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**PERIOD III
MONITORING REPORT**

Kenny A. v Perdue

January 1, 2007 to June 30, 2007

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Part I INTRODUCTION

Background, Purpose, Scope, and Organization of Report

This is the third report prepared by the Accountability Agents for the *Kenny A. v Perdue* Consent Decree to review the State Defendant's progress between January 1 and June 30, 2007 in achieving improved child welfare outcomes and in meeting its other obligations under the Consent Decree. The *Kenny A. v Perdue* Consent Decree established James T. Dimas and Sarah A. Morrison as independent Accountability Agents with responsibility to produce public reports every six months. This introduction is intended to provide a brief overview of the *Kenny A.* Consent Decree and the Accountability Agent's methods of assessing the State's performance, as well as the scope and organization of this report.

A. The Kenny A. v Perdue Consent Decree

Under the terms and conditions of the *Kenny A.* Consent Decree, the State is to achieve 31 outcomes as well as maintain certain practice standards with respect to the children in the custody of the DeKalb and Fulton County Departments of Family and Children Services (DFCS). These practice standards relate to needs assessment, service planning, placement experience, health care, investigation of maltreatment allegations concerning children in foster care, and court reviews and reporting. Some are new requirements for administrators and case managers and others are existing agency policy and practice requirements receiving heightened attention. In addition, the Consent Decree stipulates various infrastructure requirements for the State and Counties. These stipulations relate to automation, caseload sizes, training, supervision of private providers, foster parent licensing and support, and financing.

For purposes of analysis and reporting, the outcomes have been organized into seven thematic groupings. Exhibit I-1 displays these groupings.

B. Methodology

Several sources of information and data collection methods have been employed to produce the analysis presented in this report. Appendix B has a full description of the methodology. In brief, information was obtained from State automated systems, county monitoring and reporting systems, interviews with state and county staff, and case record reviews. The Accountability Agents verified State and county reported data except where otherwise noted in the report. Three separate record reviews were conducted using staff from the DFCS Evaluation and Reporting Unit. Quality assurance oversight of the record reviews was provided by the Accountability Agents and by Georgia State University. The record reviews included files of 180 children in foster care; 93 maltreatment in care investigations completed during the reporting period; and 159 foster homes, those supervised by private agencies as well as DFCS.

EXHIBIT I-1:
Thematic Grouping of Kenny A Outcomes

Safety

1. *Children in Foster Care are Safe from Maltreatment*

- Consent Decree Outcomes 1, 2, and 3 related to investigations of maltreatment in care.
- Consent Decree Outcomes 5 and 6 related to the incidents of substantiated maltreatment in care and corporal punishment.

Permanency

2. *Children in Placements Maintain Family Connections*

- Consent Decree Outcomes 7, 16, and 19 related to keeping children connected to family and community at the time of placement.
- Consent Decree Outcomes 21 and 23 related to visitation among family members.

3. *Children Achieve Permanency*

- Consent Decree Outcomes 4 and 14 related to re-entry into care.
- Consent Decree Outcomes 8a & b, 9, 10, 11, 12, 13, and 15 related to positive permanency exits.
- Consent Decree Outcomes 27 and 28 related to timely and complete court review of permanency efforts.

Well Being

4. *Children Experience Stable Placements and Worker Continuity*

- Consent Decree Outcome 17 relates to placement stability.
- Consent Decree Outcomes 18, 20, and 22 relate to worker continuity and contacts with children and caregivers.

5. *Children and Youth Receive the Services they Need*

- Consent Decree Outcome 24 relates to the educational achievement of youth who “age out” of foster care.
- Consent Decree Outcome 30 relates to meeting children’s service needs.

Strengthened Infrastructure

6. *Effective Oversight of Placement Settings*

- Consent Decree Outcomes 25 and 31 relate to placement setting conditions.

7. *Timely and Complete Court Orders*

- Consent Decree Outcomes 26 and 29 related to DFCS authority to assume and maintain custody.

Data from the record reviews were compared with other existing data sources and vice versa as another quality check of both the record review results and the State and county information systems and reports. This comparison helped identify data entry errors as well as inconsistencies arising from interpretation issues in all sources of data. While flaws were identified, using multiple sources of data improved the quality of the analysis

With respect to the information gathered through the record reviews, it is important to note that two of the reviews were based on random samples of the children in foster care and of foster homes that had a class member (i.e., a child in the custody of DeKalb or Fulton Counties) in care during the reporting period. The third record review (of maltreatment in care investigations

completed during the reporting period) did not use a sample, but, instead reviewed the entire universe of such investigations. The two case record reviews based on random samples were each designed to achieve a 95 percent confidence level with a margin of error of no more than plus/minus 7 percent. This means that, statistically speaking, there is a 95 percent chance that the frequencies and rates reported for the entire random sample will fall within 7 percent of the actual frequency or rate among the entire population from which the sample was drawn. However, frequencies reported for subsets of the populations, for example children who entered care after the Consent Decree or the subset of foster homes that were supervised by DFCS are subject to a larger margin of error, making them less representative of the population as a whole. When assessment of performance against an outcome threshold relied on a case record review sample subset, an estimate of the larger margin of error is provided in footnotes.

Finally, a key component of the methodology is the nearly twice-monthly meetings with State and county leadership and field staff that are referred to as “G2.” These meetings employ a recursive learning process that uses operational data to support the development and testing of hypotheses about the potential causes of observed performance problems and the framing of strategies for improvement. This iterative process helps participants identify what works to produce the desired outcomes, and to hold themselves and each other accountable for doing that which works. These meetings foster self-evaluation and have lead the counties to create systems to track, monitor, and share with one another useful information that previously was unavailable or difficult to access.

In all data collection efforts the State and the County have been very cooperative. Case record reviews in particular can be disruptive of day-to-day operations.

C. Report Scope and Organization

This report describes the State’s performance relative to the outcome measures that were to be achieved by the end of the third reporting period, and progress implementing required policies, practices, and infrastructure. Where the information was available, comparisons to previous reporting period performance are cited.

The remainder of the report is organized into the following parts:

Part II, Conclusions and Recommendations summarizes the accomplishments and status of State and County actions taken during the third reporting period. It offers several recommendations believed important to the State and Counties’ continued progress.

Part III, Safety of Children in Care includes an assessment of the State’s third period performance related to Outcomes 1,2,3,5, and 6, focused on keeping children in its care safe from maltreatment and responding to reports of alleged maltreatment.

Part IV, Children Achieving Permanency includes an assessment of the State’s third period performance related to Outcomes 4, 7, 8a, 9, 10, 14, 15, 16, 19, 21, 23, 27 and 28, focused on maintaining and achieving permanent family connections for children in State custody.

Part V, Children’s Well Being in Care includes an assessment of the State’s third period performance related to Outcomes 17, 18, 20, 22, 24 and 30, focused on providing for the well-being of children in custody.

Part VI, Strengthening the Infrastructure includes an assessment of the State’s progress in achieving Outcomes 25, 26, 29, and 31 and implementing required infrastructure components related to providing services to families and children.

Part VII, Miscellaneous Provisions provides verified data regarding the re-maltreatment rate of children in DeKalb and Fulton Counties and the number and percentage of “diversion” cases in those counties that experienced substantiated maltreatment within the subsequent 12 months.

Three appendices provide the full wording for all 31 outcomes (Appendix A) a detailed description of the data collection and analysis methods employed to produce this report (Appendix B) and the *Foster Care Needs Assessment Executive Summary* prepared by Hornby Zeller Associates, Inc. (Appendix C).

Part II CONCLUSIONS AND RECOMMENDATIONS

The *Kenny A* Consent Decree establishes an ambitious schedule for achieving 31 outcomes that set high standards for the safety, permanency, and well being of children in the custody of the Georgia Department of Human Resources and the Division of Family and Children Services. During the January 1 to June 30, 2007 period covered by this report, the State continued to make progress in some key areas but has yet to reach or sustain achievements in several other areas according to the schedule established in the Consent Decree.

The State appears to have continued to keep children safe, according to the Consent Decree's measures of the outcome of child safety. Less than one percent of the children in custody were victims of substantiated maltreatment by their substitute care givers and none of the sampled foster homes appear to be using corporal punishment to discipline the children in their care. Children continue to achieve permanency within families, but for children who have been in care a long time, the pace that produced the second period success slowed in the third period and fell short of the outcomes thresholds established by the Consent Decree. While in custody, children continue to be placed within an acceptable proximity to the homes from which they were removed, they are being placed with their siblings, and are being placed in homes that are not overcrowded as the State met or exceeded the outcome thresholds in these areas. An independently conducted needs assessment has recommended targeted foster home recruitment to provide more homes even closer to the neighborhoods in which the families of children live and to accommodate even more sibling groups. Another study commissioned by the Department has offered suggestions on how Georgia might better claim its fair share of federal funding support for foster care. Other State accomplishments include meeting the outcome thresholds for timely diligent search for relatives and other placement resources, adoption stability within the first year after finalization, and case manager continuity despite a rise in caseload size since the end of the second period.

The Department has yet to achieve the desired standards as set forth in the Consent Decree in several areas of responsibility. However, the means to improvement is not the same for all. At the risk of over-simplification, the areas needing further attention appear to fall into two distinct groups:

- For several areas, the opportunities and necessary steps for improvement are becoming clearer. For example, there is a growing body of evidence regarding certain aspects of the maltreatment in care investigative process that should enable the State to map out effective strategies for improvement. This report provides an analysis of where the problems appear to be occurring and suggests remedial actions. Another area has to do with appropriate court order documentation, timely case plan and permanency reviews, and timely renewal of custodial authority. All three of these activities require, at a minimum, more effective calendaring and tracking with the courts. A third area includes all aspects of visitation. Still substantially short of the Consent Decree standards, the counties have continued to improve visitation performance – both

frequency and quality – through increased supervisory oversight and accountability. The lessons and insights gained thus far need to be leveraged to consolidate gains and deliver the desired outcomes.

- In other areas, the rate of improvement appears to have stalled and the path to further improvement is not as straightforward. As a result, these areas are of particular concern to the Accountability Agents. Permanency for children who remain in care longer than 12 months is still a challenge and children are still moving among placements too often. An insufficient proportion of children are having their needs met while in care and the rate of re-entry into foster care has remained unchanged through the end of the third period. These activities directly affect the lives of children and families. Improvement in these areas will likely require multiple strategies including those promoted by the Consent Decree and new ones designed to address specific challenges. Momentum demonstrated in the second period needs to be regained. The Department's efforts to renew and strengthen its emphasis on family-centered practice are promising. Various findings in this report and the State's own experience with the 13th-month permanency reviews suggest greater family engagement and authentic teaming is needed. From the system reform experience of other states, this effort will take time but it has produced results.

A. *Recommended Priorities for State Attention*

Based on the third period results, the following areas are recommended as priorities for State and County attention:

- **Visitation:** Regular and on-going visitation among family members and case manager visitation with children and care givers represent informal assessment opportunities that can be as valuable as formal, clinical testing and diagnosis. Visits are the primary means of engaging families and children to express their needs and concerns, ask for services, and report on the effectiveness of services. Visitation can provide necessary information to develop a sense of progress toward permanency and to drive decisions about permanency alternatives. The Counties are to be commended for their continuous improvement in this area thus far, but they can not relax their diligence on the frequency or quality of visits because visitation is so fundamental to good practice. A particular focus for the future is ensuring that parents and children who are to be reunified have regular, meaningful time together.
- **Partnership with the Courts:** Several outcomes require a strong relationship with the courts to ensure success. Improvements identified in the second period report appear to have diminished in the third, therefore renewed efforts are needed to achieve timely continuous placement authority, semi-annual case reviews, and annual permanency reviews, and child-specific court orders that make more explicit the reasons for removing a child and why a child can not be safely reunited with his or her family. The importance of this partnership

to the financial health of the foster care program in Georgia is underscored by an assessment that greater federal revenue might be obtained by improving the court order compliance with the appropriate language in court orders.

- **Preventing maltreatment in foster care:** Opportunities exist to go beyond thoroughly investigating and responding to reports of maltreatment in foster care and to become increasingly successful at *preventing* maltreatment in care. Recommended steps for seizing this opportunity include:
 - Changing the practice of opening investigations in group homes in the name of the birth parent, thus improving the system’s ability to identify patterns of repeat maltreatment;
 - Improving the completeness of county reporting of maltreatment in care investigations to the appropriate units in DHR’s central office, which have a much better vantage point for detecting maltreatment patterns than any county can have; and,
 - Continuing to strengthen the collaboration between the Office of Regulatory Services (ORS), the reorganized Provider Relations Unit (PRU – formerly TSU), and the DFCS Policy Unit to enable them to identify and intervene appropriately with providers having a history of child safety concerns or marginal child safety records for the purpose of preventing maltreatment in care.
- **Improving non-foster relative placement approval:** Too few non-foster relative placements are documented to have been properly approved. Although the rate of such approvals improved somewhat from the second period, it is perplexing that it remains so low (59%) given that the approval process for these placements is substantially less complex than for any other type of placement, all of which had much higher approval rates.

