent a completely unrecognized resourcebase.

**Age**

Nearly three quarters of all prospective parents in FFY 2004 including both those waiting for a child and those who adopted a child during the year, were between the
ages of 30 and 49. The accompanying figure compares the ages of those who
adopted with those who are still waiting to adopt a child. While the two groups are fairly
similar in age, the waiting parents are slightly younger than those who actually adopted.

Race
African-American families comprised 27 percent of the waiting families in FFY 2004,
the largest percentage over the past four years. As the following graph shows, the
proportion of waiting families who are African-American is increasing each year. This
is also reflected in the percentages of newly recruited families who are African-
American. In 2001, only 22 percent of the families recruited into the pool of prospective
parents were African-American by 2004 that figure had climbed to 29 percent.

![Race of Waiting Families, FFY 2001-2004](image)

Family Structure
Adopting and waiting families are similar in terms of family structure. Both are most
likely to be a married couple (71% adopting and 69% waiting). Single females
comprise the second largest group in each instance (24% adopting and 26% waiting),
while unmarried couples and single males combined account for only four percent of
the total of waiting and adopting families.

Other Characteristics
Information on the level of educational attainment is missing for 55 percent of the
relevant families. Among those for whom there are data in FACSIS, similar patterns
exist among waiting and adopting families.

Waiting families are slightly more educated than those who adopted in FFY 2004. In
2004, protestant families were the most prevalent among all families in both groups.
More than half of the adopting families are protestant (57%) compared with 49 percent
of the waiting families. The next largest group consists of those classified under “other
religion.” However, data on religion were available for just 41 percent of the families.
This report will be produced again in June 2005 to review and analyze further trends in this area.

- Implementing a Comprehensive Recruitment Plan.

**Strategy Update:**

This area will be discussed on two levels:
- The Statewide Recruitment Plan that is a MEPA and CARP requirement; and,
- ODJFS’ efforts to assist the PCSAs in the development of a comprehensive recruitment plan.

The ODJFS Statewide Recruitment Plan was approved by HHS as a part of the CARP in August 2004. The Recruitment plan is listed below. Implementation strategies will be discussed in other overlapping areas of this Objective 4.2 section.

**ODJFS Foster and Adoption Recruitment Plan**

On any given day over 22,000 children in Ohio are living with foster families or in another placement setting. Nearly 3,200 of these children are waiting for adoptive families. Children who wait the longest for adoptive families include African American children, those over age of ten and children who are part of a sibling group. Maintaining the needed number of families to assure the appropriate placement for each child is an enormous task to accomplish, in which no entity can do alone. The ODJFS oversees or motivates a variety of activities to assist PCSAs to achieve a greater number of adoptions. The following plan is being submitted to Health and Human Services (HHS) as ODJFS’ Recruitment Plan for the MEPA Corrective Action and Resolution Plan.

**Goal 1:** As a result of effective recruitment throughout the state, all Ohio families will be aware of the number and characteristics of children available for adoption and of the system’s need for adoptive and foster families who are accepting of children with special needs.

**Objective 1:** Ohio Department of Job and Family Services (ODJFS) will promulgate rules requiring adoption agencies to maintain internal policies which require each agency to have a comprehensive recruitment program in effect and requiring the minimum level of response to families who inquire about adoption.

- Maintain and amend, as necessary, Ohio Administrative Code (OAC) rules 5101:2-48-05 and 5101:2-48-08 which list the requirements for the submission of the recruitment plan, and the procedures for the minimum level of response to inquirers.
ODJFS will conduct a review of the recruitment plan to identify any area of the plans that authorize practices inconsistent with the requirements of the federal or state law. If noncompliance is identified, the agency will be notified within 60 days and a corrective action plan will be required. ODJFS will provide technical assistance and training if appropriate to assist the agency to develop an acceptable plan.

Maintain and amend as necessary OAC rule 5101:2-48-13 which requires the submission of the “MEPA Compliance Self-Assessment Report”.

The following information required by the MEPA Self-Assessment Compliance report will be reviewed during, or prior to, the MEPA site visit:

- How the agency implemented the recruitment plan in the previous SFY and indicate diligent efforts including community partnerships engaged to recruit foster and adoptive parents that reflect the diverse population of children in foster care in the state;
- How the agency keeps track of inquiries and their disposition; specify whether the log (or alternative method) indicate that follow-up occurred with each caller and are equally timely for all callers; indicate whether the log shows an under representation of applicants from any specific racially identifiable area; and if so, does the agency have a strategy for dealing with this issue? Agencies are then asked to provide a copy of the medium through which information is tracked;
- List the number of individuals who inquired, applied and/or who are prospective adoptive parents enrolled or who have completed pre-service orientation during the calendar year by their race and ethnicity;
- Describe how all inquirers are given information on the characteristics of waiting children in foster care within the county and state;
- If applicants for foster care or adoptive parenting are screened prior to orientation or training, describe what screening criteria are used and for what purpose;
- Indicate the procedures used to locate/select potential, appropriate families for a particular child; what factors are taken into consideration when making the final selection among the appropriate families; and how does the agency ensure that the selection process is in compliance with MEPA; and finally describe how diligent recruitment requirements are integrated into training curricula for foster and adoptive staff in all areas of the agencies; and,
- If there are needs identified as a result of the discussion of the MEPA Self-Assessment Report during the oversight visit, additional technical assistance will be provided by ODJFS.

Objective 2: ODJFS will assure that statewide statistics regarding children who are waiting for adoptive families, information regarding the adoption process and pictures and narratives of children waiting for adoption are readily accessible to the general public.
• ODJFS will maintain the Ohio Adoption Photo Listing Website which includes pictures and narratives of children waiting for adoption, the Ohio Adoption Guide which includes information on the adoption process, statistics regarding adoptions and a list of public and private agencies, support networks, and adoption related websites. The Website also allows interested families to send an interest form to the ODJFS on a specific child or to sign the guest book and ask general questions about adoption. Finally, the Website includes a calendar of events on which PCSAs, PCPAs and PNAs post their local events.

• ODJFS will provide a response to persons who inquire about adoption or about specific children within 5 working days.

• ODJFS will review the PCSAs’ responses to Adoption Photo Listing inquiries during the MEPA on site review and will provide technical assistance if there is concern regarding any PCSA’s responses to inquiries.

• ODJFS will review the Ohio Adoption Guide every six months to determine if there are any needed revisions. ODJFS will revise the Ohio Adoption Guide if needed.

• ODJFS will maintain paper copies of the Ohio Adoption Guide and make this book available for agencies to order large quantities. ODJFS maintains in the OAC rule 5101:2-48-08 that the Ohio Adoption Guide must be made available to every inquirer.

• ODJFS will maintain the Ohio Adoption Subsidy Guide on the Ohio Adoption Photo Listing Website and will maintain a paper copy of this book available for the agencies to order. ODJFS will update this publication as OAC rules are amended.

• ODJFS will produce in partnership with PCSAs a minimum of 12 Features Books annually. These books are magazine style book which feature between 30 and 40 children who have been waiting the longest for an adoptive home. ODJFS will distribute 3000 of each of the Features books to PCSAs statewide.

Objective 3: Strengthen public and private agencies’ staff’s skills to analyze adoption and marketing trends data to enable development of effective local and/or regional recruitment programs.

• Provide semi-annual data reports to PCSAs which identify the profiles of families who have adopted and the adoption trends on a county and statewide basis.

• Identify best practices in Recruitment as evidenced by a reflection in data of children being placed timely and of the most difficult children being placed for adoption and develop a training curriculum to provide to agencies and post to ODJFS’ Inner web. ODJFS will update the training as needed so that the training remains current.

• Provide training to public and private agencies on best practices in recruitment and on using data to develop effective local and/or regional recruitment programs on an annual basis beginning in January 2005.
• Conduct a recruitment of minority families track at the Adoption and Foster Care Conference in November 2004 and as appropriate in subsequent years.
• Identify the two counties that have the largest population of waiting children and provide process consultation to assist in augmenting the agency’s recruitment plan with potential state financial resources through the Adoption Incentive funds.

Objective 4: ODJFS will continue to strengthen the faith based initiative in Ohio and make it an integral part of the foster care and adoption system.

• Contingent upon availability of Adoption Incentive funds, ODJFS will continue to make financial grants available for PCSAs that develop an acceptable plan for their local faith based initiative.
• ODJFS will coordinate semi-annual meetings with the PCSAs’ liaisons and their local church communities to share best practices and lessons learned and to coordinate faith-based efforts.
• ODJFS will sponsor a larger event with the churches and participating PCSAs at the Adoption and Foster Care Conference in November 2004 to further provide training and networking for the faith based initiative. ODJFS will plan this event in coordination with the participating PCSAs and their local churches. ODJFS will continue to sponsor this annual event contingent upon available funds.
• ODJFS will attend sessions on Faith Based initiative sponsored by AdoptUSKids and assure information is disseminated to the faith based partners in Ohio.

Objective 5: ODJFS will support the AdoptUSKids National Campaign

• ODJFS will participate in the AdoptUSKids national summits and Region V meetings.
• ODJFS will work in conjunction with Ohio’s Rapid Response Team (Ohio Family Care Association) to assist in appropriate referrals to Ohio’s public and private agencies.
• ODJFS will provide administration for the AdoptUSKids website for Ohio PCSAs.
• ODJFS will facilitate training needed by PCSAs on the registration of families of children on the AdoptUSKids website.

Objective 6: ODJFS will provide exhibits at public events to promote the public’s interest in Adoption and Foster Care.

• ODFS will provide an exhibit at the Ohio State Fair for the duration of the fair.
• ODJFS will provide exhibits at Child Welfare related conferences or other appropriate meetings.

Goal 2: Ohio has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed.

Objective 1: Increase the number of African-American families applying and being approved for adoption by five (5) percent once the FACSIS data has been determined to be accurate.

• ODJFS will provide data listing the families registered as active with FACSIS and provide process consultation to assure the families listed are a true representation of the actual families who are available and waiting.
• Compile a statewide list of all open families in FACSIS relative to each county agency on a semi-annual basis.
• Share respective lists with each county agency for verification.
• Request agency to close out inactive and outdated familial information on file with FACSIS within 90 days from date of the verification request.
• ODJFS will provide reports to PCSAs and PNAs and PCPAs regarding adoption resources with missing race data and will monitor the input of this data on FACSIS/SIS.
• ODJFS will establish statistical benchmarks per county and statewide relative to recruiting minority families.
• ODJFS will provide technical assistance with agencies during the MEPA site visits regarding their progress in targeting African-American families for recruitment purposes.

Objective 2: Ohio PCSAs will be able to access home studies from other public and private Ohio agencies when necessary. ODJFS will promulgate rules indicating that agencies shall not solicit home studies for the purpose of locating a family of the same race.

• To prevent discrimination through manipulation of the home study process, ODJFS will amend OAC rule 5101:2-48-19 and indicate that agencies are prohibited from seeking a home study from another agency for the purpose of locating a same race placement.
• ODJFS will develop and provide training to all PCSAs on the how to access home study information through use of the state’s data systems such as FACSIS, DART, SIS and (eventually) SACWIS. Recruiters and adoption placement staff of the eight metro county agencies will be required to attend the training on accessing home study information.
• ODJFS will develop and distribute a list of all approved home studies and a
brief description of the characteristics of the child for whom they are approved
to adopt as well as agency or caseworker name to all PCSAs every quarter.

Regarding the second focus, ODJFS efforts to assist the counties development of a
comprehensive recruitment plan consisted of the revision of OAC rule 5101:2-48-05
"Agency Adoption Policy and Recruitment Plan." which incorporated new requirements
for the development of a more comprehensive agency recruitment plan. Effective
February 1, 2005, agencies were required to include in the annual recruitment plan
additional characteristics about the children available for adoption who are in the
permanent custody of the agency and additional characteristics about the children
available for adoption in the State. The agency must then compare those child
characteristics with the racial and ethnic diversity of the adoptive applicants approved
by the agency who are waiting to adopt. The agency must also identify any racial or
ethnic category of families who are under represented. In addition, agencies must
identify diverse methods of disseminating general, targeted and child specific
information to the community and indicate how strategies will be implemented to reach
all parts of the community. The excerpts from rule affecting these areas are listed
below:

“…. (D) Recruitment of prospective adoptive families shall be an ongoing
activity of a PCSA, PCPA, or PNA. Agencies shall not deny any person the
opportunity to become an adoptive parent, on the basis of race, color, or
national origin of the person or of the child (ren) involved. The agency shall
develop and implement a comprehensive recruitment plan that identifies the
agency's diligent recruitment efforts of families and which reflects the diversity of
waiting children for whom foster and adoptive homes are needed. The PNA
comprehensive recruitment plan shall include the applicable items listed in
paragraphs (D) (1) through (D) (12) of this rule. The comprehensive recruitment
plan for the PCSA and PCPA shall include, but is not limited to all of the
following:

(1) A description of the characteristics of children in the custody of the agency
available for adoption, including age, gender, race, and ethnicity of the children,
and their developmental, emotional, and physical needs; the number and race of
the children awaiting adoptive placement for one to twelve months, as well as
more than twelve months, from the date the court order granting permanent
custody became final and non-appealable; and the average time over the
previous five years from the date on which the court order granting permanent
custody of each child, broken down by race, became final and non-appealable
and was placed for adoption.

(2) A description of children in the state available for adoption listed on the
website at http://jfs.ohio.gov/ocf/. This description will include the children's age,
gender, race, and ethnicity of the children; their developmental, emotional, and
physical needs; the number and race of the children awaiting adoptive
placement for one to twelve months, as well as more than twelve months, from the date the court order granting permanent custody became final and non-appealable; and the average time over the previous five years from the date on which the court order granting permanent custody of each child, broken down by race, became final and non-appealable and was placed for adoption.

(3) A comparison of the characteristics specified in (D)(1) and (D)(2) of this rule, with the racial and ethnic diversity of the adoptive applicants approved by the agency who are waiting to adopt and an identification of any racial or ethnic category of families that are under represented.

(4) Specific strategies to reach all parts of the community

(5) Diverse methods of disseminating both general, targeted, and child specific information, and implementation of procedures specified in (A) (4) of this rule;

and

(G) Each PCSA, PCPA, and PNA shall submit a copy of its recruitment plan for state fiscal year 2006, signed by the agency director, to ODJFS by May 1, 2005. Subsequent annual recruitment plans will be due on May first of each year, and shall address the upcoming state fiscal year. If the PCSA, PCPA, or PNA amends its recruitment plan at any other time than the required due date, the agency shall be responsible for submitting the amended recruitment plan to ODJFS within ten days following a plan change.”

All agencies have to submit their Adoptive and Foster Caregiver Recruitment Plans to ODJFS by May 1, 2005. ODJFS staff is reviewing the plans for compliance. Plans are to be returned to the agency for corrections if needed within 60 days of submission.

During SFY20006, ODJFS will not continue to implementing procedures to better assure child and family information in FACSIS is accurate. This will not be a focus for ODJFS as there will be an increased focus on data conversion efforts with the development of SACWIS.

ODJFS will continue to focus on activities that address the lack of varying percentages of African-American children waiting to be adopted and approved African-American families.

- Utilizing available funds to assist PCSAs in their recruitment and retention efforts.

**Strategy Update:**

Ohio was awarded $1.5 million in Adoption Incentive funds for adoption finalizations during FFY2003. Over two-thirds of the available money was used to fund the SFY2005 AdoptOHIO Kids program. The AdoptOHIO Kids is a statewide program in which all 88 PCSAs received allocations to work towards a total quality management program that enhances the recruitment and retention of adoptive resources. AdoptOHIO Kids goals included increasing the overall number of children adopted
each year with a special emphasis on:
• Finalizations being within 24 months from their initial custody; and,
• Finalization of children who are both ages ten or older and who have been in the custody of the agency for 24 months or longer.

AdoptOHIO Kids funds awarded to PCSA are listed in Appendix, Attachment P.

ODJFS plans to allocate approximately $3.5 million to PCSAs for the SFY2006 AdoptOHIO Kids program.

ODJFS implemented a Faith Based Initiative that awarded $300,000 to agencies to assist in their local efforts. Thirty-one agencies responded to ODJFS’ December 9, 2003, invitation for agencies to apply for funds to develop or strengthen new initiatives with faith-based entities for the purpose of recruitment and retention of adoptive foster and resource families. On March 28, 2004, 31 agencies received notice of their allocation amounts. Agencies had to spend funds by August 30, 2004.

Additionally, ODJFS will allocate $538,000 for recruitment and retention of African-American families during SFY2006.

Franklin County received $900,000 in ODJFS AdoptOHIO Kids Incentive funds. They used the money to provide incentive payments to foster parents to adopt their older children in their home. The agency reports the following regarding the children who could potentially benefit from this program:
• One hundred (100) children (age 12 and over) in the agency refused to be adopted;
• Agency contacted foster parents (who turned down the incentive money that the agency offered last year) to see what their needs are (i.e., children behind in school; concerns with medical costs; college costs; and, costs of summer activities);
• One hundred seventy-nine (179) children aged ten and over were considered under the incentive program. Over 100 children currently have agreements due to the incentive funds;
• Incentive funds (along with adoption subsidies) have been really helpful in getting these older children adopted. These families are receiving an amount that is much closer to the foster care payment that they received prior to adoption; and,
• Only one of the families who received incentive funds has returned to the agency requesting additional funds or services. This family was provided with family preservation services to alleviate dissolution of the adoption.

Based on this data and availability of funds, Franklin County will continue to provide incentives to foster parents to adopt older children. Franklin County is also aware that of their adoptions, 50% are foster to adopt and/or relatives and 50% are by individuals not previously known to the child. Franklin County will additionally continue to make a concerted effort to increase the number of foster care adoptions.
Cuyahoga County PCSA received $1.6 million and has used this money to contract with private agencies for foster to adopt placements and to assist in funding the Adopt Cuyahoga Kids Program. Specifics regarding this program designed to promote the finding of families for older children is attached (See Appendix, Attachment Y).

During SFY2006, ODJFS will release funds for AdoptOHIO Kids, faith-based initiatives and recruitment of African-American families as funds are available.

- Promoting best practices relative to recruiting and retaining African-American families.

**Strategy Update:**

ODJFS holds quarterly meetings with the statewide recruitment committee composed of PCSAs, PCPAs and PNAS staff, and clergy in the faith-based initiative program. On November 18, 2004, ODJFS sponsored the annual Faith-Based Brunch held at the 2004 Adoption and Foster Care conference. Eight-five (85) clergy and their PCSA partners were challenged first by the personal testimony of Rev. W.C. Martin, the nationally known pastor of Bennett Chapel Missionary Baptist Church in Possum Trot Texas, whose small congregation of 200 people has adopted over 70 children with special needs. Next, Father Clements delivered the keynote speech and provided more specific information on developing and maintaining effective partnerships between the clergy and state and county child welfare organizations.

At the next quarterly meeting, on February 22, 2005, the committee reviewed the strengths and limitations of the Faith-Based luncheon.

Also as a part of promoting best practice relative to recruiting and retaining African-American families, the following workshops were offered at the 2004 Adoption and Foster Care Conference.

- **Share Responsibilities: Permanency is Everyone’s Job by Denise Goodman PhD:** This workshop explored how everyone within the adoption and foster care system can work together to help guide and support the children more effectively. By overcoming constraints through the collaboration by seeing the role of every child welfare worker as part of an integrated system the journey can be made easier.
- **Begin to Improve Faith Based Programs by Madonna Gray and Reverend W.C. Martin:** This was a panel discussion with advice to begin or enhance faith based initiatives within children services agencies and community at large.
- **A Framework for Understanding the African American Family by Karen Patterson Stewart PhD of Fresh Start Academy:** Discussed the strengths, adaptability and other characteristics of the modern African American family. Learn
useful strategies for intercultural communication and interaction.

Evaluations of these workshops were all positive.

During SFY2006, ODJFS will sponsor the faith-based brunch at the annual Adoption and Foster Care conferences and continue the quarterly statewide recruitment meetings.

- Offering training and technical assistance to PCSAs, their network and mental health providers serving adoptive families.

**Strategy Update:**

Under the financial sponsorship of ODJFS, Cuyahoga County Department of Children and Family Services (CDCFS) held two all day regional mental health institutes for approximately 100 mental health professionals who work with adoptive families. The institutes helped to increase the mental health therapists’ knowledge on adoption related issues. Institutes were held on July 9, 2004 and August 25, 2004. Zoe Been-Wood, co-director of the Center for Public Sector Leadership and Service and Instructor at the Mandel School of Applied Sciences, Case Western Reserve University conducted the Mental Health Institutes. A third central Ohio regional Mental Health Institute was held on November 18, 2004 at the annual Adoption and Foster Care conference. Zoe Breen Wood also conducted this institute.

During SFY2006, ODJFS will sponsor a Mental Health Institute at the annual 2005 Annual Adoption and Foster Care conference.

- Reviewing all rules to ensure compliance with MEPA.

**Strategy Update:**

**Compliance with MEPA**

On July 21, 2004, Ohio entered into a five year Corrective Action and Resolution Plan (CARP) with the Department of Health and Human Services (HHS) Office of Civil Rights (OCR) and Administration for Children and Families (ACF). The Corrective Action plan required revisions to the OAC as well as a plan for monitoring and training the 88 PCSAs, and the PCPAs and PNAs foster care and adoption agencies that contract with PCSAs. The CARP requires data on all private agency adoptions, adoptive inquiries and home studies be collected and reported on annually and requires ODJFS to hire an external MEPA Monitor to oversee ODJFS implementation of the CARP. ODJFS has completed the following in relation to CARP implementation:

- **OAC Rules** - Family, Children and Adult Services Manual Transmittal Letter No. 162 was released on January 14, 2005, and included fifteen amended rules, two
new rules, two revised forms and two amended forms. The packet strengthened the language regarding MEPA and Title VI compliance. The rules became effective on February 1, 2005 (See Appendix, Attachment Z);

- **Highlights of Changes in Rules (effective 2-1-05)** -
  - Requirement for agencies to commence a foster care and adoption home studies within 30 days of the receipt of applications and to complete the home studies within 180 days (private agency non-special needs adoption home studies are to be completed within the time frame that the agency indicates in their adoption policy);
  - Must conduct the first matching conference within 90 days of the date the child is legally available for adoption and every ninety days thereafter. GALs and any other professional, who may have knowledge of the child’s needs, are required to be invited to all matching conferences;
  - Agencies are required to include in their policies, information about the complaint process for complaints of alleged discriminatory acts, policies or practices in the foster care or adoption process that involve race, color or national origin (RCNO). The rule additionally requires the agency to have written standards of conduct regarding non-discrimination in the foster care and adoption process;
  - Any individual filing a complaint with a PCSA, PCPA, PNA or ODJFS must use the JFS 02333 "Discrimination Complaint Form." This form can be accessed at: [http://www.odjfs.state.oh.us/forms/pdf/02333.pdf](http://www.odjfs.state.oh.us/forms/pdf/02333.pdf). Information regarding access to HHS forms is also included;
  - Licensed professionals completing the Individualized Child Assessment, to determine if RCNO should be one of the factors to consider in the matching decision, must now receive "MEPA Educational Materials" about federal legislation and the opportunity to receive technical assistance regarding those materials prior to conducting such assessments;

- **Training on Rules** - ODJFS developed a rules overview curriculum pertaining to MEPA, Title VI, OAC rules and forms involving the adoption and foster care process. The curriculum was approved by ACF and OCR prior to the initiating of the overview curriculum. In addition to detailed training for agency workers, an Executive briefing was conducted for PCSA directors. The MEPA overview, provided during December 2005 and January 2005 was provided via video conference to 277 staff from PCSAs, PCPAs and PNAs. Remedial training was provided to 346 staff in Hamilton County PCSA and private agencies contracting with Hamilton prior to the effective date of the rules.

Subsequent MEPA training and technical assistance MEPA took place at the Central Ohio Permanency Planning Group on March 15, 2005, Christian Children's Home of Ohio on March 16, 2005, South West Ohio Adoption Exchange on March 17, 2005, Eastern Ohio Regional Training Center on March 28, 2005, and public and private agency workers in Cuyahoga County on April 28, 2005. An additional update on MEPA including the status of the MEPA monitor and standards of conduct were and
will be presented at the ODJFS March and upcoming June 2005 statewide Quarterly Child Welfare Managers meetings.


During SFY2006, ODJFS will revise rules that relate to MEPA to clarify questions that have arisen.

- Providing ongoing oversight to PCSAs, PCPAs, and PNAs to assess and ensure MEPA compliance.

**Strategy Update:**

Per the CARP, ODJFS will conduct MEPA site visits to PCSAs, PCPAs and PNAs throughout the state of Ohio to assist agencies in maintaining compliance with the Multiethnic Placement Act, as amended, (MEPA), Title VI of the Civil Rights Act of 1964, as it pertains to the adoption and foster care process (Title VI).

The expected outcomes of the MEPA on-site process are:

- To ensure statewide compliance with MEPA as amended and Title VI as it pertains to the adoption and foster care processes at the agency level;
- To inform ODJFS administrators in identifying changes that may be needed in statewide program planning and policy development and for addressing system wide technical assistance needs; and,
- To inform ODJFS administrators of any deficits in the MEPA training curriculum.

The results of the MEPA on-site process include:

- Identifying the compliance level of each agency in regards to the adoptive and foster care placement processes with MEPA and Title VI.
- Identifying agency practices and operation contributing to non-compliance with MEPA and Title VI;
- Identification of technical assistance needed to support agencies in obtaining compliance with MEPA and Title VI; and,
- Planning for the provision of technical assistance and reporting on the status of such assistance.

The entrance conferences were for Hamilton PCSA, January 31, 2005; Franklin PCSA, February 23, 2005 and Cuyahoga PCSA, February 24, 2005. Day 1 of these site visits consisted of gathering information and reviewing the agency’s processes, procedures and agency personnel involved in family services and child placement. Day 2
consisted of reviewing child and family case records using the ODJFS MEPA Case Record Review Tool. The visits were concluded with a debriefing with the agency director and/or agency representative. Additional site visits were conducted on August 12, 2004, March 10, April 14, and May 12, 2005 to Hamilton County, April 25 to Cuyahoga County, and March 18 and May 9, 2005, to Franklin County.

Technical Assistance has been provided to Franklin and Cuyahoga counties

On January 31, 2005 an Oversight visit was conducted at Hamilton County Job and Family Services' (HCJFS) at which time technical assistance was provided on the MEPA Self Assessment Form regarding the HCJFS' diligent recruitment efforts. Technical assistance provided included the following recommendations:

- Attach to the recruitment plan a copy of HCJFS' fact sheet which identifies the demographics of children waiting for adoption;
- Provide more specific information on race instead of using categories such as "other" and "unable to determine";
- Provide more descriptive categories involving the child's physical, medical and emotional needs;
- Separate the categories of children in foster care to identify the number of children in pre-adoptive placements and independent living;
- Provide more information on the media plans to include the radio stations that are broadcasting information and at what times the broadcastings will occur;
- Provide ODJFS with an update of HCJFS' recruitment strategies when the HCJFS budget becomes available; and,
- Provide documentation to show that HCJFS' recruitment efforts target all areas of the community.

The ODJFS also conducted an oversight visit at Franklin County Children Services (FCCS) on February 23, 2005. Technical assistance on the MEPA Self Assessment Form provided to FCCS regarding their diligent recruitment efforts included the following:

- Attach demographic information to FCCS' recruitment plan;
- Incorporate information from OAC 5101:2-48-05 (Agency Adoption Policy and Recruitment Plan) paragraph (D) into the agency's recruitment plan;
- Recruit families not only for children within the agency's permanent custody;
- Recruit foster and adoptive parents who reflect the racial and ethnic diversity of children in the agency's custody and children in the State who need foster and adoptive homes;
- Identify specific strategies for recruitment;
- Review benchmarks to identify the number of children who are in the waiting pool;
- Identify how recruitment efforts have been adjusted to address the under-representation of African-American, Latino and Somali applicants;
- Develop an Inquiry Log per rule 5101:2-48-08 "Adoption Inquiry" which indicates the follow-up that occurs with each inquiry. The log will include information received
from adoption inquiries beginning January 2005 and will contain the family's name, date of inquiry, family's race, child's race of whom the family is interested, and date of follow-up; and,

• Update the agency's Placement Handbook to reflect the February 1, 2005 OAC ruled revisions.

MEPA Training/Technical Assistance Internal Policies

ODJFS staff is available to provide MEPA training and technical assistance. If assistance is needed, agencies have been directed e-mail the following information to ODJFS:

• Type of training/technical assistance desired (related to specific case review or general training);
• Specific learning objectives the agency would like to achieve;
• Assessment of agency’s current level of knowledge on MEPA and Title VI;
• Number of staff to be trained;
• Role of staff to be trained;
• List several dates within 60 days of the training request, or within 30 days if the request is regarding a specific case review, that would be possible dates for the training/technical assistance; and,
• Name, telephone and email address of contact person.

An ODJFS staff person will contact the agency within 10 days to arrange for training or technical assistance.

Additional methods of oversight include

• **Review of Agency policies** – ODJFS staff has completed the first round of review of agency adoption and foster care policies to assure that language regarding MEPA and transracial adoptions reflects language that was approved by HHS in the JFS 01611 “Non-Discrimination Requirements for Foster Care and Adoptive Placements.” A standardized review tool has been created and is being used to review policies that are to reflect the February 1, 2005 rule changes. (Attachment # 8)

• **Agency pre-service training materials** – This review was discussed in Objective 4.1, Partnering with public and private agencies to ensure that training needs are met for kinship, foster care and adoptive parents (Second Bullet Strategy).

During SFY2006, ODJFS will conduct oversight visits to all PCSAs and, PCPAs and PNAs that contract with PCSAs. Technical assistance will be provided to agencies as requested.

• Providing access for metro counties to all PCSA home studies.
Strategy Update:

The report to open approved adoptive resources that have not had an adoptive placement has been developed. It is currently being reviewed by ODJFS to assure compliance with confidentiality laws. ODJFS has also been working to develop SACWIS which will allow access of all PCSAs to the approved home studies. It is anticipated that the pilot will begin in 2006.

During SFY2006, the list of approved families will be released on a quarterly basis. ODJFS staff will continue working on specifying requirements for SACWIS to assure that there will be statewide access of home studies to appropriate PCSA staff.

- Establishing and maintaining a system for organizing files for all children in the permanent or temporary custody of an agency and for all families seeking to become foster/adoptive parents.

Strategy Update:

The OAC rules which were effective on February 1, 2005 require agencies to keep children and families files in an organized manner and that all approved applicants be filed in a central filing system.

During SFY2006, ODJFS staff will hold a MEPA site visit with PCSAs. This will include a review of the agency’s files. Agencies with files which are not found to be organized will be required to develop a corrective action plan.

- Partnering with PCSAs and private agencies to target recruitment efforts to address the diverse needs of children in foster care and awaiting adoption.

Strategy Update:

Partnering with public and private agencies has been previously noted through the AdoptOHIO Kids process; provision of funds for faith based recruitment and targeted allocations to increase the number of approved African-American families for adoption.

The Ohio Adoption Photo Listing (OAPL) web site has been maintained. A total of 1637 children pictures and narratives are listed. During April 2005, there were 783 OAPL inquiries.