B. Overview of Period III Performance

This section further highlights the State’s major accomplishments and opportunities for improvement in four distinct areas of responsibility: Keeping Children Safe, Helping Children Achieve Permanency, Providing for the Well-Being of Children in Care, and Strengthening the Service Delivery Infrastructure. Table II-1 at the end of this chapter provides the performance summary by outcome.

1. *Keeping Children Safe in Foster Care*

During the third reporting period, five outcomes were measured (numbered 1,2,3,5 and 6) relating to the safety of children in the custody of DeKalb and Fulton counties and the practice used to investigate reports of maltreatment in care. As shown in Table II-1, the State surpassed the period three thresholds for the two outcomes (numbered 5 and 6) that directly measure child safety. Less than one (1) percent, or 26 children, of the approximately 2800 children in the custody of DeKalb or Fulton Counties at any time during the reporting were the victims of substantiated maltreatment by their substitute care givers (Outcome 5). Furthermore, none of the sampled foster homes in which children resided during the reporting period had a confirmed incident of corporal punishment (Outcome 6).

While Outcomes 5 and 6 focus on reducing maltreatment in care, Outcomes 1, 2, and 3 measure important aspects of the process through which allegations of maltreatment in foster care settings are investigated. Outcome 1 relates to the timely initiation of maltreatment in care investigations; Outcome 2 relates to the timely completion of such investigations; and Outcome 3 relates to timely face-to-face contact between investigators and alleged victims of maltreatment in foster care. The State's performance on each of these three outcomes (85%, 72%, and 83%, respectively) fell short of the established thresholds. The Consent Decree covers investigations of maltreatment allegations involving any child in the custody of DeKalb or Fulton Counties regardless of the county in which the child is placed. By policy, maltreatment allegations are investigated by the DFCS office in the county in which the maltreatment is alleged to have occurred. Thus, allegations of maltreatment involving a DeKalb or Fulton child placed in another county are investigated by Child Protective Services staff of that other county (referred to in this report as "perimeter counties").

Compared to the second reporting period, the performance of the perimeter counties substantially improved on the aspects of the investigative process measured by Outcomes 1, 2, and 3. However, the State's overall performance declined for three reasons: 1) compared to the second reporting period, a higher proportion of third period investigations were conducted by counties outside DeKalb and Fulton; 2) although the performance of perimeter counties improved, their performance remained well below that of DeKalb and Fulton counties; 3) DeKalb and Fulton Counties' performance declined somewhat on Outcomes 1 and 3 compared to the second reporting period.

2. *Helping Children Achieve Permanency*

Taken together, the State's performance against permanency outcome thresholds is a mixture of success, opportunities for continued improvement, and serious challenges to further large-scale progress. The State has established a good foundation for enabling children to maintain strong family connections by successfully placing children in substitute care settings that are in close proximity to the family homes from which they were removed and by placing sibling groups together. Nearly 90 percent of the children live in the same county or within 50 miles of their

home of origin (Outcome 19) and 73 percent are placed with all of their siblings (Outcome 7). However, documentation suggests that many children did not have regular and sustained contact with their parents and their separated siblings. One-quarter of the children who are to be reunified appear to be having regular visitation with their parents or other reunification resources (Outcome 21). While the State has made some modest improvements in making sure that children visit with their siblings each and every month (Outcome 23) there is still a substantial portion of children who have not visited with their siblings each and every month of the 12 months prior to June 30, 2007. Case documentation indicates that 21 percent of the children with one or more siblings in a different placement visited with their separated siblings at least once a month in each and every month of the 12 months prior to June 30, 2007. Another 12 percent of the children missed one of the monthly visits in the 12-month span, leaving about 68 percent who missed one or more monthly visits with a sibling over 12 months.

The State has also been successful in helping more recent foster care entries achieve permanency without a lengthy stay in foster care (Outcome 8a). As of June 30, 2007, 45 percent of the children who entered foster care since October 27, 2005 have exited to permanency with a family. However, as is the case in public child welfare systems nationwide, permanency is more elusive for older children who have been in state custody a long time. The State fell short of the period three thresholds for Outcomes 9 and 10 that specifically target these children. About 160 children who had been in care anywhere from 2.5 to 7 or more years left DFCS custody to return to their own families, to be adopted, or live with guardians. While the County staff and families who made permanency happen for these 160 children should be recognized, nearly 400 children with such long lengths of stay would have had to achieve permanency in this reporting period to meet the Consent Decree standard. Ironically, the strong efforts made prior to January 1, 2007 to exceed the minimum performance level in period two for Outcome 9 made the period three threshold harder to achieve. In the second period, 199 children in excess of the number needed to meet the period two standard achieved permanency. That was a positive development for those children, but having exited care in the second period, they did not count toward the period three standard. The children for whom Outcomes 9 and 10 are designed will continue be a challenging population. Research suggests that given the ages and length of time in custody of those children who remain, securing permanent family relationships is an increasingly difficult task and there is no single strategy for succeeding with this population. In response to the challenge, DFCS has renewed diligent searches for relatives, pursued non relatives to be guardians, continued with adoptive home recruitment, and implemented the 13th month and 25th month internal permanency review process.

Finally, the proportion of children receiving timely semi-annual judicial or administrative review of their case plans (Outcome 27) and annual judicial permanency reviews (Outcome 28) fell considerably short of the Consent Decree mandates. The State's performance in both of these areas declined since the second reporting period. As previously highlighted, the opportunities for improving the performance in both areas rely on an effective partnership with the courts and ensuring reliable tracking mechanisms within both the courts and DFCS to bring the reviews to the court in a timely manner.

3. *Providing for the Well-Being of Children in Care*

Assessment of child well-being based on the framework of the Consent Decree relies on the stability of placements and relationships, and the receipt of services and supports to meet identified needs. Although placement stability declined somewhat (Outcome 17), the hallmark of the State's third period performance in providing for the well being of children in its custody is the worker continuity it was able to provide. Ninety-one percent of the children had two or fewer placement case managers over a 12 month period (Outcome 18.). In other areas of well-being, State effort has produced different degrees of improvement and significant gaps remain despite improvement. There are encouraging signs that twice monthly visits between case managers and children are becoming embedded in practice. For example, nearly 80 percent of the children in custody each received an *average* of two case manager visits each month over a twelve-month period. However, only 15 percent of the children received the Consent Decree-defined two visits each and every month of the last 12 months (Outcome 20). As previously noted, meeting the Consent Decree's high standards for consistently frequent and well-documented case manager visits with children will require continued improvement.

On-going partnership and communication between case managers and caregivers is important to ensuring the best possible care for and safety of the children under their supervision. Monthly case-manager visits with substitute caregivers still fell short of the threshold established for Outcome 22, but there appears to have been some improvement. Forty-five percent of the substitute caregivers received a case manager visit in each and every month of the 12- month period prior to June 30, 2007. Case managers missed only one month with another 23 percent of the caregivers. As with the other visitation requirements, this level of performance remains a concern to the Accountability Agents but further improvement appears likely given the steady increase seen during the reporting period in the percentage of caregivers receiving a caseworker visit each month.

Meeting the physical and mental health and developmental needs of children needs more attention. All needs identified in case plans appear to have been met for 77 percent of the children compared to the Outcome 30 threshold of 80 percent. However needs identified during the reporting period through routine screenings and assessments were generally less likely to have been met in the six months of the reporting period. A similar pattern was apparent in the second reporting period. Acute or episodic needs are more likely to be met than those of a more chronic nature that may be identified through routine examinations and assessments. However, there was an apparent decline from the second period in the responsiveness to the episodic needs.

In terms of education, the case record review found that 83 percent of the children age 7 or older were enrolled in school or a GED program in the first half of 2007. Almost all of the remaining 17 percent experienced gaps in school enrollment for different reasons or did not appear to be enrolled at all during the period.

4. *Strengthening the Service Delivery Infrastructure*

During the third reporting period, four outcomes were measured relating to aspects of the infrastructure supporting practice with families and children. Two of these (Outcomes 25 and 31) relate to the characteristics of foster placements; two (Outcomes 26 and 29) relate to the legal process by which the State receives temporary custody of the children that come into foster care.

As shown in Table II-1, the State surpassed the threshold for Outcome 31, as only 8 percent of children were placed in foster homes that exceeded specified home capacity limits. The proportion (86%) of foster placements that were in “full approval” status (Outcome 25) was unchanged from the second reporting period and fell below the required threshold. However, approval rates for individual placement types showed some improvement compared to the second period (the statewide rate remained unchanged due to random fluctuation in the specific placement type of children in the sample upon which the outcome measure was calculated). Despite the improvement in other placement types, documentation that non-foster relative placements had been properly approved remained far too low.

Outcome 26 focuses on properly documenting judicial determinations that removal and continued foster care are in the child’s best interest and efforts are being made to reunify the child with his/her family or there are appropriate reasons why reunification is not feasible. Having the applicable language in court orders is necessary for DFCS to more effectively claim the allowed federal reimbursement for foster care expenses. All applicable language was found in 42 percent of the case records reviewed. An important underpinning for any DFCS activity on behalf of children is that DFCS have legal custody of the children. DFCS should seek judicial extensions of its temporary legal custody annually. A lapse in legal custody occurs when the extension has not been sought in a timely manner or it has not been granted in a timely way. Outcome 29 limits the percentage of children with lapsed legal custody to 5 percent. Lapses in legal custody in the 13 months prior to June 30, 2007 were found for 30 percent of the children.

In addition to the cited outcomes, other components intended by the Consent Decree to strengthen the service infrastructure are caps on caseload size and supervisory ratios. No supervisor is to supervise more than six case managers at any one time. On June 30, 2007, 70 percent of the case managers in DeKalb and Fulton Counties had caseloads that were at or within the designated caps. Case managers who had caseloads that were over the caps had caseloads ranging from one case to, in one instance, as many as 31 cases over the established caps. This compares to 95 percent at or within caps in December 2006. This decline was not unexpected because both counties experienced changes and turnover in late 2006 and into 2007 and returning the caseloads to the required limits has taken longer than anticipated despite continued efforts. More recent information obtained for fourth period analysis suggests that the Counties have made progress since June.

The State has been more successful in reducing the supervisory span of control. In June 2007, 92 percent of the units had a caseworker-supervisor ratio of 6 to 1 or less compared to 82 percent in

December 2006. However, a few supervisors greatly exceeded the ratio, supervising up to ten case managers.

Two reports commissioned by the Department and completed shortly after June 30, 2007 are important to reference. Both reports were prepared by Hornby Zeller Associates, Inc. The first report is the needs assessment required by the Consent Decree (the Executive Summary is included as Appendix C to this report.) It contains six recommendations to the Department. Four recommendations focused on increasing the number and location of foster homes, a fifth recommendation suggested an emphasis on placement prevention in order to reduce the need for more homes, and the final recommendation suggested implementing an automated resource matching and tracking system to support appropriate placement decisions. The second report, not required by the Consent Decree, was an assessment of Georgia's use of Title IV-E, the primary source of Federal funding support for state foster care services. This report made recommendations as to how the Department might improve its claiming of IV-E funding to obtain increased Federal resources.