The chart below shows how the 485 inquiries on specific children were disseminated to the PCSAs.
Home Study Yes Inquiry forms were submitted to these agencies:

<table>
<thead>
<tr>
<th># Forms</th>
<th>Agency</th>
<th># Forms</th>
<th>Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>79</td>
<td>Hamilton Co.</td>
<td>10</td>
<td>Ashtabula Co.</td>
</tr>
<tr>
<td>67</td>
<td>Summit Co.</td>
<td>9</td>
<td>Franklin, Lorain and Lucas Co.</td>
</tr>
<tr>
<td>58</td>
<td>Cuyahoga Co.</td>
<td>8</td>
<td>Gallia Co.</td>
</tr>
<tr>
<td>44</td>
<td>Montgomery Co.</td>
<td>7</td>
<td>Clermont and Lake Co.</td>
</tr>
<tr>
<td>30</td>
<td>Stark Co.</td>
<td>6</td>
<td>Clinton, Miami and Shelby Co.</td>
</tr>
<tr>
<td>26</td>
<td>Mahoning Co.</td>
<td>5</td>
<td>Jefferson Co.</td>
</tr>
<tr>
<td>24</td>
<td>Trumbull Co.</td>
<td>4</td>
<td>Licking and Washington Co.</td>
</tr>
<tr>
<td>20</td>
<td>Belmont Co.</td>
<td>2</td>
<td>Butler, Hardin, Medina, Portage, Union and Wood Co.</td>
</tr>
<tr>
<td>15</td>
<td>Greene Co.</td>
<td>1</td>
<td>Carroll, Erie, Geauga, Hocking, Huron, Logan, Perry, Scioto and Seneca Co.</td>
</tr>
<tr>
<td>11</td>
<td>Athens Co.</td>
<td></td>
<td>Total 485</td>
</tr>
</tbody>
</table>

Currently, there are 1637 active children in the OAPL database in the following categories:

<table>
<thead>
<tr>
<th>Active Children Available</th>
<th>A - (0-6)</th>
<th>B - (7-11)</th>
<th>C - (12 &amp; over)</th>
<th>D - (Siblings)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Available</td>
<td>129</td>
<td>128</td>
<td>737</td>
<td>643</td>
<td>1637</td>
</tr>
<tr>
<td>Available</td>
<td>17</td>
<td>87</td>
<td>639</td>
<td>382</td>
<td>1125</td>
</tr>
<tr>
<td>Unavailable</td>
<td>112</td>
<td>41</td>
<td>98</td>
<td>261</td>
<td>512</td>
</tr>
</tbody>
</table>

During SFY2005, there will be 17 OAPL Features Books published. These are small magazine style books that feature a longer narrative and picture on a small number of older children with special needs. The last three books that have been released include features on the following demographics of children from Major-metro PCSAs:
A Features Book for Montgomery County PCSA which included the categories of children:

<table>
<thead>
<tr>
<th>21 Children</th>
<th>Black males</th>
<th>Black females</th>
<th>Caucasian males</th>
<th>Caucasian females</th>
<th>Biracial males</th>
<th>Biracial females</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avg. age: 14.6</td>
<td>11</td>
<td>8</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

The Lucas County PCSA book included:

<table>
<thead>
<tr>
<th>19 children</th>
<th>Black males</th>
<th>Black females</th>
<th>Caucasian males</th>
<th>Caucasian females</th>
<th>Biracial males</th>
<th>Hispanic females</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avg. age: 13</td>
<td>7</td>
<td>3</td>
<td>6</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

The Summit County PCSA book published included:

<table>
<thead>
<tr>
<th>24 children</th>
<th>Black males</th>
<th>Black females</th>
<th>Caucasian males</th>
<th>Caucasian females</th>
<th>Biracial males</th>
<th>Biracial females</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avg. age: 12</td>
<td>6</td>
<td>5</td>
<td>11</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

During SFY2006, ODJFS will continue to maintain the OAPL Website, produce 17 OAPL Features Books, and fund AdoptOHIO Kids program.

- Assuring that Ohio’s Recruitment Response Team (RRT) meets all performance requirements as specified by the AdoptUS Kids agreement and that information gathered by the RRT is shared with public and private agencies to continuously improve county and private agency response to families.

**Strategy Update:**

In partnership with the Children’s Bureau of the Department of Health and Human Services, and the Ad Council, AdoptUSKids announced its National Ad Campaign to encourage adults to adopt children who are in foster care. This multi-media, three year campaign, launched July 15, 2004 in Washington D.C. The Campaign theme for this project is Answering the Call.

One component of this National Campaign is the AdoptUSKids Photo Listing website, which is intended to serve as a recruitment tool for matching adoptive parents and waiting children. The ODJFS has participated in this national campaign since the inception.
As of May 6, 2005, ODJFS has registered 13 Ohio PCSAs to access the AdoptUSKids website. These agencies have in turn registered 55 CSA staff (users) who are able to register waiting children.

The Ohio Family Care Association (OFCA,) the Recruitment Response Team (RRT) for Ohio, has received 133 inquiries for the SFY2005. Of all calls received 35% were requesting information regarding the adoption process and 45% had contacted an agency and were in the process of receiving training and adoption services.

Of the inquiries that expressed interest in children the majority were interested school-aged children; less than 10% were interested in infants. Seventy five percent (75%) of all callers indicated that they called AdoptUS Kids because they saw the commercials advertised. There have been two Spanish speaking inquires since the Spanish campaign was initiated. The RRT has contracted with a Spanish speaking interpreter to return calls to inquirers who only speak Spanish. The RRT has contacted several radio and TV stations in Ohio to encourage the commercial be aired more frequently.

Objective 4.3 Ensure that every guardian ad litem that is appointed in a judicial proceeding involving an abused or neglected child will receive training appropriate to the role.

An ongoing priority of the ODJFS is to ensure adequate representation of the best interests of children in court due to child abuse and neglect allegations. Over the past years, Basic State Grant and Children’s Justice Act funds have been used to promote the development of Court Appointed Special Advocate (CASA) programs in Ohio’s court jurisdictions.

Both ODJFS and the Supreme Court of Ohio provided the start-up and maintenance funding for the Ohio CASA/GAL Association until an ongoing source of revenue was located through the sale of Ohio license plates. The ODJFS continues to use CAPTA funds to annually support the Association’s statewide conference and local programs’ pre- and in-service training. The Ohio CASA/GAL Association has established and implemented program standards and a site review process, as well as volunteer curriculum with 30 required hour’s pre-service training. Active CASAs must take a minimum of 12 hours annual in-service training.

Volunteers serving Ohio’s 33 CASA programs are monitored to ensure adequate knowledge about their appropriate role as guardians ad litem (GAL) and minimum performance standards required to represent a child’s best interest. Attorney GALs, not serving as CASA volunteers, currently do not have a uniform system of regulation. In response, the Supreme Court of Ohio Chief Justice Thomas Moyer created the Guardian ad litem Standards Task Force to establish standards for those who represent children in
court “at times when they are most vulnerable – in cases involving custody, visitation and domestic violence.” The Task Force was asked to develop uniform standards and financial accountability for the GAL programs in Ohio. The 13-member panel was chaired by Common Pleas Judge David Ellwood of Guernsey County. The report assembled by the group was released for a period of public comment and those comments were assimilated into a final report assigned to the Supreme Court of Ohio’s standing Advisory Committee on Children, Families and the Courts for implementation.

The Advisory Committee studies the proposed standards to determine the best methods of implementation. Currently, it appears that this will be achieved through a mix of statutory and Rule of Superintendence language. Since standards also require pre- and in-service training, the committee also has been challenged with ensuring that instruction is appropriate to the role and is provided in a manner that does not discourage attorneys from agreeing to serve in the capacity of GAL.

Criminal Justice Act funds are being used to develop a curriculum that satisfies the training requirements of the Advisory Committee’s final standards. These funds will also support the initial trainer recruitment and instruction. CAPTA funds will be used to support an ongoing system for ensuring that the curriculum is offered in a manner that is financially and geographically accessible to Ohio’s attorneys and which promotes attorney participation in the role of GAL.

Strategies for ensuring the training of GALs include:

- Establishing standards for GALs, including training requirements.
- Implementing training standards through statute and Rule of Superintendence.
- Developing training curriculum.
- Developing evaluation measures for participants, methods of measurement, and minimum performance criteria.
- Establishing an ongoing training program.

**Strategy Update:**

The Supreme Court of Ohio’s *Advisory Committee on Children, Families and the Courts* voted to recommend new standards of service for Ohio’s guardians ad litem. The proposed standards went through lengthy review and comment prior to presentation to the Advisory Committee; comments were incorporated into the committee’s final language whenever feasible and consistent with the intent of standards. To begin the process of enactment, the Supreme Court now is identifying which standards can be implemented through rule change and which require statutory change.

The 26 standards are organized into 5 categories:

- Service and Duties;
• Training;
• Reports;
• Funding and Payment; and,
• Monitoring and Enforcement

A complete copy of the Advisory Committee on Children, Families and the Court approved standards for guardians ad litem can be found on [www.sconet.state.oh.us](http://www.sconet.state.oh.us).

An important standard that will be enacted through Rule of Superintendence is a pre-service training requirement of six hours and three hour in-service instruction annually thereafter. The Supreme Court of Ohio contracted with Ohio CASA/GAL Association to develop a standardized curriculum for the initial six hours, and has contracted with the Ohio Network of Children’s Advocacy Centers (ONCAC) to deliver the instruction state-wide on an ongoing basis. ONCAC was selected because it’s state-wide presence, experience in delivering similar programs, and affiliation with the local Bar through County Prosecuting Attorneys.

Ohio CASA has completed the curriculum and presented it to SCO. ONCAC has established a small review group to address timing issues, and is assembling a pool of qualified instructors. It is expected that the first local sessions will be offered in summer 2005.

In an effort to balance the needs of children with the realities of practice, the six hour instruction will be available to Ohio’s guardians ad litem significantly in advance of enactment of any training requirement, and in a manner that is geographically accessible and not cost prohibitive. It is expected that all standards will be enacted by some time in 2006.

Pre- and in-service training data is submitted quarterly per ODJFS’ contract with the Ohio CASA/GAL Association. The data submitted for July 2004 through March 2005 indicate that 28 pre-service training sessions were provided to 346 individuals; and 20 in-service training sessions (one statewide and 19 regional) have been provided to 368 individuals.
IV TRAINING AND STAFF DEVELOPMENT

ODJFS has continued to view training as an important component for effective child welfare practice. As major transformation has occurred in the field of child welfare, ODJFS has taken on a leadership role in the provision of training to PCSA staff. Recognizing the critical need for consistent standardized in-service training for child welfare professionals, ODJFS in collaboration with the Ohio Child Welfare Training Program (OCWTP) is in the process of reviewing and redesigning the standardized core training for caseworkers and supervisors.

The redesign of the curricula is being done to assist in meeting the goals identified in Ohio’s program improvement plan (PIP). This initiative was started in 2001, with the introduction of the child and family services review (CFSR) outcomes. In the first two years (2001-2003), the OCWTP conducted a statewide training assessment to: identify trends and conditions of Ohio’s child welfare agencies and practices; and gain information to assist in the redesign of the core training program. To date, findings from the statewide training assessment and the OCWTP’s Comprehensive Review of Core Curricula Report, the results from Child Protective Oversight Evaluation (CPOE) reviews and Ohio’s Child and Family Services Review have been used to revise the core competencies to better address existing and emerging issues in child welfare practice with an emphasis on meeting the CFSR outcomes. In July 2003, the revision of caseworker, supervisor/manager and family support worker competencies was completed. These competencies form the basis for the re-write of the OCWTP caseworker and supervisor/manager core curricula. The revised competencies reflect the latest best practice standards and emerging issues in child welfare. The competencies are more discrete, to allow staff members to precisely communicate their specific training needs. With the completion of the competencies, the OCWTP began re-design of the caseworker and supervisory core curricula in 2003, with completion of the first phase expected in June of 2005.

After completion of the re-design, implementation will begin in 2005, and continue through 2013. During this timeframe, additional work will also take place on system evaluation, training for foster caregivers, adoptive parents and expansion of the department’s university partnership program. The mission of the ODJFS and the OCWTP is to provide a comprehensive, competency-based in-service training system that provides high quality, culturally responsive, family centered, job-related training for staff in public child welfare agencies throughout Ohio.

In October 2003, the OCWTP Steering Committee adopted the American Humane Association’s (AHA) Levels of Training Evaluation as the framework for the development of the comprehensive evaluation system. The AHA model outlines a 10-level continuum of training evaluations that incorporates both formative evaluation, designed to assess the effectiveness of training processes, materials, and delivery, and summative evaluation, designed to
establish and verify the outcomes of training.

The ten levels in the American Humane Association model are sequenced and range from “directly related [to training]” and “easier to measure,” to those at which training is one of a number of factors potentially impacting a given outcome, and direct connections to training are very difficult to document. The Steering Committee for the OCWTP decided that the comprehensive evaluation system for the program would include AHA levels one through seven. A brief description of the 10 levels follows.

1. Course level — refers to the evaluation of the training itself (content, structure, methods, materials, and delivery). It may also include evaluation of the adequacy of the outcome measurement tools to be used.

2. Satisfaction level — refers to the trainees’ feelings about the trainer, the quality of the material presented, the methods of presentation, and environment (e.g., room temperature).

3. Opinion level — refers to the trainees’ attitudes toward utilization of the training (e.g., their perceptions of its relevance, the new material’s fit with their prior belief system, openness to change), as well as their perceptions of their own learning. The opinion level also includes a judgment regarding the training’s value.

4. Knowledge acquisition level — refers to activities such as learning and recalling terms, definitions, and facts, and is most often measured by a paper-and-pencil, short answer (multiple-choice) test.

5. Knowledge comprehension level — refers to activities such as understanding concepts and relationships, recognizing examples in practice, and problem solving. This level is also most often measured by a paper-and-pencil test, but items include a greater degree of integration of material.

6. Skill demonstration level — refers to application of skill within the controlled environment of the training workshop. It requires the trainee to apply learned material in new and concrete situations while in the classroom.

7. Skill transfer level — requires trainees to apply new knowledge and skills in situations occurring outside the classroom. Measurements at this level include Participant Action Plans and case record reviews.

8. Agency impacts, 9. Client outcome, 10. Community impact levels — these advanced levels address the impact of training at the agency, client, and community levels, respectively. Questions addressed at these levels might include, for example, the impact of training in substance abuse issues on patterns of services utilized, or interagency cooperation in case management and referral. A cost-benefit analysis might also be conducted at agency, client, or community levels.
A first step in the development of the comprehensive evaluation system was to determine evaluation resources already integrated into the OCWTP that could support this initiative. For nearly twenty years, the OCWTP has collected formative evaluation data through a standardized workshop evaluation form. This evaluation tool collects workshop-based data on workshop content, organization, and trainer-related items. This data corresponds to the first three levels of the AHA training evaluation model.

The OCWTP has been working toward being able to evaluate its programs to the seventh level of this model and expected to continue this work in the next biennium and the subsequent renewals of this contract through 2013.

ODJFS is currently working to purchase a learning management system to replace the OCWTP’s current system (referred to as Train Track). Other training tracking software used within the department will also benefit from the purchase of this system. The department is working with the University of Illinois at Chicago and their Center for Advanced Distance Education (CADE) to purchase and customize the software for the OCWTP and other training systems in the department requiring maintenance of training records, registration and confirmation of workshops, and development of competencies to assist staff in doing their jobs. A major focus for the development of this program will be on the last quarter of SFY 2005 and the first quarter of SFY 2006 hopefully, during that period, the OCWTP will be transitioning from the Train Track system to the new Learning Management System. Once fully implemented, the new system will streamline the registration process, automate pre- and post-testing, provide online evaluation of workshops and assist with tracking training taken by all trainee groups. The new system is expected to provide a platform from which web-based training can be launched.

Future plans for the OCWTP include the use of more distance learning strategies and “Just-in-time” web-based training that is available to caseworkers, supervisors and/or foster parents when they are faced with a new or infrequent learning situation. “Just-in-time” training gives them the ability to access resources such as tutorials, reading materials and curricula to help them address an emerging need. It is a method of having training resources available at the exact time that a caseworker, supervisor or foster parent most needs them and has the most motivation and incentive to learn.

The OCWTP is a model program that includes these essential elements:

**Use of a “Universe of Competencies”**
Competencies are statements of the knowledge, skills and values required for workers to do their jobs.

The Utilization of an Individual Training Needs Assessment Instrument (ITNA)

The (ITNA) is used to identify each worker’s training needs. The Universe of Competencies and the ITNA forms the basis for curriculum development. ITNAs are completed jointly between caseworker and supervisor bi-annually at all public children services agencies.

The Development and Certification of Competent Trainers

OCWTP trainers must have appropriate course content knowledge. The necessary adult training skills and the ability to promote family-centered, culturally-competent practice.

Development of Job-Related Training Content

Training content relevance is assured by using the OCWTP’s “universe of competencies” as the guide to curriculum development.

The Utilization of Transfer of Learning (TOL) Activities

Transfer of learning activities promote the effective and continuing application, by trainees to their jobs, of the knowledge and skills gained in training.

A Statewide System for the Delivery of Training

Training is developed and delivered based upon data gathered from ongoing training needs assessment of workers in each region.