Table II-1
Kenny A. Outcomes: Progress as of June 30, 2007

Safety Outcomes Children in Foster Care are Safe From Maltreatment in Care	3rd Period Performance
Outcome 1: By the end of the first reporting period, at least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of report.	85%
Outcome 2: By the end of the first reporting period, at least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of report.	72%
Outcome 3: By the end of the first reporting period, at least 99% of all investigations of reported abuse or neglect of foster children during the reporting period shall include timely, face-to-face, private contact with alleged victim, including face-to-face contact with a child who is non-verbal due to age or for any other reason.	83%
Outcome 5: By the end of the second reporting period, no more than .94% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.	0.92%
Outcome 6: By the end of the second reporting period, 98% of all foster homes will not have an incident of corporal punishment within the previous 12 months.	100%
Permanency Outcomes Children in Placements Maintain Family Connections	
Outcome 7: By the end of the <ul style="list-style-type: none"> • 2nd reporting period, at least 70% • 4th reporting period, at least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 90 days of entering foster care.	73% 2 nd period performance reported here
Outcome 16: By the end of the <ul style="list-style-type: none"> • 2nd reporting period, at least 70% • 4th reporting period, at least 80% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings.	73% 2 nd period performance reported here
Outcome 19: By the end of the: <ul style="list-style-type: none"> • 2nd reporting period, at least 70% • 3rd reporting period, at least 80% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b (ii) and (iii).	89%

Table II-1, continued
Kenny A. Outcomes: Progress as of June 30, 2007

Permanency Outcomes Children in Placements Maintain Family Connections	3rd Period Performance
Outcome 21: By the end of the third reporting period, at least 75% of all children with the goal of reunification shall have appropriate visitation with their parents to progress toward reunification.	25%
Outcome 23: By the end of the second reporting period, at least 80% of children in the Class at a point in time during the reporting period who have one or more siblings in custody with whom they are not placed shall have had visits with their siblings at least one time each month during the prior 12 months in custody, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placement is more than 50 miles and the child is placed with a relative.	21%
Permanency Outcomes Children Achieve Permanency	
Outcome 4: By the end of the second reporting period, no more than 8.6% of all foster children entering custody shall have re-entered care within 12 months of the prior placement episode.	9.6%
Outcome 8a: Of all the children entering custody following the entry of the Consent Decree, at least 40% shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	45%
Outcome 9: Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the "24 backlog pool"): For all children in the 24 month backlog pool, <ul style="list-style-type: none"> at least 35% by the end of the second reporting period; of those remaining in custody at the end of the second reporting period, at least 40% by the end of the third reporting period; shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	20%
Outcome 10: Children in custody for more than 24 months and still in custody upon entry of the Consent Decree (children in the "over 24 backlog pool"): For all children in the over 24 month backlog pool, <ul style="list-style-type: none"> at least 35% by the end of the second reporting period; of those remaining in custody at the end of the second reporting period, at least 35% by the end of the third reporting period; shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	9%

Table II-1, continued
Kenny A. Outcomes: Progress as of June 30, 2007

Permanency Outcomes Children Achieve Permanency	3rd Period Performance
Outcome 11: By the end of the second reporting period, for all children whose parental rights have been terminated or released during the reporting period, 80% will have adoptions or legal guardianships finalized within 12 months of final termination or release of parental rights	Will be reported on in the 4 th period report ¹
Outcome 12: For children whose parental rights have been terminated or released and the child has an identified adoptive or legal guardian resource at the time of the entry of the Consent Decree, 90% shall have had their adoptions or legal guardianships finalized within six months after the entry of the Consent Decree.	94% One Time Measure
Outcome 13: For all children for whom parental rights have been terminated or released at the time of entry of the Consent Decree, and the child does not have an identified adoptive resource, 95% shall have been registered on national, regional, and local adoption exchanges, and have an individualized adoption recruitment plan or plan for legal guardianship within 60 days of the Consent Decree.	30% One Time Measure
Outcome 14: No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.	1%
Outcome 15: Permanency efforts (15/22): By the end of the second reporting period, at least 80% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child's case record why termination of parental rights should not be filed.	86%
Outcome 27: By the end of the third reporting period, at least 85% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.	33%

¹ Measurement of this Outcome can not be accomplished until after July 1, 2007. The Outcome set future 12-month expectations for the experience of children in custody July 1 through December 31, 2006.

Table II-1, continued
Kenny A. Outcomes: Progress as of June 30, 2007

Permanency Outcomes Children Achieve Permanency	3rd Period Performance
Outcome 28: By the end of the second reporting period, at least 95% of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.	70%
Well-Being Outcomes Children Experience Stable Placements and Worker Continuity	
Outcome 17: By the end of the second reporting period, at least 86.7% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody. By the end of the fourth reporting period, at least 95% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody.	84.4%
Outcome 18: By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had 2 or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption worker or Specialized Case Manager; case managers who have died, been terminated, or transferred to another county; or case managers who have covered a case during another case manager's sick or maternity leave.	91%
Outcome 20: By the end of the second reporting period, at least 95% of children in care at a point in time during the reporting period shall have had at least one in-placement visit and one other visit, as defined in Section 5.D, each month by their case manager during the prior 12 months in custody.	15%
Well-Being Outcomes Children Experience Stable Placements and Worker Continuity	
Outcome 22: By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had visits between their DFCS placement case manager and their foster parent, group care, institutional or other caretaker at least one time each month during the prior 12 months in custody.	45%

Table II-1, continued
Kenny A. Outcomes: Progress as of June 30, 2007

Well-Being Outcomes Children and Youth Receive Services They Need	3rd Period Performance
Outcome 24: By the end of the second reporting period, the percentage of youth discharged from foster care at age 18 or older with a high school diploma or GED will increase over baseline by 10 percentage points. By the end of the fourth reporting period, that percentage shall increase by an additional 10 percentage points.	Next measurement at the end of the 4 th reporting period
Outcome 30: By the end of the second reporting period, at least 80% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child's most recent case plan.	77%
Strengthened Infrastructure Outcomes Effective Oversight of Placement Settings	
Outcome 25: By the end of the second reporting period, at least 95% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status.	86%
Outcome 26: By the end of the second reporting period, at least 85% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act.	42%
Outcome 29: By the end of the third reporting, no more than 5% of all children in custody of DHR/DFCS for 12 months or more shall have lapse of legal custody within the prior 13 months.	30%
Outcome 31: By the end of the second reporting period and continuing thereafter, no more than 10% of all children in foster homes shall be placed in foster care homes that exceed the capacity limits referenced in Section 5.C.4.e. of the Consent Decree, concerning the requirement that no child shall be placed in a foster home if that placement will result in more than three(3) foster children in that foster home, or a total of six (6) children in the home, including the foster family's biological and/or adopted children.	5%

Part III SAFETY

Children in Foster Care are Safe from Maltreatment

Principle four of the Consent Decree asserts, “the state has primary responsibility for the care and protection of the children who enter the foster care system.”² As a consequence of this responsibility, several Consent Decree outcomes and requirements focus attention on the safety of children in the custody of DHR/DFCS. This chapter reports on the State’s progress in the areas related to the maltreatment of children in foster care and the process by which such allegations are investigated, and concludes with a more detailed discussion of the practices and processes employed to address reports and concerns of maltreatment in care.

A. Outcome Performance: Outcomes 1, 2, 3, 5, and 6

As previously noted, five of the Consent Decree outcomes are clustered around keeping children safe while they are in custody and quickly addressing safety issues as they occur. All five of these outcomes were to be initially achieved before the third reporting period. Table III-1 on the following page provides the language of the Consent Decree and the measured performance for each Outcome. The following discussion provides a summary of State performance as well as the interpretation and measurement issues associated with the outcomes, and information about issues surrounding the work that provide a context for understanding the State’s performance.

1. Maltreatment in Care: Occurrence and Investigation of Reports

Outcome 5 – Maltreatment in Foster Care

Outcome 5 lies at the very heart of the Consent Decree. It is about keeping children in foster care safe from maltreatment. Child welfare systems have no higher obligation. By definition, children in foster care have already experienced some form of maltreatment in the home from which they were removed. The prospect of them experiencing maltreatment again in the foster care setting is deeply disturbing.

² See p. 4, Principle 4, of the Consent Decree

Table III-1
Children in Foster Care are Safe from Maltreatment: Progress as of June 30, 2007

Consent Decree Outcome	3rd Period Performance
Outcome 5: By the end of the second reporting period, no more than .94% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.	0.92%
Outcome 1: By the end of the first reporting period, at least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of report.	85%
Outcome 2: By the end of the first reporting period, at least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of report.	72%
Outcome 3: By the end of the first reporting period, at least 99% of all investigations of reported abuse or neglect of foster children during the reporting period shall include timely, face-to-face, private contact with alleged victim, including face-to-face contact with a child who is non-verbal due to age or for any other reason.	83%
Outcome 6: By the end of the third reporting period, 98% of all foster homes will not have an incident of corporal punishment within the previous 12 months.	100%

a. Interpretation and Measurement Issues

There were no new interpretation or measurement issues encountered during the third reporting period. Those that were discussed in the first report are included in Appendix B, Methodology.

b. State Performance

▪ **The State Surpassed the Third Period Outcome 5 Threshold**

As noted in Table III-1 for Outcome 5, less than one percent (0.92%) of all children in foster care between January 1, 2007 and June 30, 2007 had been victims of substantiated maltreatment during that time period. The review found 26 instances of substantiated maltreatment among the 2,812 children in care at any point during the reporting period. The type of maltreatment substantiated for these 26 children consisted of inadequate supervision alone (19 children), physical abuse alone (5 children), and physical abuse along with inadequate supervision (2 children). While this rate falls below the standard (0.94%) established for the third reporting period, it represents an increase over the maltreatment rate reported for the second period (0.81%). This may be a result of improved reporting of suspected maltreatment in care as a consequence of increased visitation between caseworkers and children in care discussed in *Part*

V, Well-being. Exceeding the third period standard indicates that DFCS continues to do well at protecting the Fulton and DeKalb children in Georgia’s foster care system from maltreatment. These data are based on the review of all investigations of alleged maltreatment concerning class member children in foster care completed during the reporting period.

Outcomes 1, 2, and 3 – Maltreatment Investigation Process Measures

While Outcome 5 focuses on the result of reduced maltreatment in care, Outcomes 1, 2, and 3 measure important aspects of the process through which allegations of maltreatment in foster care settings are investigated. Outcome 1 relates to the timeframe in which an investigation of suspected maltreatment of a foster child is commenced. Outcome 3 relates to the frequency with which such investigations include face-to-face contact with the alleged victim within 24 hours. Because DFCS policy defines the “commencement” of an investigation as the point at which face-to-face contact with the alleged victim is made, they are very similar measures; the primary difference between them is the unit of analysis. For Outcome 1, the unit of analysis is the investigation itself (which may involve multiple alleged victims). For Outcome 3, the unit of analysis is the individual child who is an alleged victim. Outcome 2 relates to the length of time it takes to complete such investigations. Data for these outcomes are based on the universe of 93 maltreatment investigations completed during the reporting period that involved a child in the custody of DeKalb or Fulton County.

The State did not achieve the third period standard for Outcomes 1, 2, or 3. Three factors contributed to this: 1) compared to the second reporting period, a higher proportion of third period investigations were conducted by counties outside DeKalb and Fulton (referred to in this report as “perimeter counties”); 2) although the performance of perimeter counties substantially improved compared to the second reporting period, their performance remained well below that of DeKalb and Fulton counties; 3) DeKalb and Fulton counties’ performance declined somewhat on Outcomes 1 and 3 compared to the second reporting period. These factors are discussed further below.

During the third reporting period perimeter counties conducted nearly one-third (30 of 93) of the maltreatment in care investigations completed; during the second reporting period perimeter counties conducted less than one-fifth (15 of 78) of the maltreatment in care investigations. The Consent Decree covers maltreatment in care investigations that involve any child in the custody of DeKalb or Fulton counties, regardless of where in the State of Georgia the child’s foster care placement is located. DFCS policy stipulates that alleged maltreatment is to be investigated by the County of the child’s residence. Thus, when maltreatment is alleged to involve a class member who is placed outside DeKalb or Fulton County, the allegation is investigated by the DFCS office in the county in which the child resides.

a. Interpretation and Measurement

There were no new interpretation or measurement issues encountered during the second

reporting period. Those that were discussed in the first report are included in Appendix B, Methodology.

b. State Performance

▪ The State Fell Short of the Third Period Threshold for Outcome 1

As noted in Table III-1 for Outcome 1, **85 percent** of maltreatment in care investigations commenced within 24 hours according to file review data from the universe of investigations completed during the reporting period. This represents a decrease from the second period rate of 87 percent. Outcome 1 requires that by the end of the first reporting period, 95 percent of such investigations be commenced within 24 hours. As displayed in Table III-2, DeKalb and Fulton counties commenced 89 percent of the investigations they completed within 24 hours, while the 24-hour commencement rate for the perimeter counties was 77 percent. This represents an improvement in the performance of the perimeter counties compared to the second reporting period when they initiated only 60 percent of maltreatment in care investigations within the required 24 hours; but a decline for DeKalb and Fulton counties compared to their 94 percent success rate for the second reporting period.

This measure counts only investigations in which an alleged victim is seen face-to-face by a trained CPS investigator within 24 hours. Seven of the 14 cases in which this did not happen were investigated by DeKalb or Fulton County, seven by other counties. Among these 14 cases, five of the alleged victims were seen and removed by their foster care case manager from the placement setting before or at the time the allegation was made. Although these cases count as “misses” toward Outcome 1, in terms of ensuring child safety it is important to recognize that in 84 of the 93 investigations (90%) the alleged victim(s) were seen by or removed from potential risk by child welfare professionals within 24 hours. In three of the remaining nine cases, file notes indicate the investigators made multiple unsuccessful attempts to interview the alleged victim within 24 hours.

Table III-2
Outcome 1 – Commencement of Maltreatment in Care Investigations
N=93

Investigating County	Not Commenced Within 24 Hours		Commenced Within 24 Hours		Total	
	Number of Investigations	Percent of Total	Number of Investigations	Percent of Total	Number of Investigations	Percent of Total
DeKalb/Fulton	7	11%	56	89%	63	100%
Perimeter Counties	7	23%	23	77%	30	100%
Total	14	15%	79	85%	93	100%

Source: File Review of All Completed Investigations, January – June 2007, July 2007.