Core training for child welfare workers was also initiated in 1986. All Core workshops offered through the Ohio Child Welfare Training Program have standardized Ohio specific curricula. In 1987, ODJFS mandated, through OAC rule, that all PCSA caseworkers complete a minimum of sixty hours of in-service training. Training requirements had to be fulfilled by taking courses offered through the Ohio Child Welfare Training Program.

The requirement was critical since the state wanted to implement standardization of practice
across the state. Currently, Core involves a 15-day curriculum. The following workshops are mandated in Core: Legal Aspects of Family-Centered Child Protection Practice; Family-Centered Child Protective Services; Case Planning and Family-Centered Casework; Effects of Abuse and Neglect on Child Development and Separation, Placement and Reunification. To fulfill additional training hour requirements, caseworkers can attend the following specialized workshops: Adoption and Foster Care; Working with Adolescents; Sexual Abuse; Intake and the Assessment of Risk; Legal Issues in Child Welfare; Services to Single Parents; or Family-centered Assessment and Intervention. Caseworkers may elect to take the following related workshops: Treatment Strategies and Intervention, Family System Theory and Family Therapy; Casework with Children; Recognizing and Assessing Developmental Delay and Disability; Parenting Skills; Collaborative Interdisciplinary Services to Families; Cultural Competence; Adult Psycho pathology; Substance Abuse; Family Violence; Understanding Psychological Evaluations; Group Work Skills; Time and Stress Management: Personnel Safety; Human Sexuality; Writing Skills for Case Documentation; and Health and Medical Issues. Other specialized workshops are offered based on ITNA data.

In November 1997, H.B. 274 mandated caseworkers complete ninety hours of in-service training during the first year of employment and thirty-six hours of in-service training annually. Training topics were also identified in this bill.

In 1989, the program finalized competencies for child welfare supervisors and managers. Full implementation occurred in 1990. “Core” courses currently offered to supervisors and managers include: Managing within a Child and Family Serving System; Managing Work Through Other People: Diversity in the Work Place; Transfer of Learning: The Supervisor’s Role in Developing Staff; and Supervising and Managing Group Performance: Developing Productive Work Teams. Specialized courses for supervisors and managers include: Supervising Case Plan Development and Implementation; Supervising Sexual Abuse Services; Supervising Services to Adolescents; Supervising Adoption and Foster Care Services; Supervising Intake, Risk Assessment, and Initial Family Assessments; Supervising In-Home Family Services; and Legal Issues in Child Welfare. Related workshops offered include: Planning and Decision-Making; Effective Use of Power; Supervising for Optimal Job Performance; Employee Performance Evaluation; Management of Conflict; Public and Community Relations; Time and Stress Management; Team Development and Facilitation; Budgeting and Fiscal Operation; Staffing the Agency; Supervising Difficult Employees; Managing Change; and Managing Cultural Diversity.

Based upon ITNA data other workshops are offered to supervisors and managers. H.B. 274 required supervisors to complete sixty hours of in-service training during their first year as a supervisor and 30 hours of in-service training thereafter.
From 1994 to present, 182,557 caseworkers participated in workshops offered by the Ohio Child Welfare Training Program. A total of 640,779 training hours were provided. From 1994 to the present there were 13,885 supervisory participants with 92,552 hours of training provided. The following table presents information on caseworker and supervisory training by year.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>Total Number of Workshops Presented</th>
<th>Caseworker Training Participants</th>
<th>Caseworkers Trained</th>
<th>Supervisors Training Participants</th>
<th>Supervisors Trained</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 1, 1996- June 30, 1997</td>
<td>1,921</td>
<td>16,570</td>
<td>3,568</td>
<td>2,440</td>
<td>575</td>
</tr>
<tr>
<td>July 1, 1997- June 30, 1998</td>
<td>1,590</td>
<td>14,070</td>
<td>3,585</td>
<td>1,741</td>
<td>544</td>
</tr>
<tr>
<td>July 1, 1998 - June 30, 1999</td>
<td>1,316</td>
<td>10,171</td>
<td>3,210</td>
<td>1,339</td>
<td>492</td>
</tr>
<tr>
<td>July 1, 1999 - March 31, 2000</td>
<td>1,180</td>
<td>21,636</td>
<td>4,629</td>
<td>1,097</td>
<td>630</td>
</tr>
<tr>
<td>July 1, 2000 - April 30, 2001</td>
<td>1,187</td>
<td>23,450</td>
<td>3,837</td>
<td>1,126</td>
<td>695</td>
</tr>
<tr>
<td>July 1, 2001-May 31,2002</td>
<td>1,377</td>
<td>23,855</td>
<td>3,406</td>
<td>922</td>
<td>412</td>
</tr>
<tr>
<td>June 1, 2002 - May 1, 2003</td>
<td>1,686</td>
<td>28,514</td>
<td>3,797</td>
<td>1,448</td>
<td>557</td>
</tr>
<tr>
<td>July 1, 2003 – May 31, 2004</td>
<td>1,990</td>
<td>28,939</td>
<td>3,548</td>
<td>1,511</td>
<td>559</td>
</tr>
<tr>
<td>July 1, 2004 – May 18, 2005</td>
<td>1535</td>
<td>19,660</td>
<td>3,018</td>
<td>1,329</td>
<td>539</td>
</tr>
</tbody>
</table>

Child welfare practice in Ohio has undergone multiple changes since the inception of the OCWTP in 1986. Since that time, those involved in the OCWTP have recognized the need for institutionalization of a continuous cycle of assessment, planning, implementation, and evaluation.

This cycle is necessary for the OCWTP to ensure relevance of training to practice and to ensure the training program assists agencies in achieving the U.S. Department of Health and Human Services (HHS) child and family services outcomes.

The OCWTP has taken on that challenge and as mentioned above, conducted a
comprehensive training needs assessment. This assessment along with other factors has helped to determine the accuracy in which the OCWTP’s Universe of Competencies reflects the knowledge and skills needed to meet the needs of families and children today. In addition, this will help Ohio achieve the outcomes and systematic factors required in the U.S. Department of Health and Human Services Child and Family Services Review.

The assessment also helped to identify the extent to which OCWTP products coincide with the learning styles of today’s child welfare professionals. Once the assessment data had been obtained, OCWTP had the necessary information to revise, edit and/or add/delete competencies from the current listing of competencies. Based upon the new listing of competencies, learning styles, and other information obtained as a result of the training needs assessment, caseworker and supervisory core will be edited, enhanced and restructured to include specific information related to the outcomes of the child and family services review as well as information that will put more emphasis on skill building techniques in the supervisor core curriculum. The timeframe for completion of phase one of the revamp of both the caseworker and supervisor core curricula will be two years (end of the contract period 2007). Additional renewals have been proposed for the completion through June 30, 2013.

In 1996, as a result of House Bill 419, all workers engaged in the provision of adoption services were required to be certified as adoption assessors and participate in mandatory training offered by ODJFS. In March 1996, the following workshops were offered for adoption assessors to complete Tier I Adoption Assessor Training: Birth Parent Services; Family and Child Assessment; Placement Activities; Pre-finalization Adoption Services; Adoption Assistance; and Post-finalization Adoption Services. Adoption Assessors had to complete the following workshops in Tier II: Permanency thru Interagency Collaboration; Cultural Issues in Permanency Planning; Openness in Adoption; and Gathering and Documenting Background Information. From March 1, 1996 to May 18, 2005 a total 3,041 workshops have been offered. Thirty-two thousand sixty-one (34,339) participants attended training. Fifty percent (50%) were from private adoption agencies. During the current contract period, three additional curricula in the area of post-finalization have been developed and will be available to adoptive parents during the program’s next contract period.
The following table presents information on the number of workshops offered, hours of training and total number of participates who have attended adoption assessors training.

<table>
<thead>
<tr>
<th>ADOPTION ASSESSOR TRAINING - TIER I</th>
<th>Total # of Workshops</th>
<th>Total # of Participants</th>
<th>Total Hours of Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth Parent Services</td>
<td>206</td>
<td>3,714</td>
<td>1,206</td>
</tr>
<tr>
<td>Family and Child Assessment</td>
<td>227</td>
<td>3,876</td>
<td>2,409</td>
</tr>
<tr>
<td>Placement Strategies</td>
<td>198</td>
<td>3,734</td>
<td>573</td>
</tr>
<tr>
<td>Pre-finalization Adoption Services</td>
<td>226</td>
<td>3,849</td>
<td>1,162</td>
</tr>
<tr>
<td>Adoption Assistance</td>
<td>202</td>
<td>3,776</td>
<td>546</td>
</tr>
<tr>
<td>Post-finalization Adoption Services</td>
<td>214</td>
<td>3,560</td>
<td>1,021</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ADOPTION ASSESSOR TRAINING - TIER II</th>
<th>Total # of Workshops</th>
<th>Total # of Participants</th>
<th>Total Hours of Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permanency thru Interagency Collaboration</td>
<td>250</td>
<td>4,332</td>
<td>1,221</td>
</tr>
<tr>
<td>Cultural Issues in Permanency Planning</td>
<td>200</td>
<td>2,573</td>
<td>1,947</td>
</tr>
<tr>
<td>Openness in Adoption</td>
<td>188</td>
<td>2,528</td>
<td>1,923</td>
</tr>
<tr>
<td>Gathering and Documenting Background Information</td>
<td>184</td>
<td>2,397</td>
<td>924</td>
</tr>
</tbody>
</table>

As a result of House Bill 95 of the 125th Ohio General Assembly, the Ohio Child Welfare Training Program was given the responsible for the development of workshops designed to meet the training needs of foster caregivers/kinship caregivers through OCWTP’s regional
training centers. Training through the OCWTP for this population began January 1, 2004. By law, all new family foster caregivers are mandated to take the following preplacement training courses: The legal rights and responsibilities of foster caregivers; Agencies’ policies and procedures regarding foster caregivers; ODJFS requirements for certifying foster homes; the effects of placement, separation and attachment issues on children, their families and foster caregivers; substance abuse and dependency; symptoms of mental illness and learning disorders; and developmentally appropriate activities for children. Tracking of training courses for foster caregivers will be done through the Foster Caregiver Recording Educational Database (FRED).

The OCWTP continues to offer an Investigative Mentoring Program for Ohio Prosecutors, law enforcement officers and child welfare professionals.

Other states and Canadian provinces have modeled their child welfare training program after Ohio’s training model. The following states and provinces developed their training system based upon the OCWTP model: Pennsylvania; Arizona; Alaska; Nevada; New Hampshire; Virginia; Oklahoma; select counties in California; New Mexico; Minnesota; Indiana; Wisconsin; Manitoba; Canada; Ontario, Canada; New Brunswick, Canada; Newfoundland, Canada; Quebec, Canada; Buffalo, New York; and the Cayman Islands. As a result of other states and provinces using the OCWTP model as the basis for their training system, Ohio has benefited from other states enhancements to the curriculum.

Training activities which will be cost allocated to Title IV-E, has been attached as an Appendix, Attachment CC.
V QUALITY ASSURANCE AND EVALUATION

Quality Assurance System

The Ohio Department of Job and Family Services (ODJFS) have developed a systematic process for monitoring and oversight of public children services agencies’ (PCSAs) compliance with the Ohio Revised Code (ORC) and Ohio Administrative Code (OAC) rules. The monitoring and oversight process called the Child Protection Oversight and Evaluation (CPOE) is mandated by OAC rule 5101:2-57-02. The rule states that ODJFS shall implement an oversight and evaluation system which is based upon a continuous quality improvement process, focusing on specific service delivery processes and client outcomes within the county child protection and permanency program.

Each CPOE review cycle is called a Stage review and is followed by the current cycle number of the review (e.g., Stage 5). The reviews are conducted by ODJFS staff. Following an on-site review, ODJFS prepares a final report that is shared with the PCSA. The PCSA is then required to submit to ODJFS, and implement, a quality improvement plan (QIP) to correct findings of noncompliance.

The CPOE review process was changed in the OAC rule from a 18 month review process to a 24 month review. This change was implemented to be in line with the Child and Family Services Review process. To prepare the PCSAs for the changes that will be included with the CPOE Stage 6 review, a comprehensive overview and training is being developed. This training will be conducted statewide to PCSA staff between July 1, 2005 and September 30, 2005. The review schedule for the reviews follows:

<table>
<thead>
<tr>
<th>Stage</th>
<th>Review Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 6</td>
<td>October 1, 2005 - September 30, 2007</td>
</tr>
<tr>
<td>Stage 7</td>
<td>October 1, 2007 - September 30, 2009</td>
</tr>
<tr>
<td>Stage 8</td>
<td>October 1, 2009 - September 30, 2011</td>
</tr>
</tbody>
</table>

The Child Protection and Oversight Evaluation (CPOE) quality assurance system is based on modern quality methods, such as continuous quality improvement and the incorporation of automated child welfare process and outcome measures. The system is designed to improve the services and outcomes for families and children coming to the attention of PCSAs. It focuses on key delivery processes and essential client outcomes within a continuous quality improvement framework. Improvement opportunities for the PCSAs are supported through the
provision of technical assistance by ODJFS staff.

Different outcomes and review elements are focused on for each review cycle. A framework is developed for each cycle on the elements and outcomes to be reviewed. Critical operative concepts of CPOE include regular data collection, analysis and verification, and continuous feedback. CPOE On-site review activities consist of identifying systemic, policy or practice areas of strength, weakness, and concern for each core indicator along with jointly developed strategies that affect positive improvement of the outcome indicators. A review of case records for rule compliance may occur and quality improvement plans are prepared for areas needing improvement. Benchmarks based on national standards found in the Federal Child and Family Services Review (CFSR), are used to determine compliance.

In response to the on-site CPOE review, quality improvement plans (QIPs) are required to indicate each PCSA’s planned course of action to effect positive change in their agency during the 24-month period between formal CPOE on-site reviews. The QIP indicates:

- Desired change or outcome;
- Activities to be done to effect the desired change or outcome;
- Staff responsible for the stated activities;
- Level of anticipated or requested technical assistance from ODJFS to help achieve the desired change or outcome; and,
- Anticipated time frames for implementing the stated activities.

The CPOE process utilizes outcome indicators which provide necessary information to support county practice and management. Currently, outcome indicators address child safety and permanency. Outcome indicators for child well-being have not yet been developed. In each review stage, a core set of indicators are chosen. The current list of outcome indicators follows:

**Statewide CPOE Outcome Indicators**

**Child Safety Outcomes**

Children are protected from abuse and neglect whenever possible. The risk of harm to children will be minimized.

**Indicator 1A:** Investigations completed within 30 and 45 days.
Indicator 1B: Emergency incident assessments initiated within 1 hour of acceptance of report.
Indicator 1C: Non-emergency incident assessments initiated within 24 hours of acceptance of report.
Indicator 2A: Receipt of subsequent child abuse/neglect report with case resolution or disposition.
Indicator 2B: Recidivism of substantiated or indicated child abuse/neglect reports.
Indicator 2C: Recidivism of terminated substantiated or indicated child abuse/neglect cases.
Indicator 2D: Six month recurrence of maltreatment.
Indicator 3A: Proportion of child abuse/neglect cases in which children are removed from their homes.
Indicator 3B: Number of children in out-of-home care due to dependency.
Indicator 3C: Proportion of child abuse/neglect cases placed in institutional/congregate care.
Indicator 3D: Six month recurrence of maltreatment.
Indicator 4A: Number of days a child remains in temporary custody.
Indicator 4B: Number of days a child remains in temporary custody.
Indicator 4C: Incidence of reports on child abuse/neglect while in substitute care.

Permanency Outcomes

Children will have permanency and stability in their living situations. The continuity of family relationships, culture, and connections will be preserved for children.

Indicator 5: Number of days a child remains in out-of-home placement.
Indicator 6A: Number of moves a child experiences in an out-of-home placement episode.
Indicator 6B: Number of moves in out-of-home placement by degree of restrictiveness.
Indicator 6C: Stability of foster care placements.
Indicator 7A: Number of times a child is removed from his/her home.
Indicator 7B: Foster care re-entries.
Indicator 8: Number of children in out-of-home care in court-order Planned Permanent Living Arrangements.
Indicator 9A: Length of time between the date of permanent custody and the date of adoptive placement agreement.
Indicator 9B: Length of time between the date of permanent custody and the date of adoption finalization.

Indicator 9C: Length of time in placement before entering permanent custody.