- **The State Fell Short of the Third Period Threshold for Outcome 2**

As noted in Table III-1 for Outcome 2, **72 percent** of maltreatment in care investigations were completed within 30 days according to file review data from all investigations completed during the reporting period. (Another 14 percent of such cases were investigated within 45 days.) This represents a decrease from the second reporting period when 78 percent of such investigations were completed within 30 days. The observed decrease is attributable to the fact that, compared to the second reporting period, more of the third period maltreatment in care investigations were conducted by counties other than DeKalb and Fulton. Outcome 2 requires that by the end of the first reporting period, 95 percent of such investigations be completed, in accordance with DFCS policy, within 30 days.

For the third reporting period DeKalb, Fulton, and the other counties performed as well or better on Outcome 2 as they had in the second period, but paradoxically, the State's overall performance declined. As displayed in Table III-3, DeKalb and Fulton Counties' performance in timely completion of investigations was unchanged compared to the second reporting period at 94 percent. The other counties actually showed marked improvement on this measure, rising from a timely completion rate of 13 percent in the second period to 27 percent in the third period. Yet, because a higher proportion of the investigations were conducted by the other counties in the third period (32 percent of the total) than in the second period (19 percent of the total), and because, regardless of their improvement, their performance remained substantially below that of DeKalb and Fulton, the State's overall performance declined.

In the Accountability Agents' second period report, it was noted that in 2006 DFCS began using a new risk assessment approach to evaluate the more dynamic and specific concept of "risk of harm" associated with leaving a child who is the subject of a maltreatment investigation in the home, as opposed to the more general and static concept of assessing "child safety." It was noted this change seemed to impact negatively the timely completion of investigations by the counties other than DeKalb and Fulton in that reporting period and it was suggested that.... "as staff gain familiarity with this more robust method of ensuring child safety and become clearer on the expectations surrounding its use in foster care settings, the timely completion of investigations can be expected to improve."³ The forecasted improvement appears to be taking place although significant additional improvement is needed.

³ Dimas, J. T. and Morrison, S. A. *Period II Monitoring Report, Kenny A. v Perdue*, June 2007, p.27.

Table III-3
Outcome 2 – Timely Investigations
N=93

Investigating County	Completed in > 30 Days		Completed in ≤ 30 Days		Total	
	Number	% of Total	Number	% of Total	Number	% of Total
DeKalb/Fulton	4	6%	59	94%	63	100%
Other Counties	22	73%	8	27%	30	100%
Total	26	28%	67	72%	93	100%

Source: File Review of All Completed Investigations, January – June 2007, July 2007.

▪ **The State Fell Short of the Third Period Threshold for Outcome 3**

As noted in Table III-1 for Outcome 3, **83 percent** of the 129 alleged victims had face-to-face private contact with a CPS investigator within 24 hours according to file review data from all investigations completed during the reporting period. This falls below the performance standard for Outcome 3 of 99 percent, and represents a decrease from the second period performance of 87 percent. However, the third period cases that “missed” 24 hour, face-to-face contact included five teenage boys who had run away from their group home before the alleged maltreatment was reported, and who could not be seen face-to-face until after they were located (which took up to four weeks). There were no such incidents in the second reporting period. When these children are excluded from the calculation, the State’s third period performance rises to 86 percent – virtually unchanged from the second reporting period. As with Outcomes 1 and 2, performance in this area was substantially better for DeKalb and Fulton counties (90 percent) than it was for the perimeter counties (70%). However, compared to the second reporting period, the performance of DeKalb and Fulton Counties declined somewhat (from 94% to 90%), while the perimeter counties showed substantial improvement (from 50% to 70%). Third period data for Outcome 3 is displayed in Table III-4.

Table III-4
Outcome 3 – Face-to-Face Contact with Alleged Maltreatment Victims within 24 Hours
N=129

Investigating County	No Contact Within 24 Hours		Seen/Removed Within 24 Hours		CPS Contact Within 24 Hours		Total	
	Alleged Victims	Percent of Total	Alleged Victims	Percent of Total	Alleged Victims	Percent Of Total	Alleged Victims	Percent of Total
DeKalb/Fulton	5	6%	4	5%	77	90%	86	100%
Other Counties	11	26%	2	5%	30	70%	43	100%
Total	16	12%	6	5%	107	83%	129	100%

Source: File Review of All Completed Investigations, January 1 through June 30, 2007, January 2007.

Outcome 3 counts as successes only alleged victims having face-to-face, private contact with a trained CPS investigator within 24 hours of the report's receipt. Nine of the 22 alleged victims for whom this did not happen were in cases investigated by DeKalb or Fulton County; 13 were in cases investigated by other counties. Of the 9 alleged victims "missed" by DeKalb or Fulton County:

- 4 had been removed from the placement setting prior to, or at the time the allegation was made by their foster care caseworker;
- 2 had investigators that made multiple, unsuccessful attempts to see the alleged victim within 24 hours; and,
- 1 was away from the foster home visiting with family at the time the investigation commenced and did not return for 48 hours.

Of the 13 alleged victims "missed" by the perimeter counties:

- 5 were on runaway status when the allegation was reported and could not be interviewed until they were located;
- 2 had been removed from the placement setting by their foster care caseworker prior to, or at the time the allegation was made;
- 1 had an investigator that made multiple, unsuccessful attempts to see the alleged victim within 24 hours.

Although these cases count as "misses" toward Outcome 3, it is important to understand that of the 85 alleged victims investigated by DeKalb or Fulton County that might reasonably have been seen within 24 hours, 81 (95%) had had their safety ensured by child welfare professionals within 24 hours. Of the 38 alleged victims investigated by the perimeter counties that might reasonably have been seen within 24 hours, 32 (84%) had had their safety ensured by child welfare professionals within 24 hours.

The Accountability Agents' second period report identified a communication challenge inherent in Outcome 3 that was illuminated by the circumstances surrounding many of the "missed" cases. A large proportion of the period two "misses" were the result of foster care case managers removing children from the placement setting as soon as the allegation was made. Case record notes indicated that for nearly all of those misses, the CPS investigator went to the child's placement address within 24 hours to interview the child, only to find that the child had been moved by the foster care case manager. By the time the investigator obtained the new address and arrived at the child's new location (which was sometimes in a different county) the 24 hour window had often elapsed.

The Accountability Agents recommended that the State address the logistical and communications issues that contributed to the second period "misses." In response, the State identified points of contact in DeKalb, Fulton, and the perimeter counties and established a

contact and notification protocol regarding the removal of foster children from placement settings in which maltreatment has been alleged. These efforts appear to be making a difference. During the second reporting period nine of the 14 “misses” (64 percent) were attributable to problems communicating the current location of the alleged victim. Such circumstances appear to have contributed to only six of 22 “misses” (27 percent) during the third reporting period.

The first and second period reports assessed the State’s prospects for attaining and sustaining the performance target for Outcome 3 as uncertain.⁴ The circumstances surrounding the third period “missed” cases further reinforce that assessment. For the third reporting period, the 99 percent standard stipulated in Outcome 3 would fail to be achieved if even two alleged victims were not seen face-to-face within 24 hours. Therefore, the child described above who was away from the foster home visiting family when the report was received represented the State’s entire margin for error for this Outcome. The five teens that ran away from their placement represented five times the number of “misses” the State is allowed under Outcome 3.

c. Operational Context

The shortfalls noted above in Outcomes 1, 2, and 3 appear to be associated with several factors:

- The performance of DeKalb and Fulton counties on Outcomes 1 and 3 declined somewhat compared to the second reporting period.
- Although the performance of the other counties investigating allegations of maltreatment involving DeKalb and Fulton children has improved since the second reporting period, it continues to lag behind the performance of DeKalb and Fulton Counties.
- Compared to the second reporting period, a higher proportion of the maltreatment in care investigations for the third period were conducted by counties other than DeKalb and Fulton. Due to the perimeter counties’ lower performance on Outcomes 1, 2, and 3 than DeKalb and Fulton counties, the State’s overall performance was negatively impacted by this shift.
- Fewer of the “misses” on Outcomes 1 and 3 were attributable to the communication problem identified in the second period report, but this still appears to have happened in the cases of six alleged victims. (This problem involves investigators missing the required response time because they arrive at the foster care setting to find that the alleged victim has already been removed from harm’s way by a foster care case manager).

⁴ Dimas, J.T. and Morrison S. *Period I Monitoring Report, Kenny A. v Perdue*, November 2006, p. 25 and *Period II Monitoring Report, Kenny A. v Perdue*, June 2007, p. 26.

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- Finally, six alleged victims were “misses” despite the best efforts of the investigator and county. In one instance, although the investigation was timely initiated, the alleged victim was away visiting family and could not be interviewed until returning the following day. In another case, although the investigation was initiated timely, 5 adolescent males were on runaway at the time the allegation was made and could not be interviewed until they had been located, which took well over 24 hours.

An issue of concern that emerged during the third reporting period relates to the coding practice of opening CPS investigations of alleged maltreatment in group homes and other congregate care settings in the name of the child’s birth parent. This has been the practice in Georgia dating back to 1998, when the Georgia Supreme Court held, in the case of *State v. Jackson*⁵, that the State’s establishment of a central registry of child maltreatment perpetrators was unconstitutional. The legal reasoning behind the Court’s decision involved the fact that a finding of substantiated maltreatment could have life-long consequences for the accused, but that alleged perpetrators did not have the opportunity, guaranteed by the Sixth Amendment to the U.S. Constitution, to confront their accusers. The Department of Human Resources was instructed to either abandon the Central Registry that had been developed, or to agree to produce victims of alleged maltreatment in court to be cross-examined by their alleged perpetrators. The Department’s leadership at that time chose not to subject alleged victims of child maltreatment to cross-examination by their alleged perpetrators, and so agreed to abandon the Central Registry.

Although the concept of a central registry was abandoned, DFCS/DHR continued to have an internal means of tracking CPS investigations in IDS. The policy and practice has been and still remains, to open every CPS investigation in the name of an adult in IDS. For children not in foster care, that is usually in the name of the child’s parent or guardian, who is also often the alleged perpetrator. For children in foster care, it is typically in the name of the foster parent, who may also be the alleged perpetrator. But in group homes or other congregate care facilities, no single individual has custodial authority over the children placed there, and so the decision was made to open group home investigations in the name of the birth parent or legal guardian.

Whatever the merits of the Georgia Supreme Court’s decision in *State v. Jackson*, the Department’s efforts to comply with it have produced two consequences of concern. First, the practice of opening CPS investigations in group homes and congregate care settings in the name of the birth parent or legal guardian adds a CPS report to the records of these individuals with which they presumably had nothing to do. While in the vast majority of cases this does not make the difference between these individuals having a CPS record or not (their child would not be in foster care if they had not already experienced maltreatment), it seems inappropriate and unjust and it may provide misleading information for subsequent case decision-making.

⁵ 269 Ga. 308, 496 S.E. 2d 912 (1998)

Second, this practice can leave the actual perpetrator, when it is possible to identify that individual, **without** a CPS record they deserve. This is a safety concern because one of the safeguards in the selection of foster parents and of facility staff is a check of the IDS data base to see if there are any previous CPS reports in their name. While IDS is not a “central registry” in the sense that it maintains a list of all known perpetrators of child maltreatment, if an individual seeking to become a foster parent or facility staff has had a previous CPS report opened in his or her name that fact will be reflected in IDS. This safety concern is mitigated to an extent by the existence of a second safeguard which is the criminal records check. If the maltreatment involved is criminal in nature (such as sexual or physical abuse) a police report should have been made and a perpetrator seeking to become a foster parent or congregate facility staff should be identified when a criminal records check is performed.

However, this still leaves open the possibility that the system is “blind” to perpetrators in group homes of maltreatment that is not criminal in nature. In the current reporting period 21 group homes or residential care facilities were the subject of maltreatment in care allegations; 17 of these involved inadequate supervision – either by itself (11 cases) or in combination with another allegation (6 cases). Only three of these investigations substantiated the alleged maltreatment; all for inadequate supervision by itself.

The actual safety risk posed by the Georgia Supreme Court’s ruling on the constitutionality of a Central Registry in *State v. Jackson* appears to be limited by several factors: the safeguard of a criminal records check, the Department efforts to honor the Court’s decision while preserving the ability to identify perpetrators of substantiated maltreatment when they are birth or foster parents, and by the nature of the allegations most commonly associated with the placement environments in which substantiated maltreatment perpetrators cannot be tracked – group homes and congregate care settings. Nevertheless, the Accountability Agents have encouraged DHR to review its options for addressing the concerns raised here. The DHR Commissioner has committed to seeking legislation in the next legislative session to exempt the alleged victims of maltreatment from being confronted in legal proceedings by their alleged perpetrators. To ensure changes are made, the Commissioner has also appointed a task force charged with identifying non-legislative strategies that might ameliorate the concerns raised here. The Accountability Agents will report on the progress of these initiatives in future reports.

Outcome 6 – Corporal Punishment

Outcome 6 seeks to protect children in foster care from experiencing corporal punishment, which the Consent Decree defines as “...any physical punishment of a child that inflicts pain.”⁶ Outcome 6 stipulates that by the end of the third reporting period, 98 percent of all foster homes will not have an incident of corporal punishment within the previous 12 months.

⁶ See p. 2 of the Consent Decree

a. Interpretation and Measurement

The Consent Decree's use of the phrase "...all foster homes...."⁷ is operationalized as all foster homes with a class member in custody during the reporting period for measurement purposes.

b. State Performance

▪ **The State Surpassed the Third Period Outcome 6 Threshold**

As noted in Table III-1 for Outcome 6, 100 percent of the foster homes sampled had not had a confirmed incident of corporal punishment in the previous 12 months. These data come from the sample of 158 foster homes that had a class member in care at any point during the reporting period. This is identical to the second reporting period, during which 100 percent of the foster homes sampled had not had an incident of corporal punishment and indicates that DFCS continues to do extremely well at protecting children in care from corporal punishment.

B. Other Practice/Process Requirements Regarding Maltreatment in Care Investigations and Corporal Punishment

1. Maltreatment in Care Investigations

Section 12 of the Consent Decree contains other requirements pertaining to the process of investigating and responding to reports of maltreatment in care.⁸ The following discussion summarizes the State's implementation of these requirements.

a. Investigations of Reports of Maltreatment in Care

Section 12 A requires all reports of suspected maltreatment of children in foster care to be investigated by child protective services staff (rather than foster care staff) in the manner and within the time frame provided by law and DFCS policy. Interviews with Fulton and DeKalb County staff, with staff of the Social Services Treatment Services Unit (TSU – which became the Provider Relations Unit on July 1, 2007) and the Office of Regulatory Services, and the review of 180 randomly selected foster care records and all 93 reports of maltreatment in care completed during the reporting period indicate that it is the policy and the practice that all reports of maltreatment in foster care are investigated by CPS staff. However, the review of 180 placement records identified three instances from Fulton County (two occurring in the current reporting period; one that occurred during the second period but was reflected in a case record selected for the third period review) where an allegation of maltreatment appears to have been inappropriately screened out by a foster care worker. These instances are described below:

⁷ Ibid, p. 32

⁸ See pp.28-30 of the Consent Decree

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- Case 1 – In this instance, the older sibling of the child whose file was reviewed indicated to the foster care case manager that he and his brothers were being “abused.” When questioned about the nature of the alleged abuse, the child indicated that they were being treated “differently” than the foster mother’s birth child. When asked to give an example the child indicated he was not allowed to run through the house as the birth child was. The foster care case manager believed that the child was being coached by his birth mother who was attempting to regain custody of the children over the Department’s objections. Concluding that the allegation did not rise to the level of maltreatment, the foster care case manager failed to report the allegation to the CPS unit.
 - Case 2 – In this instance, a maternal grandmother alleged that the paternal grandmother, with whom the child was placed, physically abused the child. The paternal grandmother admitted allowing the paternal aunt to physically discipline the child for breaking a vase. The foster care case manager indicated that she did not report the incident to the CPS unit because she was unsure of the timeframe in which the alleged abuse took place.
 - Case 3 – This instance occurred during the second reporting period but was identified in a case record selected for third period review. During a visit to the child’s placement setting, a foster mother indicated to the foster care case manager that one of the children in her care had been displaying inappropriate behaviors. When asked about the foster mother’s concerns, the child alleged that the foster mother and her birth daughter pulled her hair and threw her against a dresser when she declined to fold cloths. The foster mother denied any knowledge of the child’s allegations, and the child subsequently indicated that it was only the foster mother’s birth daughter who had engaged in the alleged maltreatment. The foster care case manager was not available for interview but her supervisor indicated that the allegation was not reported to CPS because the child had changed her account of the incident and the alleged perpetrator was a minor.

According to Section 12 A of the Consent Decree and to DFCS policy, it appears that each of these allegations should have been referred to the CPS unit for assessment and screen-out or investigation. These cases have been shared with Fulton County leadership and the case managers involved have been counseled as to the policy requirements and appropriate procedure. Based on a careful vetting of each of these cases and their specifics, the Accountability Agents are satisfied that they represent isolated incidents and are not part of a larger pattern or indicative of a systemic problem. Future file reviews, however, will continue to scrutinize placement files for any indication that these cases represent a larger problem.

b. Investigations Conducted in Accordance with State Standards

Section 12.A. of the Consent Decree states that “All ... reports of suspected abuse or neglect of children in foster care shall be investigated by DFCS child protective services staff in the

manner and within the time frame provided by law and DFCS policy.”⁹ DFCS policy on maltreatment in care investigations (which are considered “Special Investigations”) is contained in Section 2106 of the Social Services Manual.¹⁰ Section 2106 contains guidance on the many aspects of properly conducting Special Investigations, such as separately interviewing the parties involved, making two collateral contacts, evaluating the likelihood of continued safety, etc. In all, Section 2106 contains more than 150 discrete requirements pertaining to Special Investigations. The particular requirements vary to an extent depending on the type of placement setting being investigated.

The file review explored the extent to which the maltreatment investigations completed during the third reporting period were conducted in accordance with the investigative standards contained in Section 2106. (The extent to which such investigations comport to the required timeframes is addressed in the discussion of Outcomes 1 and 2, above.)

The results of that review are presented in Table III-5 for the 12 investigative standards common to most placement types.

⁹ See p. 28 of the Consent Decree

¹⁰ Social Services Manual, Chapter 2100, Section VI, Georgia Dept. of Human Resources, July 2005

Table III-5
Proportion of Investigations Meeting Policy requirements
N= varies based on placement setting and other case characteristics

Investigation Policy Requirement	Percent of Applicable Files with Documentation of Compliance
Continued safety of the child(ren) placed in the home was adequately evaluated and assessed (N=93)	96%
Investigator reviewed previous CPS reports for foster parents/caregivers (N=71)	94%
Investigator saw/interviewed every alleged maltreated child separately (N=93)	94%
Non-DFCS case managers who visited in this foster care setting were contacted (N=47)	89%
Investigator saw/interviewed each of the other children (non-alleged victims) separately (N=68)	82%
DFCS case managers required to visit in this foster care setting were contacted (N=93)	81%
Alleged maltreater was interviewed separately (N=85)	76%
At least two relevant collateral sources contacted during the investigation (N=93)	73%
File contains physical evidence to support case documentation (N=58)	72%
All DFCS approved foster parents/caregivers interviewed separately (N=61)	66%
All other adults frequently in the home interviewed separately (N=25)	52.0%
Investigator reviewed the child's placement and CPS history noting patterns of child behavior, additional sources of information, and any concerns (N=93)	42%

Source: Case file review of all investigations completed January – June, 2007, July 2007

The percentages reported in Table III-5 represent the number of instances for which the investigative file documentation was adequate to provide a conclusive, affirmative response. For six of these 12 standards, State compliance was found to be below 80 percent. These items beg additional analysis.

Three of these six items assessed whether particular individuals (the alleged maltreater, the foster parents/caretakers, or other adults frequently in the home) were interviewed separately. As in the second reporting period, it was often the case that the file made it clear that these individuals were interviewed, but the documentation was inconclusive about whether those

interviews were conducted privately. This problem was more prevalent in the investigations conducted by counties other than DeKalb or Fulton, which, as noted earlier, also conducted a larger proportion of the third period investigations than in the second reporting period.

With respect to the finding that 73 percent of the investigations documented at least two relevant collateral contacts, it should be noted that an additional 12 investigations (13 percent) were deemed to have one relevant collateral contact. For the investigations that were deemed to have only one or no relevant collateral contacts, it is unclear whether the problem was the absence of collateral contacts or the perceived “relevance” of the contacts that were made. Sixty-two percent of the investigations found to have no relevant collateral contacts were in group homes, although group homes accounted for only 19 percent of the placement settings investigated. It is possible that collateral contacts with group home staff that have no association with an allegation were erroneously deemed to be not relevant. Unfortunately, the file review protocol did not ask reviewers to explain negative findings on this item, so there is no way to be certain. The file review guide will be revised to capture an explanation of negative findings for the fourth reporting period, and additional file reviewer training will be conducted on what constitutes a “relevant” collateral contact.

With respect to the finding that 72 percent of the investigative files that might be expected to include physical evidence actually contained such evidence, it should be noted that among those that contained no such evidence, the allegation was found to be unsubstantiated 81 percent of the time. The non-existence of physical evidence may explain both its absence in the case file and an investigative finding that an allegation such as physical abuse can not be substantiated.

Finally, the finding that 42 percent of the investigative files documented that the child’s placement and CPS histories had been reviewed for patterns of behavior, additional information, etc. appears to be at least partly a function of the Accountability Agents having revised this question for the third reporting period. The second reporting period file review protocol asked only about the investigator’s review of the child’s placement history. Compliance for the second period was found to be 85 percent. For the third period, the question was reframed to include the child’s placement *and* CPS histories (upon subsequent review, it is clear that Section 2106 of the policy manual intends this requirement to pertain to the *foster home’s* placement and CPS history, not the *child’s*). This appears to have caused some confusion among file reviewers about the standard of evidence appropriate to this modified requirement. For the fourth reporting period, this question will be reframed so it more accurately reflects the requirement found in Section 2106 and additional training on it will be conducted.

c. Referrals of Reports of Maltreatment in Care in Private Provider Settings to the Office of Regulatory Services and the Treatment Services Unit

Section 12 B requires all reports of suspected abuse or neglect of foster children in institutional, group, residential, or private provider-supervised foster family home settings to be referred to and reviewed by the Office of Regulatory Services (ORS) and the Social Services Treatment Services Unit (TSU).¹¹ The purpose of the review specified in the Consent Decree is "...to determine whether a pattern of abuse or neglect exists within... [the provider agency].... that contributed to the abuse or neglect; whether the contract should be terminated; whether particular homes or facilities should be closed...."¹²

DFCS policy requires counties, at the conclusion of maltreatment in care investigations, to send an "Administrative Packet" detailing the incident and findings to the Social Services Director within ten days. If the incident occurred in a provider-supervised foster care setting, an investigative summary is also to be sent to TSU and ORS. The Accountability Agents' first period report registered concern about the absence of a mechanism to ensure that all required reports had been received from the Counties, and characterized the practice in place at the time as a "passive surveillance" approach.¹³ That is, TSU and ORS had relied on the counties, of their own volition, to send in the required reports in a timely manner.

Data from the first period file review of maltreatment in care reports indicated that county compliance with this requirement needed significant improvement. However the Accountability Agents concluded that this could be indicative of a reporting problem, a documentation problem, or both. In the second reporting period, file review data were reconciled with State office files to more fully understand the nature of the problem. This analysis enabled the Accountability Agents to conclude that reporting to ORS of suspected maltreatment in care was much more complete than was reporting to TSU or to the DFCS Policy Office, and was better documented in the case record. However, there remained room for improvement in both reporting and documentation with regard to ORS. Substantial improvement in both reporting and documentation were still needed in regard to TSU and the DFCS Policy Office. For the third reporting period, data were collected directly from ORS, TSU, and the DFCS Policy Office to ascertain which maltreatment reports involving foster children had been reported to each office.

Data collected directly from the DFCS Policy Office indicate that the Office received an administrative packet for 40 (47%) of the 85 third period maltreatment in care investigations that should have been reported to that office. This represented an improvement from the

¹¹ ORS licenses child placing agencies (CPA), child caring institutions (CCI), and outdoor therapeutic programs (OTP). TSU approves CPAs, CCIs, and OTPs wishing to serve DFCS children once they have been licensed by ORS.

¹² See Section 12 B, p. 28 of the Consent Decree

¹³ Dimas, J.T. and Morrison S. *Period I Monitoring Report, Kenny A. v Perdue*, November 2006, pp. 27-28.

second period when the Policy Office was notified of 23 of 78 investigations (30%), but remains too low. Only five of the reports received for the third reporting period were sent within the required 10 days.

The third period file review included 61 investigations of maltreatment in provider-supervised settings. Data collected directly from ORS and TSU indicate that ORS was notified of 82 percent of these investigations. This is slightly better than the second period when ORS was notified of 80 percent of such maltreatment in care investigations. TSU, however, appears to have been notified of 27 (43%) of the 61 maltreatment in care investigations in provider-supervised settings. This represents a decrease from the second reporting period when TSU was notified of 47 percent of such investigations. This is a serious concern because a number of steps were purportedly taken at the Central Office level to improve the completeness of reporting to ORS and TSU as part of the State's effort to implement an "active" rather than a "passive" maltreatment in care surveillance system. These steps, described in the Accountability Agents' second period report, included:

- The DFCS Evaluation and Reporting Section's implementation of a monthly cross check of CPS reports against the roster of approved foster care providers to enable DHR to track whether counties had submitted all required reports; and,
- Implementation of a new protocol to ensure that information related to incidents of alleged maltreatment in provider-supervised settings was passed between ORS and TSU. This protocol includes:
 - ORS sending every relevant complaint it received to TSU and appropriate county DFCS offices,
 - ORS intake following up with counties making verbal referrals to get completed investigative summaries, and,
 - Copying of appropriate TSU staff on every relevant e-mail to or from ORS regarding alleged maltreatment in provider-supervised settings.