Indicator 10: (No longer used)

Indicator 11: Number of children in permanent custody in an adoptive placement.

Indicator 12: Percentage, by reason, of custody terminations.

Indicator 13A: Length of time to achieve reunification.

Indicator 13B: Length of time to achieve adoption.

Child & Family Well-Being Outcomes

Families will have an enhanced capacity to provide for their children’s needs. School-age children will have educational achievements appropriate to their abilities. Children will receive adequate services to meet their physical and mental health needs.

At this time, no indicators address this outcome. (The case record review component addresses some child well being outcomes).

A Comprehensive Assessment Report (CAR) is completed at the end of each review cycle to summarize the findings obtained during the CPOE reviews of all 88 PCSAs. The CAR for Stage 5 is being reviewed and it is anticipated that this report will be finalized in June 2005.

The effectiveness of these activities is critical to the overall quality improvement of the statewide child protection system. Application of these findings within the ODJFS program/policy areas is necessary for planning, training, budgeting, and technical assistance.

The current Stage 5 CPOE review (July 1, 2004 – June 30, 2005) addresses the following components:

Two outcome indicators are assessed to evaluate achievement of the Child Safety Outcome:

Indicator 2D: Recurrence of substantiated and indicated CA/N within six months. A county would be in substantial conformity with this indicator if, fewer than 6.1% of children had a recurrence of a substantiated and indicated CA/N
within six months.

Indicator 4C: Incidence of reports of CA/N while in substitute care. A county would be in substantial conformity with this indicator if, of all children in foster care during the period of review, the percentage of children who were the subject of a substantiated or indicated report of child abuse or neglect by a foster parent or facility staff is 0.57% or less.

Four outcome indicators are assessed to evaluate achievement of the Permanency Outcome:

Indicator 6C: Stability of foster care placements. A county would be in substantial conformity with this indicator if 86.7% or more of the children who have been in foster care less than 12 months from the time of the latest removal had no more than two placement settings.

Indicator 7B: Foster care re-entries A county would be in substantial conformity with this indicator if, of all children who entered foster care during the year under review, 8.6% or fewer of those children re-entered foster care within 12 months of a prior foster care episode.

Indicator 13A: Length of time to achieve reunification A county would be in substantial conformity with this indicator if, of all children who were reunified with their parents or caretakers at the time of discharge from foster care, 76.2% or more children were reunified in less than 12 months from the time of the latest removal from the home.

Indicator 13B: Length of time to achieve adoption. A county would be in substantial conformity with this indicator if, of all children who exited foster care during the year under review to a finalized adoption, 32% of the children exited care in less than 24 months from the time of the latest removal from their home.

In addition to the outcome indicator discussion, a review of case records is completed, to ensure compliance with Ohio Administrative Code (OAC) rules and federal requirements. The expected level of rule compliance is 90% or greater for each rule reviewed. A Quality Improvement Plan is required for any rule that is less than the compliant rate. The case record review components are:

- **Assessment/Investigation:** The Assessment/Investigation Case Record review has 16 review elements.
- **Substitute Care:** The Substitute Care Case Record review has 55 review elements. This
review looks at the Case Plan, Health and Education information, Visitation, Independent Living and SARs.

- **Adoption**: The Adoption Case Record review has 11 review elements.

- **In-Home Supportive Service**: The In-Home Supportive Service Case Record review has 13 review elements. This review looks at the Case Plan and SARs.

- **Protective Supervision**: The Protective Supervision Case Record review has 18 review elements. This review looks at the Case Plan, Visitation, SARs and Protective Supervision Extension/termination.

- **Screening Procedure Review**: This review gathers information regarding the county’s screening procedures.

- **Guided Outcome Indicator Discussion Questionnaire**: A questionnaire was developed to help guide the outcome indicator discussion to focus in on specific Child and Family Service Reviews/Program Improvement Plan (CFSR/PIP) concerns.

### Data Validation

To measure the accuracy of the data entered into the Management Information System, data validation activities between the case record and the local Management Information System were examined. For Stage Five, three targeted samples were selected to address issues that impact AFCARS reporting (federal reporting) and data validity. The three samples were:

- Court Termination of Custody. *(FACSIS Event 084, Element 02)*
- Children currently in placement with missing case plan goal or maintain in home goal. *(FACSIS Event 220)*
- Children in custody *(FACSIS Event 080)* without any placement events. *(FACSIS Event 060)*

### Stage 6 Review

The Stage 6 review is currently being developed.
VI MANAGEMENT INFORMATION SYSTEMS

SACWIS Kick-Off

In preparation for the kick-off of Ohio’s SACWIS Project, business team members participated in Business Analyst Training to expand their knowledge base and assist in capacity building to prepare them for successful participation in Ohio’s SACWIS development. The team received training on: Business Analysis Overview; Vendor Management; Requirements Definition and Facilitation; and, Object Oriented Analysis and Design with UML.

Ohio’s SACWIS Project team formally began work with Dynamics Research Corporation (DRC) and CompuWare for the design, development and implementation of Ohio’s SACWIS in May 2004. On June 21, 2004, two-hundred and fifty state, county and SACWIS Project staff and representatives from the Supreme Court of Ohio (SCO) and the Public Children Services Association of Ohio (PCSAO) were in attendance when ODJFS hosted a Statewide SACWIS Kick-Off Meeting. The event was held to provide state and county staff with key information and an opportunity to interact and dialogue about Ohio’s new SACWIS Initiative. Staff from both Dynamics Research Corporation (DRC) and CompuWare joined the State Project Team to provide an overview of the SACWIS Project Plan and Schedule and Senior Executives from both ODJFS and DRC participated in the event.

The secondary site for Ohio’s SACWIS Project was opened in September 2004. The site houses the contractor development staff and business analysts, as well as state development staff and business analysts. The secondary Project site is located immediately adjacent to the Primary Project site and provides an opportunity for ongoing communication between key state and contract management staff, while providing “hoteling” space for county and state Subject Matter Experts (SMEs). All Rapid Requirements Definition (RRD) Sessions and Joint Application Design (JAD) Sessions are held at the secondary site facility.

Requirements & Design

The RRD Sessions were convened in June 2004. Five RRD Teams were formed and worked concurrently for eight weeks to validate and refine Ohio’s SACWIS Requirements. Both Ohio’s Systems Requirements Document (SRD) and the federal SACWIS Requirements were utilized as the foundation for this process. All five teams include participation from state and county SMEs with both state and DRC Business Analysts in a leadership role.

The JAD process was convened in August 2004 and is scheduled to run through June 2005. The JAD Sessions elaborate the Use Cases (ex. Worker Creates Intake Referral) developed in the sessions to create the details necessary to develop the software components. The JAD team structure is similar to the RRD Team structure with the addition of development staff.
Conversion

The identification of conversion requirements began with a review of Metro and County legacy system documentation and Ohio SACWIS System Requirements in preparation for analyzing the conversion requirements. In order to fully understand and to identify conversion issues, legacy system data elements are being analyzed by the Metro and County Data Conversion Teams.

County SME’s are providing documentation and information regarding the source systems, as well as common and unique business practices in order to identify gaps in the target system. The conversion teams will work in parallel to analyze the conversion requirements. This involves identifying data requirements unique to each county and an analysis of the legacy system structure and content.

Change Management

The first Ohio SACWIS Partnership Forum was convened in December 2004. The SACWIS Partnership Forum engages both state and county staff as key stakeholders. The Forum includes participants from sixteen counties and PCSAO and meets approximately every six weeks.

Organizational Assessments are being conducted in each of Ohio’s 88 public children services agencies. The purpose of the Organizational Assessment is to develop a mutual understanding of the specific tasks necessary to prepare counties for SACWIS implementation and to identify significant issues and risks that when addressed will help ensure a successful transition to SACWIS. The Organizational Assessment process was piloted in January 2005 and will take approximately four to six months to complete.

Pilot Implementation

Pilot Implementation is designed to expose the system to a representative sample of the State, place the system in a production environment and test the implementation process and procedures by supporting real users in the performance of their actual daily tasks.

The pilot of Ohio’s SACWIS will begin eighteen months after Project initiation and will continue for at least ninety (90) days in a large, non-metro county. Pilot implementation is currently scheduled to take place in February 2006. Pilot Implementation is not a testing effort but an actual implementation. All aspects of the system are expected to be production ready allowing the pilot county to expect the same availability, functionality, deployment and support planned for statewide implementation.

Pilot implementation also provides the first opportunity for county users to utilize the system in their daily work, including the use of converted data. Performance testing and monitoring will also occur as part of the pilot implementation effort. Additionally, implementation support will
be in place, including Helpdesk support.

**Statewide Implementation**

Implementation of Ohio’s SACWIS will be distributed over an eight month period beginning in May 2006 with the successful completion of pilot implementation. There will be one release containing all SACWIS functionality. Implementation will include sixteen (16) waves, twice monthly for eight (8) months. Each wave will include one Metro County or 8 to 12 non-Metro Counties. All County users will transition together. The following items are being taken into consideration during the development of the statewide implementation schedule:

- Training site capacities by location and proximity to county;
- County staff sizes;
- Conversion data parameters, including system-type and data volumes; and,
- County scheduling requirements and other needs identified during planning.

**Training**

To fully train all end-users on Ohio’s SACWIS while minimizing the impact on the counties, a combination of training methodologies will be utilized. End-user training will include CBT, traditional classroom training, and availability of a training database for hands-on practice and job aids. Additionally, classroom training will include incorporation of on-line help, on-line policy documentation and a User Manual.

Training for approximately 4800 end-users will occur “Just-in-Time” with county staff initially participating in preparatory training in their own agency and then receiving two days of formal classroom training during the month SACWIS will be implemented in their agency. Each hands-on training session will include approximately twelve to eighteen (12-18) students and will utilize two instructors.

Utilizing a distributed implementation strategy, utilization of the Regional Training Center classrooms will be maximized. Additionally, it is anticipated that the metropolitan PCSAs training facilities will be utilized, particularly for training larger counties.

Ohio’s SACWIS CBT will utilize a web-based approach. Three hours of CBT training will be available to end-users. The three hours of CBT training will accomplish both Introductory and Job Task CBT training. The Introductory training will provide an overview of Ohio’s SACWIS and will teach basic navigational skills. Experience proves this type of Just-in-Time preparatory training makes classroom training more effective and efficient.

Classroom training will build on the skills provided by the Introductory CBT training. Training materials will incorporate a variety of techniques to address various learning styles. Classroom training includes core training, which all participants are required to attend, along with specific job task exercises in which students do most of their work. Subsequent to
completing core training, workers will complete self-paced exercises that support their most performed job functions. End-users can practice the typical functions presented in class through utilization of the practice training database.

**Project Communications**

The SACWIS Project has established multiple communication vehicles to share and receive information pertaining to the on-going design and development of Ohio’s SACWIS. The Project’s internet site is located at [http://jfs.ohio.gov/sacwis/](http://jfs.ohio.gov/sacwis/) and the Project’s Mailbox address is sacwis@odjfs.state.oh.us.

Storyboards are being developed and posted to the Project’s website to act as communication conduits from the Project to the County. The storyboards have been designed to assist county management staff with the transfer of information and the transition to SACWIS.

Demonstrations of the SACWIS Application have been initiated with eight to twelve demonstrations planned between April and September 2005.

Statewide SACWIS Quarterly Briefings are being initiated in June 2005 to increase communications regarding the development of Ohio’s SACWIS. Each Session will be approximately a half day in length and include a Project Status Update and a System Demonstration. The Briefings will be held on a Quarterly basis at locations throughout the State and are open to all PCSA staff.
VII. CHILD WELFARE WAIVER DEMONSTRATIONS APPROVED UNDER SECTION 1130 OF THE ACT

Ohio’s initial Title IV-E Demonstration Waiver, entitled “ProtectOHIO” was effective October 1, 1997 through September 30, 2002 and continued under bridge extensions until September 30, 2004. On January 7, 2005, a five year extension of the waiver was approved by the U. S. Department of Health and Human Services. The waiver extension was effective retroactive to October 1, 2004 and will continue through September 30, 2009.

Activities Completed

During this reporting period, the following activities were completed:

- Negotiated the new Terms and Conditions for the waiver extension;
- Negotiated agreements with the 14 participating counties;
- Identified goals and practice strategies that agencies will implement during the extension;
- Executed contract for the period March-June 2005 for the independent evaluator and initiated work for the new contract for the period July 2005-June 2007;
- Held Consortium and additional meetings in July, August, September, November 2004 and January, March and May 2005; and,
- Submitted Fiscal and Placement Day Reports, the Semi-Annual Report for the period June-November 2004, the Initial Design and Implementation Report and the Evaluation Plan to HHS.

ProtectOHIO Consortium

The Consortium has and continues to be a very important component of the project. It consists of agency directors and/or upper level administrative staff of the 14 counties participating in the waiver, ODJFS staff and members of the evaluation team. In addition to the above participants, a staff person from The Ohio Public Children Services Association has and will continue to participate on the Consortium.

Meetings are county driven and are usually facilitated by one of the county agency directors. The meetings continue to provide an opportunity for the demonstration counties to share information and provide support, guidance and encouragement to each other.

Budget Neutrality/Internal Savings

For the 12 months ending March 31, 2005, the demonstration group experienced a placement day usage rate of -0.83%. The cost neutrality control group experienced a usage rate of -2.23 for the same period. For the 6 months ending March 31, 2005, 10 of the 14 demonstration counties had used fewer placement days than allowed for in their capitation budget. The
demonstration group, as an aggregate, had positive cost neutrality of approximately $1.37 million federal share over the same period.

Evaluation

During this reporting period, the evaluator has participated in Consortium and additional meetings and has been instrumental in assisting the waiver counties to develop the framework and details necessary to implement and evaluate the implementation strategies. To date, no evaluation data is available because the initial months of the waiver extension have been a period of planning. The evaluation plan for the waiver has been submitted to HHS and provides detailed and comprehensive information on all aspects of the evaluation including anticipated completion dates.

Ongoing/Future Activities

The demonstration will continue to operate in the 14 Ohio counties (Ashtabula, Belmont, Clark, Crawford, Fairfield, Franklin, Greene, Hamilton, Lorain, Medina, Muskingum, Portage, Richland and Stark) that participated in the initial five-year project. These counties will continue to use Title IV-E funds flexibly in order to prevent the unnecessary removal of children from their homes and to increase permanency rates for children who are in out-of-home care.

The ODJFS and ProtectOHIO Consortium have selected five distinct “intervention strategies” for focus during the waiver extension. Three of these strategies are identified as core “service components” for the waiver demonstration. They are family team meetings, visitation and kinship supports. These strategies are complimentary and promote the successful implementation of not only Ohio’s Child and Family Services Plan, but the Program Improvement Plan as well. Counties may also spend flexible IV-E funds on other interventions that prevent placement and promote permanency for children in out-of-home care. ODJFS and the Consortium have designated two other interventions, managed care and enhanced mental health and substance abuse services and further all have agreed that all counties will participate in family team meetings and at least one of the other four identified strategies. Below is a chart that depicts the strategies that each county will implement.
**Franklin County Children Services will continue kinship efforts within the agency; however, the agency will not be using the kinship strategy as part of the waiver evaluation.

The instruction to discuss how Title IV-B monies are used to maximize the use of flexible Title IV-E dollars in the demonstration is not applicable to Ohio. The department was granted a flexible waiver and Title IV-E funding is as flexible as Title IV-B funding.
VIII. EVALUATION AND TECHNICAL ASSISTANCE

In order to achieve the established goals, ODJFS needed to implement the Total Quality Management (TQM) strategy. The foundation of the TQM strategy is based upon the use of data to drive decision-making. Data will be used to:

- Evaluate the impact a policy or program has on achieving desired outcomes;
- Monitor and evaluate quantitative performance on achievement of goals and objectives;
- Develop technical assistance strategies;
- Develop policy recommendations;
- Develop alternative courses of action during implementation of the CFSP;
- Guide CPOE quality improvement efforts;
- Evaluate the effectiveness of training; and,
- Evaluate the effectiveness of the ProtectOhio waiver.