The Accountability Agents expected these steps would help to move DHR toward an "active" surveillance system and to measurably improve the completeness of reporting to ORS and TSU, thereby strengthening their ability to determine whether a pattern of abuse or neglect exists within any private providers, as required by Section 12 B of the Consent Decree. That these steps have produced little improvement in the reporting completeness of alleged maltreatment in provider-supervised settings is disappointing. It necessarily raises the question of how robust DHR's "active" surveillance system is at this juncture.

One of the intended purposes of the requirement in Section 12.B. that ORS and TSU seek out patterns of abuse and neglect in provider-supervised settings is to enable the child welfare system to detect when a provider with a history of previous substantiated maltreatment might attempt to switch supervision authorities (moving from one private provider to another) to distance himself or herself from that history. Although no such instances were identified in the third reporting period, TSU and ORS did identify a somewhat similar situation. In that

instance, a provider-supervised group home sought to expand its Fulton County operations. TSU, which had previous safety concerns about the provider, denied the expansion request. The provider surreptitiously assumed the operations of another provider in an adjacent county without reporting this action to DFCS. The provider in question subsequently was the focus of an unsubstantiated allegation of maltreatment in the county into which it had moved. That county DFCS office failed to report this maltreatment allegation to TSU. However, TSU received a copy of the maltreatment report from ORS as part of their efforts to identify patterns of abuse and neglect. TSU recognized that the report concerned the provider whose expansion request earlier had been denied. ORS and TSU conducted a joint staffing of this provider and took action to close all of the provider's operations.

This example indicates how active collaboration between TSU and ORS can help ensure the integrity of the provider-supervised foster care environment. While the system has the responsibility to detect patterns of abuse, it also has the opportunity to *prevent* abuse by vigilantly monitoring the available information (or that which is *supposed* to be available) and proactively intervening in marginal situations. However, the system's ability to seize the opportunity for prevention remains limited by the incompleteness of reporting from the counties to the appropriate central offices – the level at which it may be possible to detect the very patterns that can afford the opportunity to prevent maltreatment in care. A moral imperative exists behind capturing this opportunity; children who have experienced maltreatment in their natural home should never experience it again in the very environment they have been placed them to keep them safe. Moreover, one standard by which the system's effectiveness in fulfilling this moral imperative is judged will soon become much more stringent. The Consent Decree's standard for maltreatment in foster care (Outcome 5) drops from 0.94% to 0.57% for the fourth reporting period. Given the system's performance on this core measure of child safety over the second and third reporting periods (0.81% and 0.92%, respectively) successfully attaining the fourth period standard is likely to require the *prevention* of maltreatment in foster care that otherwise might occur.

Although the sharing of information between ORS and TSU can reduce the impact of incomplete reporting from the counties, it does not solve the root problem. The counties and State are urged to:

- Make improving the completeness of county reporting a high priority.

ORS and TSU are urged to:

- Continue to strengthen their collaboration, and to actively work to identify providers with marginal child safety records, and
- To develop strategies for proactively intervening with providers with marginal child safety records to capture the opportunity to prevent maltreatment in care.

DHR is urged to:

- Ensure that ORS and TSU are adequately staffed and resourced to successfully and proactively carry out the recommendations made above.

2. Corporal Punishment in Foster Homes

Section 12C¹⁴ contains process and practice requirements related to the prohibition of corporal punishment in foster care settings and investigations of reports of corporal punishment. The following discussion summarizes the requirements and how DFCS is meeting them.

a. Awareness of Corporal Punishment Prohibition

All placement settings are to prohibit the use of corporal punishment. In 156 of the 158 foster home records sampled (99%), there was a signed written statement or other evidence that foster parents understood and agreed to comply with DFCS' prohibition on the use of corporal punishment. This is about the same as the second period performance of 100 percent.

b. Enforcement of Corporal Punishment Prohibition

Enforcement of this provision in DFCS supervised homes is carried out by the County DFCS offices. Enforcement in private provider placements is carried out by the child placing agency (CPA), Office of Regulatory Services (ORS), and Treatment Services Unit (TSU – which became the Provider Relations Unit on July 1, 2007). ORS requires CPAs CCI and OTPs to have written policies prohibiting corporal punishment as a condition of licensure. ORS monitors compliance with this requirement by means of a pre-licensure review of all provider policies. They also review the files of CPAs to confirm that they have reviewed the DFCS disciplinary policy with the private foster homes they supervise. TSU conducts utilization reviews every six months for every child placed in a CCI or a CPA-supervised foster home. As part of each utilization review, TSU staff meets with the facility treatment teams to discuss individual needs of the children in care and conducts face-to-face, private interviews with 10 percent of the children in each group home and foster home supervised by each CPA. In addition, prior to contract approval or re-approval, TSU checks for any prior ORS citations and visits three randomly selected foster homes of each CPA.

c. Compliance with Corporal Punishment Prohibition

Actual compliance with the corporal punishment prohibition appears to be excellent. The review of 180 randomly selected placement records of children in foster care during the third reporting period identified no confirmed instances of corporal punishment (0.0%). During the second reporting period there were also no confirmed instances of corporal punishment among

¹⁴ See pp 29-30, paragraph 12C of the Consent Decree

the children included in the placement sample. However, while all corporal punishment in foster care settings is prohibited, not all corporal punishment meets the criteria that trigger a maltreatment investigation. The foster home record review looked for any evidence in the foster home record that foster parents or other placement resources may have used corporal punishment or permitted it to be used on any foster child, whether or not a subsequent investigation or assessment confirmed the allegation. Such evidence was found in one of the 158 foster home records reviewed (0.6%). This one incident received a full CPS investigation and was found to be unsubstantiated.

The review of all 93 maltreatment in care reports investigated during the reporting period identified four such reports (4%) that began with an allegation of corporal punishment. This represents an improvement over the second reporting period when 5 of the 78 maltreatment in care reports (6%) began as corporal punishment allegations. One of the four investigations completed during the third period that began with an allegation of corporal punishment was substantiated and that foster home was closed (this foster home was not part of the random sample of 158 foster homes upon which Outcome 6 was calculated; and the child involved was not part of the random sample of 180 foster children whose placement records were reviewed). No foster care or disciplinary policy violations were identified among the remaining three cases, although one of the foster homes involved was placed on a corrective action plan to address disciplinary issues.

d. Screening and Investigation of Corporal Punishment Allegations

Allegations of corporal punishment must be screened by qualified CPS (rather than foster care) staff. Depending on the screening conclusions, the allegations may be responded to differently. Where reasonable cause exists to believe abuse or neglect occurred, or if the allegations arose in a group care setting, the allegations must be treated as an abuse referral and investigated accordingly. If the screener concludes that reasonable cause does not exist, the Consent Decree requires a timely assessment of the allegations and placing “holds” on any further placements until the assessment is complete. It also stipulates conditions under which homes must be closed, and conditions under which homes may remain open under a corrective action plan.

Interviews with the Special Investigations units in DeKalb and Fulton Counties indicate that both counties are handling allegations of corporal punishment consistent with these provisions. Both counties use experienced CPS supervisors to assess incoming corporal punishment allegations. In DeKalb, all complaints of any kind of physical discipline of foster children are automatically referred to the CPS Special Investigations unit with a 24 hour response time. In Fulton County, incoming complaints are screened by the Special Investigations Unit: those showing reasonable cause are investigated by the Special Investigations unit with a 24 hour response time; those lacking reasonable cause are referred to the Resource Development unit (for a DFCS supervised foster home) or the Child Placing Agency and ORS (for a private provider supervised foster home) for response. In both counties, any complaint of corporal punishment of children in group homes automatically receives a CPS investigation.

As noted above, the review of all maltreatment in care investigations found four CPS investigations prompted by an allegation of corporal punishment; two in DFCS-supervised foster homes, one in a provider supervised foster home, and one in a relative placement (the alleged perpetrator in this instance was elementary school staff). Of these four:

- 4 (100%) showed that all alleged victims were interviewed separately within 24 hours;
- 4 (100%) showed evidence that the continued safety of the child was evaluated; and,
- 4 (100%) were completed within the 30 days required by DFCS policy.

The one investigation in a privately-supervised setting represented an improvement over the second period during which three investigations in private care settings were precipitated by corporal punishment allegations (there were 11 such instances in the first reporting period). Documentation indicates that both ORS and TSU were notified of this investigation, but neither was notified of the investigative conclusion. This represented an improvement over the second period when ORS and TSU had been notified of two of three such investigations.

In both Counties, corporal punishment allegations against DFCS supervised homes that do not meet the criteria for a CPS investigation receive an “assessment.” The Resource Development staffs in each county conduct the assessment in the home and decide if the home should be closed, placed under a corrective action plan, or if counseling or other support services are needed. While the assessment is being conducted, the home is to be placed on “hold” (barred from receiving additional placements). Both counties indicated that if the allegation revealed a policy violation that had a direct impact on safety or represented a serious risk, they would send the case to CPS and a special investigation would be opened. Both counties also indicated that if a policy violation was a home’s second violation, or the family was not amenable to change, the home would be closed.

DeKalb and Fulton County each has a different method for responding to corporal punishment allegations against private provider supervised foster homes that fail to meet the criteria for a CPS investigation. In DeKalb County, all allegations of corporal punishment in provider supervised foster homes are handled by the special investigations unit. Cases that fail to meet the criteria for a CPS investigation receive an “assessment” from the special investigations unit. The results of those assessments are reportedly shared with TSU and ORS. In Fulton County, allegations of corporal punishment in provider supervised foster homes that fail to meet the criteria for a CPS investigation are referred to the supervising CPA and to ORS for response.

As indicated previously, only one foster home identified through the foster home record review had an allegation of corporal punishment during the reporting period. This allegation, arising in a provider-supervised foster home in DeKalb County, appears to have been handled consistent with the representations made above. A full CPS investigation was initiated, ORS and TSU were notified of the investigation, and the home was placed on “hold” for further placements pending the outcome of the investigation. The CPS investigation found the

allegation to be unsubstantiated and that no violation of the DFCS disciplinary policy had occurred.

No maltreatment in care investigations that began with a corporal punishment allegation had a foster care or disciplinary policy violation identified, so no file review data are available with which to independently assess how those situations are handled. However, foster care or disciplinary policy violations identified in the first and second reporting periods appeared to have been handled consistent with the representations made above.

Part IV PERMANENCY

Children in Care Maintain Family Connections and Achieve Permanency

Several of the Consent Decree principles focus on the importance of permanency for children.¹⁵ As a result, several outcomes and practice requirements focus on various aspects of permanency for children. The first part of this chapter reports on the State's progress on the areas related to children in DFCS custody maintaining their family connections and returning home or achieving permanency with new families. The remaining part describes the state's performance in areas of required practice and process associated with achieving permanency.

A. Outcome Performance

As described in the Introduction (Section I), 17 separate outcomes are clustered in the category of "Permanency." Outcomes 12 and 13 relate to children achieving the goal of adoption were one-time, first period requirements that have been discussed in previous reports.¹⁶ Most of the remaining outcomes applied to the second and third reporting periods. Table IV-1 on the next three pages provides the language of the Consent Decree and the summary of outcome performance for the third period.

For analysis and communication, the 17 outcomes have been further subdivided into two broad categories, *Children in Placement Maintain Family Connections* and *Children Achieve Permanency*. The following discussion provides a summary of State performance in these two areas as well as new interpretation and measurement issues associated with the outcomes, and information about issues surrounding the work that provide a context for understanding the State's performance.

¹⁵ See p.4, Principles 1 and 3, of the Consent Decree

¹⁶ See Dimas, J. T. and Morrison, S. *Period I Monitoring Report, Kenny A. v Perdue*, November 2006 and *Period II Monitoring Report, Kenny A. v Perdue*, June 2007.

Table IV-1
Permanency Outcomes

Children in Placements Maintain Family Connections	3rd Period Performance
Outcome 7: By the end of the second reporting period, at least 70% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 90 days of entering foster care.	73% in the second reporting period, reported on here
Outcome 16: By the end of the second reporting period, at least 70% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings.	73% in the second reporting period, reported on here
Outcome 19: By the end of the: <ul style="list-style-type: none"> ○ second reporting period, at least 70% ○ third reporting period, at least 80% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b (ii) and (iii).	89%
Outcome 21: By the end of the third reporting period, at least 75% of all children with the goal or reunification shall have appropriate visitation with their parents to progress toward reunification.	25%
Outcome 23: By the end of the second reporting period, at least 80% of children in the Class at a point in time during the reporting period who have one or more siblings in custody with whom they are not placed shall have had visits with their siblings at least one time each month, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placement is more than 50 miles and the child is placed with a relative.	21%
Children Achieve Permanency	
Outcome 4: By the end of the second reporting period, no more than 8.6% of all foster children entering custody shall have re-entered care within 12 months of the prior placement episode.	9.6%
Outcome 8a: Of all the children entering custody following the entry of the Consent Decree, at least 40% shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	45%

Children Achieve Permanency	3 rd Period Performance
<p>Outcome 9: Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the “24 backlog pool”): For all children in the 24 month backlog pool,</p> <ul style="list-style-type: none"> ○ at least 35% by the end of the second reporting period ○ at least 40% of those remaining in custody at the end of the second reporting period, by the end of the third reporting period <p>shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.</p>	20%
<p>Outcome 10: Children in custody for more than 24 months and still in custody upon entry of the Consent Decree (children in the “over 24 backlog pool”): For all children in the over 24 month backlog pool,</p> <ul style="list-style-type: none"> ○ at least 35% by the end of the second reporting period ○ at least 35% of those remaining in custody at the end of the second reporting period, by the end of the third reporting period <p>shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.</p>	9%
<p>Outcome 11: By the end of the second reporting period, for all children whose parental rights have been terminated or released during the reporting period, 80% will have adoptions or legal guardianships finalized within 12 months of final termination or release of parental rights</p>	Will be reported on in the 4 th period report ¹⁷
<p>Outcome 12: For children whose parental rights have been terminated or released and the child has an identified adoptive or legal guardian resource at the time of the entry of the Consent Decree, 90% shall have had their adoptions or legal guardianships finalized within six months after the entry of the Consent Decree.</p>	First Period 94% One Time Measure
<p>Outcome 13: For all children for whom parental rights have been terminated or released at the time of entry of the Consent Decree, and the child does not have an identified adoptive resource, 95% shall have been registered on national, regional, and local adoption exchanges, and have an individualized adoption recruitment plan or plan for legal guardianship within 60 days of the Consent Decree.</p>	First period 30% One time measure
<p>Outcome 14: No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.</p>	1%
<p>Outcome 15: Permanency efforts (15/22): By the end of the second reporting period, at least 80% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child’s case record why termination of parental rights should not be filed.</p>	86%

¹⁷ Measurement of this Outcome can not be accomplished until after July 1, 2007. The Outcome sets future 12-month expectations for the experience of children in custody July 1 through December 31, 2006.

Children Achieve Permanency	3 rd Period Performance
Outcome 27: <ul style="list-style-type: none"> By the end of the second reporting period, at least 80% By the end of the third reporting period, at least 85% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.	33%
Outcome 28: By the end of the second reporting period, at least 95% of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.	70%

1. Children in Placement Maintain Family Connections: Outcomes 7, 16, 19, 21, and 23

One of the Consent Decree principles is *"all non-destructive family ties should be maintained and nurtured."*¹⁸ Preserving connections between children and their families, friends, and community is an essential strategy for achieving permanency when those relationships are not destructive. Preservation of these connections starts with placing the children with family resources whenever possible and placing children with their siblings.

Outcome 7 – Diligent Search

A "reasonably diligent search is required by law (O.C.G.A. Section 15-11-55) to identify those individuals who may be considered a resource for placement or custody of the child."¹⁹ The search is to be completed and "filed with the court no later than 60 days after the child's removal."²⁰ Outcome 7 establishes an initial threshold of at least 70 percent of all foster children entering care having a diligent search undertaken and documented within 90 days of entry. By the fourth reporting period (December 31, 2007), the threshold is raised to at least 95 percent having a diligent search undertaken and documented within 60 days.

According to DFCS policy, "at a minimum," the case manager is to conduct the diligent search by identifying, the child's parent(s), relatives, and "other persons who have demonstrated an

¹⁸ See p. 4, principle 2 in the Consent Decree

¹⁹ Social Services Manual, Chapter 1000, Section 1002.3.1, Georgia Department of Social Services

²⁰ Social Services Manual, Chapter 1000, Section 1002.3.3, Georgia Department of Social Services

ongoing commitment to the child.”²¹ Search steps include:

- Interviewing the child and his/her family about extended family members and other significant individuals in the child’s life;
- Reviewing the basic information worksheet (Form 450) initiated during the investigation of maltreatment allegations;
- Using the Family Team Meeting, case planning meetings, or Multi-disciplinary Team Meetings as an opportunity to identify individuals and collect contact information;
- Reviewing the Family Assessment portion of the Comprehensive Child and Family Assessment (CCFA);
- Checking various DFCS data systems;
- Contacting other individuals involved with the family such as day care or school staff, court appointed special advocates, ministers, etc.
- Making direct contact with individuals to determine their interest and suitability as a placement resource.

In practice, these “steps” are not mutually exclusive or sequential. For example, Family Team and other meetings provide an opportunity for interviews and contact with family members and others of significance to the child. In addition, direct contact with individuals to assess placement interest and suitability may lead to information about other potential resources. Not all of these activities are easily documented in case records, such as the act of reviewing documents or checking data systems. Furthermore, DFCS policy also stipulates that the individual circumstances of the case “may dictate how and to what extent the search is conducted.”²² Therefore, these steps may be abbreviated at the caseworker’s discretion if, for example, a child is quickly reunified with the family member from whom he or she was removed.

Although policy stipulates that the search is intended to identify viable placement or custody resources, there are a number of ways the strengths of these individuals can be incorporated into a permanency plan for children that should not be overlooked. The process can be an effective tool in identifying individuals who are or can be part of a supportive team for the child and family. For example, these individuals may be called on to help supervise a safety plan for a child who is returned home or provide housing and transportation for parents or facilitate regular visits among separated siblings.

In addition, while policy and the Consent Decree address the importance of a diligent search for placement resources when a child enters custody, the Counties have demonstrated the importance of it is an on-going activity. Counties report that when a Specialized Case Manager receives a new assignment of a child who has reached the 18th month in custody one of his or her first tasks is to renew the diligent search effort. This effort has produced previously unidentified resources and reconnected children with other resources that had previously been

²¹ Social Services Manual, Chapter 1000, Section 1002.3.1 Georgia Department of Human Resources

²² Social Services Manual, Chapter 1000, Section 1002.3.2 Georgia Department of Human Resources

overlooked or not pursued, or whose ability or interest in serving as a resource for the child may have changed. Therefore, although an abbreviated search may be appropriate based on the immediate case circumstances, conducting a thorough search in the beginning has long-term benefits.

a. Interpretation and Measurement Issues

As described in Appendix B, measurement for period two was taken in April 2007 through a targeted case review of children entering care during the period July 1 through December 31, 2006. By prior agreement with the Parties, children who exited care before 90 days, but for whom there was a documented diligent search undertaken were included in the analysis. Children who exited care before 90 days without documentation that a diligent search was undertaken were not included.

Considering the policy requirements and intent, the flexibility allowed in policy to tailor the search to individual circumstances, and the outcome's language, the Accountability Agents applied the following standards to determine if a diligent search was "undertaken and documented":

1. A "minimum full search" included evidence in the reviewed case files of the following minimum activities:
 - a. Children were interviewed, excluding children under the age of four under the presumption that the child would not have sufficient communication skills to provide useable information.
 - b. Family members were interviewed.
 - c. Other relatives and/or significant others involved in the family were contacted, whether it was to obtain more information or to assess placement suitability.
 - d. There was evidence that the minimal information gathering produced identified potential placement resources for the child.
 - e. There was evidence that potential resources were contacted.
2. If the some of the above steps were missing or not clearly documented, but the child was placed with relatives or such placement was pending (waiting for ICPC approval, home evaluation approval, etc), it was presumed to be an "abbreviated search."
3. Documentation included DFCS forms for recording basic family information, case narratives, Comprehensive Child and Family Assessments (CCFAs), Family and Multidisciplinary Team Meeting notes, case plans, county and state forms for documenting diligent searches, and court documentation.

b. State Performance

- **The State Exceeded the Second Period Outcome 7 Threshold.**

The Consent Decree requires at least 70 percent of children entering care in the reporting period to have a diligent search undertaken and documented within 90 days. Using the criteria

previously described, the file documentation indicated that a diligent search was undertaken for 73 percent of the children in the sample.

Within the final sample of 204 children, 128 children (63%) who entered foster care in the last half of 2006 were in DFCS custody 90 days or more by March 31, 2007 or the last date of their custody. Another 22 children who were in custody less than 90 days were included in the analysis because the documented diligent search activities met the “minimum full search” criteria previously described. Table IV-2 provides the number and frequency of different types of diligent search actions undertaken.

Table IV-2
Diligent Search Actions Undertaken
For 128 Children in Custody 90 days or More
For 22 Children in Custody less than 90 days
N= 150

Actions		Number	Percent
Full Search: Evidence of interviews with child and child’s family and others*	In custody less than 90 days	22	15%
	In custody 90 days or more	61	41%
Subtotal		83	55%
For remaining children in custody 90 days or more:			
Abbreviated Search: Evidence of interviews with family and/or others and child placed/placement pending with relative or resources contacted		27	18%
Subtotal		110	73%
Limited actions that resulted in contacting potential placement resources, no placements arranged as of March 31, 2007		30	20%
Limited action that did not produce contacts		6	4%
No documented action		4	3%
Total		150	101%

Source: Case Record Review, April 2007. Total is greater than 100% due to rounding.

*This category includes families only when child was under the age of 4 years or child was on runaway status and could not be interviewed. Includes cases where only the children were interviewed where documentation indicated that the family members were not interviewed because of extenuating circumstances, such as the child being an undocumented immigrant.

c. Diligent Search Results

Resources identified.

The fundamental purpose of any diligent search is to identify and locate individuals who care about the well-being of the child and are willing and able to provide a safe home for the child while he or she is separated from his or her parents. The thoroughness or robustness of a search

cannot always be discerned from the file documentation. An important indication of the quality of a diligent search, therefore, is the results produced. There was evidence of some degree of diligent search activity for 176 children. There did not appear to be any diligent search activity for four children who had been in custody more than 90 days and there was no activity for 24 children who were in custody less than 90 days (20 of whom were in custody less than 10 days.) These activities, whether they represented a full search or not, produced a list of 754 possible resources for 165 children (94% of 176 searches.) The individuals identified ranged from parents to siblings and other relatives to fictive kin. This represents an average of 4.6 resources or family connections per child. This information demonstrates that many children have resources that are or can be a part of the family team, that help a child stay connected with his or her family and community and that can support a child's return to permanency and safety as well as being considered potential placement resources. Table IV-3 displays the type and number of resources identified.

Table IV-3
Types and Frequency of Individuals Identified as a part of Diligent Search Efforts
N=165

Types of Individual Resources	Total Identified for 165 children	
	Number	Percent of Children
Mother	23	14%
Father	56	34%
		Percent of other individuals
Maternal Relatives excluding mother	432	64%
Siblings (17 Adult and 30 Minor)	47	7%
Paternal relatives excluding father	158	24%
Fictive Kin	27	4%
Stepparents	6	1%
Step siblings (1 adult and 4 Minor)	5	1%
Total relatives or identified resources other than parents	675	101%*
Average number of nonparental resources per child	4.1	

Source: Case Record Review, April 2007. *Percentage is greater than 100% due to rounding.

Resources contacted

Of the 165 children who had resources identified through diligent search efforts, DFCS followed up with a total of 335 individuals for 149 children (90% of the 165). As reflected in Table IV-4, overall 41% of the identified non-parental resources were contacted. Fictive kin were contacted most often of those resources identified.

Table IV-4
Types and Frequency of Individuals Contacted as a part of Diligent Search Efforts
N=149

Individual	Total Identified	Total Contacted	Percent of those identified contacted
Mother	23	16	70%
Father	56	40	71%
Maternal Relatives excluding mother	432	190	44%
Siblings	47	8	17%
Paternal relatives excluding father	158	57	36%
Fictive Kin	27	20	74%
Stepparents	6	3	50%
Step siblings	5	1	20%
Total resources other than the parents	675	279	41%

Source: Case Record Review, April 2007

Placement or discharge resources obtained

Seventy-three of the 165 children for whom resources were identified had a placement and/or discharge resource, visiting resource, or both from the pool of individuals. Specifically, 60 children (36% of 165) had placements or permanency.

Practice Implications

As demonstrated by the data, not all resources that are initially identified are contacted and even fewer become placement and/or visiting resources for children. An image of a funnel emerges as the numbers grow smaller from those identified to those willing, able, and called upon to be a support to children and families. The Accountability Agents have discussed this process with the county staff and recommended that they take a closer look at what produces this pattern and how it might be changed to help families and friends stay better connected to the children in DFCS custody. In addition, they should ensure that their search efforts explore all possible avenues. As reflected in the data presented, not all files had evidence that children who were old enough or verbal enough were specifically interviewed about the people that are important in their lives. Children are an important source for information even if they do not know exact addresses or phone numbers. Specific contact information may be obtained from others or the automated tools available to the case managers. Supervisors and managers should ensure this is a documented step in each diligent search.