Evaluation

Ohio’s CFSR Program Improvement Plan (PIP) was amended March, 2005. The amended PIP contains the following activities ODJFS will be engaged in which are designed to evaluate achievement of: (1) PIP goals and action steps; and (2) CFSP goals and objectives:

- Conduct an evaluation of the Comprehensive Assessment and Planning Model Interim Solution (CAPMIS) to assess the reliability, predictability and validity of CAPMIS. The following areas will be examined: the screening protocol and the component parts of CAPMIS to determine if they are able to predict risk and safety;
- Evaluate whether strategies outlined in the PIP have an impact on: reducing recurrence of child abuse and neglect; reducing the incidence of abuse and neglect in foster care; reducing re-entry of children into foster care; increasing the stability of foster care placements; increasing the number of children reunified with their families; increasing the number of children placed in adoptive homes; and increasing the 24 hour investigation response time;
- Evaluate whether strategies in the PIP have an effect on the case review system;
- Evaluate whether strategies in the PIP have an effect on enhancing accessibility of local supportive services throughout the state; and,
- Evaluate whether strategies in the PIP have an effect on increasing the number of African-American families applying and being approved for adoption.

Technical Assistance

Technical assistance on program, fiscal, or management information system issues is
provided to PCSAs, PCPAs, and PNAs through: (1) on-site consultation by central office and field office staff; (2) through the FACSIS/SACWIS Help Desk; and (3) through the OCF Help Desk. Both Help Desks have an e-mail box where agencies can request the provision of written technical assistance. Technical assistance may be provided as a result of an agency’s request or as a result of ODJFS review of agency performance. Provision of technical assistance is based upon federal and state laws and regulations, state policies, research, and data.

Additionally, the following technical assistance activities outlined in the CFSR PIP will support the goals and objectives contained in the CFSP:

- Provide Process Consultation to two counties that have the greatest adverse impact on overall statewide performance in the areas of: initiation of 24 hour investigations of child abuse and neglect, recurrence of child abuse and neglect, abuse and neglect of children while in foster care, re-entry of children into foster care, stability of foster care placements; and reunification of children with their families;
- Provide technical assistance to counties piloting CAPMIS;
- Provide technical assistance to counties that are not complying with the ICWA Protocol;
- Provide technical assistance sessions to local providers regarding special needs child welfare families who struggle with substance abuse. (ODADAS HB 484 funding); and,
- Provide technical assistance to counties to enhance their ability to use data to drive recruitment efforts.
IX. CHILD ABUSE PREVENTION AND TREATMENT ACT (CAPTA)

CAPTA (CFSP FY2005 - FY2009)

• Creating and improving the use of multidisciplinary teams and interagency protocols to enhance investigations; and improving legal preparation and representation, including - (i) procedures for appealing and responding to appeals of substantiated reports of abuse and neglect; and (ii) provisions for the appointment of an individual appointed to represent a child in judicial proceedings.

Community Evaluation Teams and Citizen Review Boards

Community Evaluation Teams (CETs) have been used to meet the Citizen Review Panel requirement since 1999. From the time the CET project began, ODJFS provided funding via allocations to a minimum of three (3) PCSAs each year, to support the establishment and activities of the teams. It was the intent of the Department to fund each team for a maximum of three (3) years after which time the expectation was that teams would continue to operate under their own momentum. After operating the project in this manner for several years (2000 – 2004), two significant issues became apparent. First, the original teams did not continue to operate with the same level of community involvement after the state funding ended; and second, because the funding had been disbursed through the PCSAs, the teams began looking to the PCSA representatives to facilitate, coordinate and guide team activities.

Prior to issuing allocations to the Scioto, Stark and Marion county CETs for SFY 05, each county was required to submit a project proposal indicating how the team would meet the CAPTA requirements for Citizen Review Panels. Although the plans were feasible and well defined, they agencies still encountered obstacles in linking a review of case records to the process as well as being a monitoring system for their own agency.

In SFY 05, ODJFS initiated a pilot involving the Citizen Review Boards (CRB) from two (2) juvenile courts (Lucas and Montgomery counties). The pilot is intended to inform ODJFS if responsibility for operating a Citizen Review Panel could be transferred from the PCSAs to a CRB, which would address the second issue noted above. CRBs are statutorily established for the purpose of conducting case reviews and are required to have at least one member from the general public on the Board. Other members of the Board are required to have training or experience in the care or placement of children and have training or experience in the fields of medicine, psychology, social work, education or any related field. There are no representatives from the PCSA on the CRB, however, the Boards work closely with the agency and provide feedback on the cases reviewed. Delays in completing the contracting process for the CRB pilot resulted in the pilot period being less than as full year in either county. For
that reason, ODJFS plans to extend the pilot in the two (2) counties for an additional year, and make a program recommendation regarding use of CRBs to fulfill the requirements for Citizen Review Panels at the conclusion of SFY 06.

Highlights from the CETs in Scioto, Stark and Marion counties and the CRBs in Montgomery and Lucas counties are outlined below. Copies of the teams’ semi-annual reports, with the exception on Lucas county, are included in the appendix of this document (See Appendix, Attachment BB). Because implementation of the Lucas County CRB was contract delayed until January 2005, submission of a semi-annual report was not required.

Scioto County Community Evaluation Team
The Scioto County Community Evaluation Team primarily focused on forming a case review team, forming a team to conduct focus groups, reviewing agency policies and OAC rules, and reviewing Scioto County statistical data. The case review team has been identified and outlined specific questions to utilize in the case review process.

The team has identified the strong collaboration among community members attending meetings and developed separate sub-committees to address community specific areas of need as a result. The sup-committees include collaboration with the Portsmouth City Schools and a group to address issues of the adolescent population within the community. A focus group team comprised of Community Evaluation Team members has also been identified with a plan to meet in three communities within Scioto County. These focus group teams will meet with community stakeholders and the public to identify the needs or issues present within those communities.

Stark County Community Evaluation Team
The Stark County Community Evaluation Team has examined two primary issues: effectiveness of parenting class programs and the disproportionate number of African-American children in agency custody versus the population percentage of African-Americans living in the county. The team reviewed and outlined appropriate models of services pertaining to parenting skills education and training programs offered in the county. Their recommendations have had a positive impact on the effectiveness of service delivery in community parenting programs. The team continues to address and review cross cultural issues within Stark County.

The Council on Accreditation (COA) has recognized Stark County Community Evaluation Team for their value as a viable standard of achieving advisory input regarding laws, rules and regulations in providing services to the local community. As a result of their collaboration and review of agency practices and policies, state and federal rules, the Community Evaluation Team has made several recommendations as follows:

Recommendations for Federal policy:
- Home study rules need written more clearly due to the variance among states (related to Interstate Compact requirements).
• Requests for home studies by the receiving state should be completed within 45 days (related to Interstate Compact requirements).

Recommendations for State policy:
• Develop a rule or policy requiring documentation of the reasons why a home study is refused by another county or state, including implementation of a grievance process.
• Lessen the timeframe, currently 12 months, for life books to be completed by an agency.

Recommendations for local (agency) policy/practice:
• Training for school personnel and other social services agencies on life books.
• SCCS needs to improve compliance with OAC 5101:2-39-02(E), regarding advance notice of removal of children from a caregiver’s home and increase family team meetings and group conferences.
• Training with schools on assessing risk to children
• The agency needs to work with the Mental Health Board in collaborating with forming a group providing services to autistic children.
• Semi-annual review hearings need to have all parties in attendance.

Marion County Community Evaluation Team
Marion County has not only increased community member representation within the community evaluation team, but those members are attending regularly and actively participating. This year the team made the decision to combine the agency’s Child Protective Oversight and Evaluation (CPOE) results with case reviews. This has resulted in an improvement of the groups understanding of agency procedures as well as state and federal mandates. The recommendations from the group are targeting the agency’s ability to increase services to families and agency compliance with state mandates.

The community evaluation team also created several surveys, including a survey of employees, clients involved in investigations and clients receiving on-going protective services. The survey of employees was to target employee satisfaction and addressed areas such as leadership, client focus, human resources, process management, service results and strategic planning. A survey of clients involved in on-going protective services cases resulted in an overall satisfaction rating.

The Marion County team has utilized their collaborative effort to create a Birthday Box Program in which local businesses, social groups, churches choose a month and create a Birthday Box for every foster child celebrating birthday within that month. The boxes are personalized with the child’s first name and age and the project has increased community support for the children in foster care.

Montgomery County Citizen Review Board
The Montgomery County Juvenile Court’s Citizen Review Board plays a large role in assisting the court with providing oversight for cases in which a child has been adjudicated abused,
neglected and/or dependent. They have established a process to review individual case
records of each family with a court filed case plan. The Board follows the case through a
series of formal and annual reviews until agency services are terminated. A strong
collaborative effort with the Juvenile Court, Public Children Service Agency and CASA/GAL
participants has resulted. Data reported in the first semi-annual report included:

**Number of Cases reviewed by Case Status:**

- Temporary Custody..............524
- Permanent Custody ............244
- Protective Supervision ..........229
- Other ..................................25

(This is a situation where a child was in Temporary Custody, and then placed in a
relative’s home and Interim Temporary Custody was granted).

**Number of children in custody by the following categories:**

- 0 – 6 months ......................174
- 6 – 12 months ....................268
- 12 months, plus .................823

**List the services most frequently identified as “effective” or resulting in progress on
case plan objectives:**

- Case Management
- Substitute Foster Care
- Diagnostic Services
- Counseling
- Educational Services
- Medical Services

**List the services most frequently identified as “ineffective” or not resulting in
progress on case plan objectives:**

- Counseling
- Substance Abuse Treatment
- Parenting/Psychological Assessment
- Substance Abuse Assessment
- Adoption Services
- Housing

**List the case plan services most frequently planned and not provided**

- Substance Abuse Treatment
- Counseling
- Parenting/Psychological Assessment
- Domestic Violence Education
- Independent Living Skills
- Housing
List the most frequently identified barriers to providing planned services:
- Insufficient Service Quantity
- Client Refusal
- More Monitoring Needed
- Unused
- Further Assessment Needed
- Other

Identify the number and percentage of SAR’s where parents attended:
- Number .................................. 284
- Percentage .............................. 22%

Identify the number and percentage of cases that received monthly face-to-face visits by the caseworker:
- Number .................................. 555
- Percentage .............................. 43%

Lucas County Citizen Review Board
The report from Lucas County Juvenile Court CRB is not due until June 2005, and will provide data on: the length of time a child is in custody; the effectiveness of services; barriers to services; and the frequency of face-to-face monthly visits for court involved cases.

Guardian ad litem and Court Appointed Special Advocate Training
An important standard that will be enacted through Rule of Superintendence is a pre-service training requirement of six hours and three hour in-service instruction annually thereafter. The Supreme Court of Ohio contracted with Ohio CASA/GAL Association to develop a standardized curriculum for the initial six hours, and has contracted with the Ohio Network of Children’s Advocacy Centers (ONCAC) to deliver the instruction state-wide on an ongoing basis. ONCAC was selected because it’s state-wide presence, experience in delivering similar programs, and affiliation with the local Bar through County Prosecuting Attorneys.

Ohio CASA has completed the curriculum and presented it to SCO. ONCAC has established a small review group to address timing issues, and is assembling a pool of qualified instructors. It is expected that the first local sessions will be offered in Summer 2005.

In an effort to balance the needs of children with the realities of practice, the six hour instruction will be available to Ohio’s guardians ad litem significantly in advance of enactment of any training requirement, and in a manner that is geographically accessible and not cost prohibitive. It is expected that all standards will be enacted by some time in 2006.
Improving the case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families.

Family Assessment and Planning Model

After a pilot and evaluation of the Family Assessment and Planning Model, ODJFS reviewed research that showed actuarial risk assessment processes to be effective in identifying children and families at greater risk of repeat maltreatment. Discussions were held in regard to the potential usefulness of adding an actuarial risk assessment to the FAPM. An independent evaluation of the model was conducted by Dr. Mark Testa and based on his recommendation ODJFS, decided to combine the two assessment philosophies. ODJFS and its county partners modified the FAPM to incorporate an actuarial risk assessment tool. The modified FAPM was renamed the Comprehensive Assessment and Planning Model – Interim Solution (CAPMIS). Also, use of a reunification assessment process that focuses on the safety issues that necessitated removal and informs the reunification decision was determined to be a viable process that was considered a critical component of the model.

In addition to revising tools in FAPM, ODJFS has developed two additional tools which are used during the assessment/investigation phase and are being built into SACWIS. The Ongoing Case Assessment/Investigation tool was designed to address the assessment and documentation of information regarding an open case. A Specialized Assessment tool was designed to document information relative to an out-of-home placement assessment/investigation.

A pilot of the newly created CAPMIS along with the screening protocol began in May 2005. The inclusion of the actuarial risk assessment and risk re-assessment processes should provide workers with more efficient and effective approaches for identifying and serving children and families at higher risk of repeat maltreatment and assist them in assessing service needs to support reunification decisions and reduce the number of foster care re-entries.

Parent, Child and Caregiver Participation in Case Planning

A work group comprised of ODJFS and county PCSA staff was convened in July, 2004 to revise the case plan and Semiannual Administrative Review tools. Draft revisions to the format of both tools were completed and are in the process of being finalized for inclusion in SACWIS.

The workgroup was also charged with development of a discussion guide to assist caseworkers in engaging families in the case planning process. The guide will be designed for use in the field and contain a summary tool that caseworkers can provide to the family and caregivers to help them link safety and risk assessment concerns to case plan activities. A section on Case Planning was written and added to the CAPMIS Worker Manual (pilot
version) to provide case workers with a “desk reference” for case plan development. The
Department of Heath and Human Services was a valuable resource for this section of the 
manual.

Work on discussion guide, which will include discussion for workers on how to engage the 
family during the case transfer meeting, was halted pending approval of the revised case plan 
format. Activities related to this task will resume during Summer, 2005.

Worker Visits with Parent(s)

To address the issue of outcome-focused worker visits, the work group convened in July 2004 
drafted an outcome based home visit tool that functions primarily as a task list and will be used 
with the family, child and/or caregiver during the actual home visit. The use and purpose of the 
task list tool will be described in the case plan. Essentially, the caseworker will be able to 
break down the larger case plan objectives into the specific activities and tasks that both the 
family members, caseworker and/or service provider(s) are expected to complete prior to the 
next home visit. The tool will be printed on NCR paper, so that both the worker and family 
receive a copy at the time of the home visit. This will also help with tracking assignment and 
completion of activities and help the family see their own progress towards meeting the case 
plan objectives. As a reminder for caseworkers, Ohio Administrative Code (rules) are 
referred within the tool.

Caseload Analysis Initiative

Seven (7) CLA counties continued their implementation of the initiative during SFY 05. Two 
(2) of the seven (7) CLA counties also participate in Ohio’s Title IV-E Waiver Demonstration 
Project, “ProtectOHIO. The consortium of seven (7) agencies (Athens, Coshocton, Greene, 
Guernsey, Logan, Muskingum, Tuscarawas) comprising the CLA Implementation Leadership 
Forum (ILF) continued to function as a collective in the development and implementation of 
agreed upon practice standards and methodologies. Two (2) other CLA counties (Jefferson 
and Butler) are continuing to implement CLA on an individual, county specific basis, but are no 
longer active with the ILF.

The ILF continued to develop and refine standards for Family Group Conferencing, Case Plan 
Evaluation, Concurrent Planning, Semi-Annual Case Review and Workload Management 
which includes Classification of Family Needs and Level of Service. Although the degree to 
which all seven (7) public children services agencies (PCSAs) have implemented the practice 
standards varies, there remains a shared consensus in regards to the eventual implementation 
of all CLA standards and processes.

The past year also brought major changes to the initiative. ILF presented the CLA Concurrent 
Planning model to the ODJFS and Lorrie Lutz, consultant from the National Resource Center
for Foster Care and Permanency Planning. Ms. Lutz' response indicated that the model was comprehensive and she recommended that components of it be taken into consideration when ODJFS begins developing a state model for Concurrent Planning.

The ILF agencies report the CLA initiative has assisted them in “raising the bar regarding their practice. Of the counties that tracked placement data, they report a reduction in the number of children entering substitute care, a reduction in the number of days children remain in substitute care and an increase in the number of children placed with relatives and kin. Given the benefits the CLA initiative has brought to the ILF counties, the PCSAs that will continue their involvement in the ILF plan to present the CLA model at the PCSAO Conference in September 2005, in an effort to engage other Ohio PCSAs, and expand participation in the initiative.

- Enhancing the general child protective services system by developing, improving and implementing risk and safety assessment tools and protocols.

Safety and Risk Assessment Protocols

The pilot evaluation of FAPM was completed in June 2004 and focused on the following outcomes: repeat maltreatment; number of children in out-of-home care; number of children entering care during the pilot period; and number of children re-entering foster care. Repeat maltreatment data showed a drop in the 3rd and 4th Quarters in 2003 as compared to the same time period in 2004 for Greene, Hancock and Muskingum counties. There was a similar decline in Lorain for the 4th Quarter 2003 compared to the same quarter in 2004. The number of foster care re-entries during the pilot was too few to provide a valid sample. The combined total for Green, Hancock and Muskingum counties in the 3rd and 4th Quarters 2002 and 2003 was only 18 re-entries. Lorain had no reported re-entries in the 4th Quarter 2002 and 2003.

An independent evaluation of the model was conducted by Dr. Mark Testa and based on his recommendation, ODJFS decided to combine the two assessment philosophies. The modified FAPM was renamed the Comprehensive Assessment and Planning Model–Interim Solution (CAPMIS). A pilot of the newly created CAPMIS along with the inclusion of a screening protocol began in May 2005 and will run for a full year. An evaluation of CAPMIS will be conducted by The Ohio State University.
Quality Assurance Tools for Safety and Risk Assessment

The CLA initiative has developed risk assessment quality tools designed to improve the quality of risk assessments being completed by line staff. Through the use of the quality rating tool and accompanying software, CLA agencies are able to identify the most problematic areas of risk assessment and tailor training sessions to meet the needs of specific units and/or individuals. The quality assurance system developed in this model will be adapted for the pilot of the CAPMIS tools, and will be included in the safety and risk protocols that will be implemented statewide in 2006. ODJFS will continue to provide technical assistance to the four CAPMIS pilot agencies for the duration of the pilot.

Child Welfare Program and Policy Development

CAPTA funds were used to expand staff resources in the child protective services (CPS) program. Three (3) CPS staff were added during FY 05. Staffs’ responsibilities included, but were not limited to: implementation of the PIP activities; CAPMIS development and pilot implementation activities; development of a screening protocol and guidelines for inclusion in the CAPMIS pilot; review and revision of statewide policy pertaining to investigation/assessments, case planning and provision of supportive services; support of SACWIS development, CET and CLA program initiatives; review of Child Protection Oversight and Evaluation report information; and child abuse and neglect prevention activities.

CAPTA funds were also used this past year to assist the Ohio Department of Health (ODH) with the implementation of the CAPTA requirement that all children under age three (3) involved in a substantiated report of child abuse or neglect be referred to early intervention services. In Ohio, early intervention services are offered through the Help Me Grow (HMG) program. ODJFS entered into an Inter-agency Agreement with ODH making Basic State Grant funds available to cover the costs of developmental evaluations for children referred to HMG as a result of being involved in a substantiated child abuse or neglect report.

- Developing and delivering information to educate the public on the role and responsibilities of the child protection system and the nature and basis for reporting suspected incidents of child abuse and neglect.

Child Abuse and Neglect Publications

ODJFS publishes three booklets pertaining to child abuse and neglect to be used for education and training purposes with a variety of audiences. The Child Abuse and Neglect Manual for the Community provides the general public with information about defining, preventing, identifying and reporting child abuse and neglect and is in the process of being updated to include the latest information regarding child welfare practice in Ohio. It will be
published and available in the summer 2005. The other two booklets, Child Abuse and Neglect for Educators and Child Abuse and Neglect for Medical Professionals, continue to be available to those targeted audiences.

• Developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level.

Community Evaluation Teams

Community Evaluation Teams (CETs) have been used to meet the Citizen Review Panel requirement since 1999. From the time the CET project began, ODJFS provided funding via allocations to a minimum of three (3) PCSAs each year, to support the establishment and activities of the teams. Allocations to the CETs in Scioto, Stark and Marion counties were issued SFY 2005. Each team established a process to review internal policies, and state and federal requirements. Formation of the teams included community stakeholders and strong partnerships have developed as a result.

The Scioto County Community Evaluation Team primarily focused on forming a case review team, forming a team to conduct focus groups, reviewing agency policies and OAC rules, and reviewing Scioto County statistical data. The case review team has been identified and outlined specific questions to utilize in the case review process.

The Stark County Community Evaluation Team has examined two primary issues: parenting class effectiveness programs and the disproportional number of African-American children in agency custody versus the population percentage of African-Americans living in the county.

The Marion County Community Evaluation Team has not only increased community member representation within the community evaluation team, but those members are attending regularly and actively participating. This year the team made the decision to combine the agency’s Child Protective Oversight and Evaluation (CPOE) results with case reviews. This has resulted in an improvement of the groups understanding of agency procedures as well as state and federal mandates. The recommendations from the group are targeting the agency’s ability to increase services to families and agency compliance with state mandates.

Additional highlights of the teams’ activities and accomplishments can be found in copies of the teams’ reports included in the appendix of this document (See Appendix, Attachment HH).

• Supporting and enhancing collaboration among public health agencies, the child protection system, and private community-based programs to provide child abuse and neglect prevention and treatment services (including linkages with education systems) and to address the health needs, including mental health needs, of
children identified as abused or neglected, including supporting prompt, comprehensive health and developmental evaluations for children who are subject of substantiated child maltreatment reports.

Develop, strengthen and support child abuse and neglect prevention, treatment and research programs in the public and private sectors.

The 2005 Annual Child Abuse and Neglect Prevention Month campaign included the collaboration of Prevention Partners Leadership Group members, Public Children Services Association of Ohio and ODJFS in identifying the educational items that would be distributed to the 88 PCSAs. This year, ODJFS took a new approach to support local efforts aimed at increasing awareness and prevention of child abuse and neglect.

ODJFS purchased and distributed the blue ribbon lapel pins, as they continue to be utilized and recognized in the community as the symbol of child abuse and neglect awareness and prevention activities. In addition to the blue ribbon lapel pins, ODJFS purchased and distributed a radio public service announcement formatted to allow each county to include their community-specific contact information. This will support the idea that child abuse and neglect awareness and prevention campaigns should continue throughout the year. ODJFS also provided a $2,000.00 allocation to each PCSA to be utilized for community activities during Child Abuse and Neglect Prevention Month.
Creating and improving the use of multidisciplinary teams and interagency protocols to enhance investigations; and improving legal preparation and representation, including - (i) procedures for appealing and responding to appeals of substantiated reports of abuse and neglect; and (ii) provisions for the appointment of an individual appointed to represent a child in judicial proceedings.

Ohio Network of Children’s Advocacy Centers

Child advocacy centers are an established and highly effective approach to providing coordinated, skilled services to abused and neglected children and their families. Ohio has, for a variety of reasons, moved slowly in the establishment of this valuable resource. Partly, this can be attributed to Ohio’s county administered child welfare system and the lack of an organized state effort to support and promote development. A state association and central office has an exponentially effective impact on addressing Ohio’s lag behind other states in the nation; for this reason, ODJFS supports the state professional membership organization for Ohio’s child advocacy centers, the Ohio Network of Children’s Advocacy Centers.

CAPTA funds will be used to:

- Provide technical assistance and support to existing and developing CAC, as well as to communities interested in exploring the establishment of a CAC;
- Develop and administer a state-wide training and education system for CAC;
- Promote the development and implementation of a state-wide uniform data collection and case management system;
- Maintain and deliver a standardized forensic interviewing program; and,
- Provide a range of membership services such as legislative monitoring, technical assistance, and information-sharing.

The most significant outcome from this activity will be the expansion of Ohio’s system of CAC. The Ohio Network of Children’s Advocacy Centers uses the National Children’s Alliance standards for membership and accreditation. It is anticipated that the Network’s efforts will result each fiscal year in:

- two children’s advocacy centers becoming accredited;
- two centers moving to associate membership status; and,
- three communities initiating program development.

Guardian ad litem and Court Appointed Special Advocate Training

Ensuring adequate representation of the best interests of children in court because of child abuse and neglect allegations is an ongoing priority of ODJFS. Over the past years, a pool of
Basic State Grant and Children’s Justice Act grant funds has been used to promote the development of Court Appointed Special Advocate (CASA) programs in Ohio’s court jurisdictions. Ohio CASA/GAL Association has established and implemented program standards as well as a volunteer curriculum with 30 hours required pre-service training. In addition, active CASA volunteers must take a minimum of 12 hours annual in-service instruction.

As noted in Ohio’s five (5) year plan submitted in 2004, CAPTA funds are being allocated each year to support the ongoing training program being developed for attorney guardians \textit{ad litem}.

ODJFS will continue to allocate CAPTA funds annually to support:

- The CASA/GAL Association’s state-wide conference and local programs’ pre- and in-service training; and,
- Activities for development and implementation of a training system for attorneys serving as guardians \textit{ad litem} for Ohio’s abused and neglected children as outlined in the CSFP for 2005 – 2009.

**Ohio’s Telemedicine / P-SANE Program**

This project will build upon the Ohio’s pilot Pediatric-Sexual Assault Examination and Telemedicine Program (P-SANE), designed to ensure that all children alleged to be sexually abused received skilled medical examinations regardless of their county of residence. It is designed to deliver training and resources to medically underserved communities. This new facet of program development to be funded under Ohio’s Basic State Grant reflects a maturing of the program. Over the two (2) completed cycles of program activity, program strengths and weaknesses have been identified. The deliverables below are time tested or responsive to end user requests. Specific activities that have been difficult to deliver have been reduced and other activities which have proven to be both effective and popular have been expanded. The bullets below highlight these changes.

- Continuing education is now critically important because some of the nurses were trained four (4) years ago and the program is utilizing more physician experts than before. Therefore, more internet based training sessions have been incorporated into the project because they have been very well attended, are inexpensive and are very responsive to student needs. The participating physicians will also be able to offer more rapid case review and second opinions because of the more frequent conference schedule.
- Video conferencing technology is being used to provide advanced clinical training to nurses who otherwise could not obtain effective clinical training. Ohio may be the first state to utilize IP-based HIPAA compliant video phones to provide instruction and guidance in this manner. This technology will:
  o Allow P-SANE RNs to work in a clinical setting after fewer hours of clinical training compared to P-SANE RNs without video conferencing backup;
Allow clinical training of P-SANEs operating in counties geographically distant from centers utilizing experienced RNs and MDs; and,

- Provide supervising MDs and RNs an effective tool to measure competency and quality of care.

- The base of trained P-SANEs in Ohio is now substantial and there is a need for more frequent communication and networking. Therefore, the following activities have been into this project:
  - A quarterly newsletter; and,
  - An annual two (2) day P-SANE conference.

Ohio will use FY 06 Basic State Grant funds to:

- Provide two (2), four (4) day trainings at the Mayerson Center for Ohio Pediatric Sexual Assault Nurses;

- Provide advanced clinical – “hands on” training at the Mayerson Center for an Ohio Pediatric Sexual Assault Nurse who has completed the didactic SANE course;

- Provide video IP based guided exams between the Mayerson Center staff and Remote P-SANE Sites throughout Ohio;

- Provide 12 Internet-based learning sessions and case expert review sessions for all remote sites using WebEX, an internet meeting conference facility;

- Provide post-implementation support to all remote sites including operational help, technical assistance, competency evaluations and program enhancements;

- Secure telemedicine and computer software required to support the project deliverables. Sites require a colposcope with camera and software to enable telemedicine communication and video conferencing equipment;

- Write and distribute a quarterly newsletter to all P-SANEs and P-SANE program personnel that contains: program updates, clinical updates, clinical “pearls”, technology tips, new program opportunities, local success stories from P-SANE programs and a schedule of upcoming training sessions and opportunities;

- Sponsor, plan and implement a two (2) day statewide conference for P-SANE; and,

- Provide a year end report.

- Improving the case management, including ongoing case monitoring, and delivery of services and treatment provided to children and their families.
Comprehensive Assessment and Planning Model – Interim Solution (CAPMIS)

CAPTA funds will be allocated to support the CAPMIS pilot evaluation. ODJFS is in the process of negotiating with the Ohio State University to conduct the evaluation, which will include two (2) components. An interim evaluation will be completed after the initial six (6) months of the pilot (May through November 2005). Information from that will be used to identify any “critical flaws” in the model that should be corrected prior to statewide roll-out which will occur concurrently with SACWIS implementation. An evaluation of the full pilot (May 2005 through May 2006) will be conducted following the conclusion of the pilot with a final report due in Summer 2006.

Parent, Child and Caregiver Participation in Case Planning

The discussion guide being developed by a work group comprised of state and county staff will be designed to assist caseworkers in engaging families in the case planning process. The guide will be designed for use in the field and contain a summary tool that caseworkers can provide to the family and caregivers to help them link safety and risk assessment concerns to case plan activities.

The guide is scheduled to be completed in Summer 2005 with statewide meeting to provide overviews on the material planned for Fall 2005. Basic State Grant funds will be used for the printing and distribution of the guides once completed.

Worker Visits with Parent(s)

The work group convened in July, 2004 drafted an outcome based home visit tool that functions primarily as a task list and will be used with the family, child and/or caregiver during the actual home visit. The tool, which will be printed on NCR paper so that both the worker and family receive a copy at the time of the home visit, will allow the caseworker to break down the larger case plan objectives into specific activities and tasks that both the family members, caseworker and/or service provider(s) are expected to complete prior to the next home visit.

Printing and distribution of these NCR tools will be paid for through Basic State Grant funds.

- Enhancing the general child protective services system by developing, improving and implementing risk and safety assessment tools and protocols.

Safety and Risk Assessment Protocols

An independent evaluation of the Family Assessment and Planning Model (FAPM) that was piloted from 2003 – 2004 was conducted by Dr. Mark Testa. Based on his recommendation,
ODJFS combined the clinical and actuarial risk assessment philosophies to create a new Family Assessment, and the FAPM was renamed the Comprehensive Assessment and Planning Model–Interim Solution (CAPMIS). Very few, non-substantive changes were made to the safety assessment contained within the model.

CAPTA funds will be allocated to support the CAPMIS pilot evaluation. ODJFS is in the process of negotiating with the Ohio State University to conduct the evaluation, which will include two (2) components. An interim evaluation will be completed after the initial six (6) months of the pilot (May through November 2005). Information from that will be used to identify any “critical flaws” in the model that should be corrected prior to statewide roll-out which will occur concurrently with SACWIS implementation. An evaluation of the full pilot (May 2005 through May 2006) will be conducted following the conclusion of the pilot with a final report due in summer 2006.

Child Welfare Program and Policy Development

CAPTA funds will continue to be used for current and expanded staff resources in the child protective services (CPS) program. CPS staff are responsible for implementation of the PIP activities; the CAPMIS development, pilot, statewide implementation training and related activities; policy support for SACWIS development, training and implementation; review, revision and training of statewide policy; ongoing technical assistance to counties related to rules; support of key program initiatives (e.g., CLA and CET); review of Child Protection Oversight and Evaluation report information; and child abuse and neglect prevention activities. Basic State Grant funds will also be allocated for CPS staff to attend meetings, training workshops and conferences on child protective services practice initiatives and projects.

- Developing and delivering information to educate the public on the role and responsibilities of the child protection system and the nature and basis for reporting suspected incidents of child abuse and neglect.

Child Abuse and Neglect Publications

ODJFS will continue to publish the three booklets pertaining to child abuse and neglect used for education and training purposes with a variety of audiences – the community, educators and medical professionals. Each book provides information about defining, preventing, identifying and reporting child abuse and neglect pertinent to the needs and understanding of its targeted audience. All of the books include the latest information regarding child welfare practice in Ohio.

- Developing and enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals to prevent and treat child abuse and neglect at the neighborhood level.
Community Evaluation Teams

Community Evaluation Teams (CETs) have been used to meet the Citizen Review Panel requirement since 1999. From the time the CET project began, ODJFS provided funding via allocations to a minimum of three (3) PCSAs each year, to support the establishment and activities of the teams. In FY 2005, ODJFS also contracted with two (2) Citizen Review Boards operated by county juvenile courts as a pilot project to explore whether CRBs could be used to fulfill the CAPTA requirements for Citizen Review Panels.

Basic State Grant funds will be used in FY 06 to provide allocations to the Scioto, Stark and Marion CETs and to support the pilot project with Lucas and Montgomery County Juvenile Court CRBs.

- Supporting and enhancing collaboration among public health agencies, the child protection system, and private community-based programs to provide child abuse and neglect prevention and treatment services (including linkages with education systems) and to address the health needs, including mental health needs, of children identified as abused or neglected, including supporting prompt, comprehensive health and developmental evaluations for children who are subject of substantiated child maltreatment reports.

Develop, strengthen and support child abuse and neglect prevention, treatment and research programs in the public and private sectors

ODJFS will continue to look for ways to support ongoing child abuse and neglect awareness and prevention campaigns involving the public and private sectors. CPS program staff will continue their participation on the Prevention Partners Leadership Group, and Basic State Grant funds will continue to be used to support both local and statewide prevention campaigns and activities.
## OHIO COMPREHENSIVE CHILD AND FAMILY SERVICE PLAN

**FY 2005 - 2009**

### CAPTA/BASIC STATE GRANT BUDGET

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*To the extent that total costs are higher than the award, they will be charged to surplus grant balances from previous awards.*
X. CHAFEE FOSTER CARE INDEPENDENCE PROGRAM (CFCIP) AND EDUCATION AND TRAINING VOUCHERS (ETV) PROGRAM

ACTIVITIES AND SERVICES PROVIDED

ODJFS is the state agency that administers, supervises, and oversees the programs carried out under the Chafee Foster Care Independence Program (CFCIP) and Education and Training Vouchers (ETV) program plan. ODJFS is the single Ohio agency administering the Title IV-E program and administers the CFCIP under Section 477 of the Social Security Act. Ohio is a state-supervised, county-administered system where service provision is carried out by 88 county public children services agencies (PCSAs). ODJFS staff supervises and provides technical assistance to the local Independent Living (IL) programs administered by these PCSAs.

The structure of individual IL programs is not overtly prescribed by ODJFS, so there is diversity among the 88 counties with regard to the components of their programs. Under current OAC rules (5101:2-42-19, 5101:2-39-09, and 5101:2-39-11), PCSAs and PCPAs must, within the case plan, identify the programs and life skill services that will be provided to assist the child in preparation for transition from substitute care to independent living. While each of Ohio’s local PCSAs must evaluate the need for, and provide the commensurate life skill services to youth in their custody and to those emancipated from their custody, the structure of the local agency’s independent living (IL) program is not regulated by ODJFS. In broad measure, ODJFS requires PCSAs and private agencies holding custody (private child placing agencies - PCPAs) to make available services to youth who are likely to remain in foster care until age 18, or who have emancipated from care.

Local discretion and individual assessments and evaluations of youth aid in determining which youth under 16 are likely to remain in foster care until age 18, and when to begin assessing and providing services for them. In working with PCSAs, ODJFS staff has identified several factors such as age, presenting problems, case history, and case plans/goals as items to be examined when determining if a youth is likely to remain in foster care until 18. Agencies are responsible for conducting a life-skills assessment for each youth in substitute care who has attained the age of 16 or whom the agency feels is ready to receive IL services. The assessment establishes the need for certain services, and is based on an objective tool completed by the youth (or on the youth’s behalf), with documented input from the youth, his/her caregiver, and the case manager. The assessment is to be completed no later than 90 days after the youth turns sixteen years old or 90 days from entering into agency custody. For emancipated young adults, agencies are directed to develop a mutually agreed upon written plan for the provision of services identified as being needed based on an evaluation of the young adult’s strengths
and needs. This plan is to outline the responsibility of the young adult and the agency, and is signed by the young adult and a representative of the agency as an indication that the young adult will take personal responsibility for achieving independence.

OAC allows for caseworkers to use concurrent planning and family group conferencing when they are working with families. This allows for the worker, the youth, and the youth’s family to make decisions as a group. Permanency can be best achieved if all parties involved understand that the decisions made are in the youth’s best interest. Therefore concurrent planning is encouraged for all youth in care so that should parental rights be terminated, each youth will have the opportunity for stability and permanence.

OAC also requires the training of foster families and agency workers on the areas of independent living issues. For those families who work with youth transitioning to adulthood, OAC rules require that training be provided relative to the needs and issues of such youth. ODJFS recognizes that working with youth in care is different than working with children under the age of 16. Therefore, foster parents and workers have continuously been trained on how to address the specific issues of adolescents, and how to function as mentors and teachers for youth transitioning to adulthood. Treatment foster homes, which only accept children and youth with a very high level of need, have also been equipped to address transition issues.

PCSAs are encouraged to coordinate with other child and family serving agencies, within and among counties, to develop service systems that meet the needs of youth in care. Many county agencies have developed formal protocols related to service provision for youth in care and those returning after emancipation. For example, some PCSAs and their local Workforce Investment Act (WIA) boards have forged strong communication links that enable them to work together in assisting youth. At the state level, ODJFS and WIA staff provides assistance to local agencies in the development of service plans for young people.

Pursuant to Ohio Administrative Code (OAC) rules, PCSAs and PCPAs are required to provide services such as:

- outreach, individual and group counseling;
- education and vocational training (i.e., preparation for a General Equivalency Diploma (GED), or for higher education, job readiness, job search assistance and placement programs); counseling and instruction in basic living skills, parenting, health care (e.g., preventative health care, substance abuse prevention, family planning, etc.);
- access to community resources;
- transportation;
- housing options (and optional “room and board” assistance for emancipated youth up to age 21);
- counseling and training on such subjects as self-esteem and self-confidence, interpersonal and social skills training and development;
• matching each youth with an adult/peer who can serve as an advocate, resource, and mentor in daily living skills;
• culture and gender specific activities; and,
• school dropout prevention programs.

Based on the goals listed in Ohio’s 2005 – 2009 CFCIP Plan, the following is a description of the services that youth and young adults aged 18-21 received during the past year.

GOAL:  Helping Youth Make the Transition To Self-Sufficiency

• PCSAs provided a differential assessment/evaluation method, which identifies independent living skill deficits in youth, or utilized pre- and post-test assessment tools to measure the skill attainment level of youth. Ohio Administrative Code rules direct agencies to provide these assessments for youth that are likely to remain in care until the age of 18. Services are then provided based on the outcome of the assessments.

• Independent living services continued to be integrated into agency case plan documents. For emancipated young adults, written agreements were drawn up between the young adult and the agency to assure that both parties were working toward helping the youth become self-sufficient. Ohio Administrative Code rules require that IL services be coordinated with other services that directly impact a youth’s case plan or a young adult’s plan for self-sufficiency. This integration of services has included the youth’s parent or guardian, the substitute caregiver, and various inter-disciplinary service providers.

• Hands-on experience through supervised living arrangements was provided to develop and enhance the adult living skill levels of participating youth, including those who completed a transitional living experience and those who participated in either a summer emancipation camp experience or a youth retreat. Group training programs helped eligible youth acquire skills needed for independent living.

• Computer-assisted IL skills instruction, courses on homemaker services to teach and implement effective home management skills, and laboratory experiences where youth had a daily agenda of activities to accomplish, including employment and housing searches were provided by various public and private agencies.

• In regards to emancipated youth, OAC rules make it the responsibility of the agency that the youth emancipated from to provide services. In those cases where a young adult has emancipated and moved to another county, the county where the youth emancipated is still responsible. ODJFS currently provides technical assistance regarding agency collaboration and service provision in these instances. County PCSAs work with each other to ensure that the young adult receives services.

• PCSAs worked to recruit specialized foster homes, offering training to prepare foster caregivers to become independent living foster caregivers.
GOAL: Helping Youth Receive The Education, Training And Services Necessary To Obtain Employment And/Or Prepare For And Enter Post-Secondary Training And Educational Institutions

Youth and young adults were assisted by PCSA staff in completing high school, receiving their GED, or completing vocational school. Tutors in remedial education and/or computer-assisted programs provided assistance. PCSAs also assisted youth in continuing their education or obtaining job training by participating in career and vocational programs that helped identify and set personal goals. Because the majority of Ohio’s counties are rural in nature, the regionalization of services is encouraged so that barriers such as unavailability or inaccessibility of services can be decreased. PCSAs are encouraged to work together to develop service systems that will meet the needs of youth in care. An example of this collaboration can be found between the PCSA and the local Workforce Investment Act (WIA) boards. Strong working relationships have been developed between these entities in many counties. Also, ODJFS and WIA state staff have begun providing assistance to local agencies on how they can best work together and develop good service plans for youth in care and for youth who have recently emancipated. This will continue over time as needed by local agencies.

In addition to assistance with the attainment of a diploma or GED, ODJFS has been working to assist youth who wish to continue their education after high school. Under the federal Education and Training Voucher Program (ETV), ODJFS has contracted with the Orphan Foundation of America (OFA) to administer a program assisting young adults in obtaining post secondary education and training. Under the contract, the foundation’s responsibilities include the following:

- Verifying the eligibility of participants and institutions;
- Processing applications for ETVs;
- Issuing vouchers in accordance with the guidelines of federal law;
- Monitoring and supporting student progress;
- Utilizing volunteers to provide adjunct services to students;
- Providing regular program reports to ODJFS staff; and,
- Monitoring and reporting on the intended outcomes of the program.

The foundation developed a website (www.statevoucher.org) and implements community awareness and outreach programs directed toward soliciting qualified applications. During the past year, OFA has provided services that can be broken down into the following ratios:
GOAL: Providing Personal and Emotional Support to Youth through Mentors and the Promotion of Interactions with Dedicated Adults

All youth and returning young adults received individual and/or group counseling. PCSAs are responsible for the provision of case management services to all participating youth during and after group training sessions. PCSAs provided, or made arrangements for, counseling and/or therapy services for those youth who experienced emotional difficulties.

PCSAs provided program components where youth and their parents improved their relationships during the transition from substitute care to returning home or moving into an independent living situation. Participants and caregivers were also provided with other services and assistance designed to improve a teen's transition to independent living such as:

- the provision of group training experiences for parents/caregivers preparing the youth for independent living;
- training of professional therapy/social service staff and direct caregivers in effective and engaging methods to teach youth necessary independent living skills; and,
- mentoring programs within foster care, including recruitment and development of mentor foster care givers and alternative interdependent living arrangements for appropriate youth.

GOAL: Providing Financial, Housing, Counseling, Employment, Education and other Appropriate Support and Services to Former Foster Care Recipients Between 18 and 21 Years of Age
Eligibility for services is addressed in OAC rules and agencies are directed to, when requested, provide a range of services and support for former foster care recipients who emancipated from the agency’s custody due to attaining age 18. The agency is required to evaluate the current needs of the young adult to determine the range of services to be provided. Services and support are to complement the young adult’s own efforts to achieve self-sufficiency, and are to be provided as needed up to their 21st birthday. Agencies are directed to develop a mutually agreed upon written plan for the provision of services, and are to coordinate services with community resources as available. The option of providing room and board has been passed on to PCSAs to utilize at their discretion.

In Ohio, assistance with room and board is defined as including, but not limited to; assistance with rent, initial rent deposit, utilities, and utility deposits for youth ages 18 - 21. Ohio allows PCSAs to use no more than 30% of their IL allocations for assistance with room and board. This option has been exercised by PCSAs based on the needs of the young people they serve; yet, many counties opt not to use funds for this purpose because of the need to use all of their allocation for other services. Some counties have established programming where they provide “seed money” from these funds to get a young person on their feet and set up in their own household. Many PCSAs provided assistance with rent and utility deposits/payments, and the purchase of groceries and household items. Assistance was also provided in negotiating with landlords for manageable rent payments and safe living conditions. OAC rules state specifically that under no circumstances shall the PCSA use any of its independent living allocation for room and board for youth under the age of 18 or beyond the young adult’s 21st birthday.

PURPOSE FOR WHICH FUNDS WERE EXPENDED

Ohio passed through 100 percent of its base allocation to the local PCSAs. The remainder was used for administration and discretionary programs. The ODJFS Office of Fiscal Services, Reports and Statistics Section continues to utilize a quarterly statistical form which all 88 county agencies complete. This form allows IL staff to collect data on the number of youth who are being served and the cost connected for the services.
STATISTICS REGARDING YOUTH SERVED

The information below reflects the number of youth in Ohio served by the CFCIP and Ohio’s IL program in FFY 2004.¹

<table>
<thead>
<tr>
<th>AGE</th>
<th>KIDS RECEIVING IL SERVICES</th>
<th>FFY '04</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>1353</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>1533</td>
<td></td>
</tr>
<tr>
<td>17</td>
<td>1487</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>451</td>
<td></td>
</tr>
<tr>
<td>19</td>
<td>122</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>21+</td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>TOTAL</td>
<td>5018</td>
<td></td>
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</tbody>
</table>

Figure 1

¹This information is based on Family and Children Services Information System (FACSIS) data.
**GENDER (Figure 2)**

<table>
<thead>
<tr>
<th></th>
<th>FFY ’04</th>
</tr>
</thead>
<tbody>
<tr>
<td>FEMALE</td>
<td>2439</td>
</tr>
<tr>
<td>MALE</td>
<td>2579</td>
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</table>

**RACE (Figure 3)**

<table>
<thead>
<tr>
<th></th>
<th>FFY ’04</th>
</tr>
</thead>
<tbody>
<tr>
<td>WHITE</td>
<td>2641</td>
</tr>
<tr>
<td>AFRICAN AMERICAN</td>
<td>2312</td>
</tr>
<tr>
<td>AMERICAN INDIAN/ALASKAN</td>
<td>20</td>
</tr>
<tr>
<td>OTHER</td>
<td>31</td>
</tr>
<tr>
<td>MISSING DATA</td>
<td>14</td>
</tr>
</tbody>
</table>
Figure 3

<table>
<thead>
<tr>
<th>LIVING ARRANGEMENT BY TYPE (Figure 4)</th>
<th>FFY '04</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADOPT</td>
<td>73</td>
</tr>
<tr>
<td>FOSTER HOME</td>
<td>2635</td>
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<tr>
<td>GROUP HOME</td>
<td>664</td>
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<tr>
<td>INDEPENDENT LIVING</td>
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<tr>
<td>INVALID DATA</td>
<td>15</td>
</tr>
<tr>
<td>OTHER (DETENTION/HOSPITAL OR NURSING HOME)</td>
<td>85</td>
</tr>
<tr>
<td>RELATIVE/KINSHIP HOME</td>
<td>451</td>
</tr>
<tr>
<td>RESIDENTIAL CENTER</td>
<td>965</td>
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Figure 4
LENGTH OF CUSTODY (Figure 5)  

<table>
<thead>
<tr>
<th>Category</th>
<th>FFY '04</th>
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</thead>
<tbody>
<tr>
<td>LESS THAN 6 MONTHS</td>
<td>947</td>
</tr>
<tr>
<td>6 MONTHS – 1 YEAR</td>
<td>695</td>
</tr>
<tr>
<td>1 – 2 YEARS</td>
<td>847</td>
</tr>
<tr>
<td>2 – 3 YEARS</td>
<td>621</td>
</tr>
<tr>
<td>3 – 4 YEARS</td>
<td>476</td>
</tr>
<tr>
<td>4 – 5 YEARS</td>
<td>323</td>
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<tr>
<td>5 – 7 YEARS</td>
<td>478</td>
</tr>
<tr>
<td>7 – 10 YEARS</td>
<td>379</td>
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<tr>
<td>10 – 12 YEARS</td>
<td>106</td>
</tr>
<tr>
<td>12 – 15 YEARS</td>
<td>98</td>
</tr>
<tr>
<td>15+ YEARS</td>
<td>48</td>
</tr>
<tr>
<td>CUSTODY TYPE</td>
<td>FFY ’04</td>
</tr>
<tr>
<td>-------------------------------------------------</td>
<td>---------</td>
</tr>
<tr>
<td>TEMPORARY CUSTODY</td>
<td>1972</td>
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<tr>
<td>PERMANENT CUSTODY</td>
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<td>PLANNED PERMANENT LIVING ARRANGEMENT</td>
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<tr>
<td>COURT</td>
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<tr>
<td>OTHER</td>
<td>5</td>
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</tbody>
</table>

Figure 6
<table>
<thead>
<tr>
<th>IV-E FCM OR AA ELIGIBLE?</th>
<th>FFY '04</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>3357</td>
</tr>
<tr>
<td>NO</td>
<td>1661</td>
</tr>
</tbody>
</table>

Figure 7