Outcome 16 – Sibling Placement

One of the placement standards stipulated by the Consent Decree has to do with the placement of sibling groups. Unless it is harmful to the child or a sibling, a child in a sibling group has exceptional needs or the size of the sibling group makes placement together impractical, sibling groups who enter at or near the same time are to be placed together.²³ As an initial threshold, Outcome 16 establishes that at least 70 percent of all foster children entering care with one or more siblings shall be placed with all of their siblings. By the fourth reporting period, the threshold rises to require that at least 80 percent of all foster children entering care with one or more siblings shall be placed with all of their siblings.

a. Interpretation and Measurement Issues

For purposes of the outcome measurement, “children who entered foster care ... along with one or more siblings” was defined as those siblings who entered on the same day. In reviewing the demographics of all the children who entered foster care during the second period, the typical pattern was for all siblings to enter the same day.²⁴ Of the 760 children who entered custody between July 1 and December 31, 2006, 386 entered as part of a sibling group. It appeared that 90 percent, (348) of the children entered on the same day as their siblings. Another 38 children with at least one sibling in foster care during the reporting period entered on a different date during the time period than another sibling. Of the 38 children, 31 entered within 60 days of another sibling.

Of the 138 children in the sample who had siblings, 128 entered foster care with one or more of the siblings during the last six months of 2006. Among the 128 children, 124 (97%) entered foster care the same day with one or more of their siblings. However, for one child, the record indicated that his placement with his siblings could be harmful to them. Excluding this child from the analysis, 123 children who entered the same day with all or some of their siblings were considered the pool to be used to measure Outcome 16.

b. State Performance

- **The State Exceeded the Second Period Outcome 16 Threshold.**

Of the 123 children in the sample who entered foster care with one or more siblings on the same day, 90 children (73%) were placed with those siblings at the end of the second period. Outcome 16 requires at least 70 percent of the children entering care with one or more siblings during second reporting period be placed with those siblings. As indicated in Table IV-6, an additional 3 children who entered care on different days from one or more siblings were placed with those siblings by the end of the reporting period.

²³ See p. 16, paragraph 5C.4.d of the Consent Decree

²⁴ This pattern was also noted by Hornby Zeller Associates in the Needs Assessment presentation on July 17, 2007.

Overall, 88 of 93 children were with all their siblings by the end of December 2006 or the last date of their custody. Of the five that were not with all their siblings, three children in one sibling group were separated into two groups, two children entering care 167 days after the first sibling. The two siblings who entered later in the reporting period were placed together the entire time they were in state custody up to December 31, 2006. Two other children in a sibling group remained together, but another sibling, an infant, entered care 34 days later and was not placed with them.

Table IV-6
Relationship of Sibling Entry to Sibling Placement on December 31, 2006
or Last Date of Custody
N=127

Entry and Placement Relationship	Number	Number	Percent
Entered the same day with all siblings	112		
Placed with all siblings		82	73%
Entered the same day with at least one sibling	11		
Placed with at least the siblings Who entered on same day*		8	73%
Entered on different date than all other siblings who entered	4		
Placed with all siblings		3	75%
TOTAL	127	93	73%

Source: Case Record Review, April 2007. *In some instances, these children joined or were joined by other siblings.

c. Characteristics and Placement Process

1. *Sibling group characteristics*

Among the 15 children who had siblings who entered care on different days during the period, they entered care anywhere from 3 to 167 days apart. The vast majority, 12 (80%) entered 45 days or less apart from one another.

The size of the sibling groups ranged from 2 to 9. The majority (60%) of children were in sibling groups of 2 or 3.

2. *Placement settings*

Most children who entered care with siblings (92%) were placed in family settings. Table IV-7 reports the number and proportion of children placed in each type of setting

Table IV- 7
Placement Settings of Children With Siblings Entering Foster Care
Between July 1 and December 31, 2006
N=127

Placement Setting	Number	Percent
Foster Homes	85	67%
Relative Homes	28	22%
Parent Homes (children remained in DFCS custody)	5	4%
Group Homes	7	6%
Residential Treatment	2	2%
TOTAL	127	101%

Source: Case Record Review, April 2007. Total greater than 100% due to rounding.

3. Case manager efforts to get separated sibling groups placed together.

Of the 127 children who entered with siblings on the same day, 92 were initially placed with all who entered with them. Another 26 were placed with some of the siblings with whom they entered and nine were not placed with any of the siblings with whom they entered. It appears that the case manager for eight (23%) of the 35 children made efforts during the observation period to locate or recruit a family where the children could be reunited. The placement of the 92 children initially placed with siblings however, shifted over the course of their time in care. Some sibling groups were split while some sibling groups were reunited.

4. Reasons siblings were not placed together.

Of the 34 children who entered custody in the second period with, before, or after one or more siblings but were not placed with all their siblings by December 31, 2006 or the last date of custody, reasons were documented for 13 children. No reasons were documented for 21 children. The reasons cited for the 13 were as follows:

- Size of sibling group (2 children from the same sibling group of 6)
- Number would put the foster home over capacity (1 child)
- Child behaviors toward foster parent. (2 children in 2 sibling groups)
- Child behaviors toward siblings (4 children in 2 sibling groups)
- Siblings divided among relatives (4 children, 2 sibling groups)

Outcome 19 – Placement Proximity

When it is in the best interest of the child for the state to remove children from their homes and place them in state custody, Outcome 19 mandates that children be placed in a setting within the county or within a 50 mile radius of the home from which they were removed.²⁵ By the end of the third reporting period 80 percent of all children in custody are to be in placement settings with this proximity.

a. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in the third period. Appendix B provides a summary of the applied interpretation and measurement.

b. State Performance

- **The State Surpassed the Third Period Outcome 19 Threshold.**

As noted in Table IV-1 for Outcome 19, **89 percent** (161) of the 180 children in the sample of foster children were placed in the county or within a 50 mile radius of the home from which they were removed. The Outcome threshold was 80 percent. This performance is virtually the same as the second period performance of 88 percent.

Outcome 21 – Parent-Child Visitation

a. Interpretation and Measurement Issues

The outcome language refers to “*appropriate visitation*”²⁶ between children and parents where the goal is reunification. DFCS policy and practice provides a frame of reference for determining “appropriate” as it establishes several requirements with regard to parental-child visitation. First, “if possible” a child should have a family visit in the first week after removal.²⁷ Second, a plan for parental visitation should be a part of every Case Plan.²⁸ Third, “when agency resources allow, visitation shall be scheduled at two-week intervals unless the court has specified another visitation arrangement.”²⁹ Finally, established practice in the field requires a minimum of monthly visits when “agency resources do not allow” and the court does not dictate otherwise. Given these policy requirements, the case record review was designed to gather information on both the planned schedule for visitation and the actual visitation. In the

²⁵ See p. 35, Outcome 19, of the Consent Decree

²⁶ See p. 36, Outcome 21, of the Consent Decree

²⁷ Social Services Manual, Section 1009.3 Georgia Department of Human Resources

²⁸ Social Services Manual, Section 1009.4 Georgia Department of Human Resources

²⁹ Social Services Manual Section 1009.5, Georgia Department of Human Resources

absence of a schedule dictating otherwise the performance of the state was assessed according to the minimum monthly visitation standard.

Although the Consent Decree specifies visitation between parent(s) and children, in some cases the child was removed from a relative and that relative is the reunification resource. In these cases, the record review considered the reunification resource equivalent to the parent(s).

Measurement issues included the limitations of case documentation, how to address those children living with relatives and those children who were reunified during the reporting period but whose records contained little or no documentation relating to parent child visits. Case documentation often does not include precise dates of visits because case managers are not always present for the visits. However, case managers may record what they learn from parents and children about the visits. As a result, in a portion of the cases the reviewers could determine “regular” visitation was occurring but could not match the pattern of visits to the schedule established in the case plan or Family Team Meetings. Such cases were counted toward the achievement of the outcome.

A portion of the children in the sample live with relatives. These circumstances may allow for frequent visitation between parents and children.³⁰ Again, however, the dates and frequency may not always be reported to the case manager and, therefore, documented. These children were included in the denominator for measurement of the outcome, but not the numerator unless there was documentation of a visitation pattern.

Finally, a small number of children achieved reunification without any or with few documented visits with parents or their reunification resource. Again, this does not mean that the children did not have contact with their parents. These children were included in the denominator for measurement, but not the numerator.

Within the sample of 180 children in foster care, 116 had the permanency goal of reunification. However, the records for 6 children were excluded from the Outcome 21 analysis because the children were placed with the reunification resource the entire reporting period or they were in custody a brief period of time during the review period.

³⁰ Annie E. Casey Foundation, Elders as Resources Fact Sheet, *Basic Data: Kinship Care*, 2005, found at <http://www.aecf.org/upload/PublicationFiles/FactSheet.pdf>,

b. State Performance

- **The State Fell Short of the Third Period Outcome 21 Threshold.**

Among the 110³¹ children used in this analysis, 62 (56%) had some documented visitation with their reunification resource during the time they were in custody between January 1 and June 30, 2007. However, a much smaller number could be considered to have documented regular visitation as suggested by their plans or policy. **Twenty-five children (25%)** had regular visitation. The threshold for this outcome in the third period is 85 percent.

DFCS efforts to promote visitation

The records indicated that case managers made efforts to promote and support parental visitation for 48 (44%) of the 110 children. Efforts included arranging for transportation, reminding resources about the visits, asking substitute caregivers to help make the visits occur, and arranging for a convenient visit location. There appeared to be little follow-up, however, with parents after the visits took place or were to take place. Efforts to locate parents whose whereabouts became unknown were mixed. A few case managers attempted to locate the parents by going to the last address they had for the parent, or continually trying the phone numbers they had, or asking the children to relay messages to their parent(s) should they be in contact with them. More than one child acknowledged telephone conversations with their parents but did not know where they resided or how to contact them directly. In these circumstances, case managers asked children to request that the parents contact the case manager. However, more often than not, documented attempts to locate parents were missing.

Factors Affecting State Performance

In addition to the parent's location becoming unknown, other factors appeared to affect the State's performance. Children running from placements make continued and frequent visitation difficult. Six children were on runaway status off and on during the review period. Parental or child mental health issues may have affected the lack of visitation in two cases. Distance was an issue in two other cases.

Another factor is the appropriateness of the permanency goal. This is particularly true for the approximate 30 percent of children in the sample who had been in DFCS custody more than 12 months. The circumstances of several children with the goal of reunification suggested that reunification may not be realistic. One child's mother was deceased, another had an adoptive mother who wanted to dissolve the adoption and have nothing more to do with the child, and others had parents who were living in other states. In some of these situations the children

³¹ Because this is smaller than the entire sample of 180, any conclusions drawn from the 110 children used in this analysis are subject to a margin of error of ± 9 percent. Actual parent-child visitation may be 9 percentage points greater or worse than 25 percent.

were placed with relatives. In one instance, the mother of a child who had been in DFCS custody nearly seven years and is placed with a relative had moved to Louisiana, but the most recent court order required DFCS to continue working with the mother. County staff have reported that their efforts to change reunification plans often meet with resistance from the court. The recommendations of the State's 13th month permanency review process suggest that *"Special attention should be given to the examination of cases with a plan of reunification when there is no documentation or a sufficient level of interaction with the parents/guardians to support this goal."*

As with other measures that rely on the case documentation, a third factor affecting performance may be the lack of documentation that visits are occurring. Or the performance may be low because the Counties have only recently initiated efforts to track this activity, thus bringing more oversight and accountability to the issue.

Implications for Practice

Almost universally in child welfare, the degree to which parents and other reunification resources remain in contact with their case managers and their children is used as a measure of parental interest in or commitment to making the changes considered necessary for their children to be returned home. Therefore, the burden to stay connected often falls solely on the parents and is often thought to be outside the control of the case managers except through the threat of taking action to terminate parental rights. However, the records did indicate that parents may stay in contact with their children while avoiding the case managers. DFCS is in the process of developing a case practice model that includes a renewed emphasis on engaging parents and other family members in a supportive team approach rather than a coercive one. Practice in other states suggest that such an approach will help build trusting relationships with parents and increase the likelihood they will remain in frequent contact with the case managers.

This aspect of practice in particular requires a partnership with the court. One step the counties could take is to collaborate with the courts to identify what judges and review panels want to see to ensure that reunification efforts have been exhausted and reunification is not realistic. They may wish to see more intensive efforts to locate and reconnect with parents to confirm that the parents are not committed to reunification.

Outcome 23 – Sibling Visitation

DFCS has many sibling groups in its custody. When these children cannot be placed together, it is important for them to remain connected with one another through regular visits. The only times this is not desirable are when it is not in the best interest of the child to visit a sibling due to safety reasons or the emotional trauma it might cause. To ensure that sibling visitation is a regular part of practice, the Consent Decree includes an outcome (number 23) that sets thresholds for the percent of children who see their separated siblings each and every month for

the previous 12 months, or every month they have been in custody if less than 12 months.³² By the end of the second reporting period, and continuing thereafter, at least 80 percent of separated siblings are to have had at least monthly visits with their siblings each and every month for the previous 12 months in custody.

a. Interpretation and Measurement Issues

Information regarding sibling visitation is not currently tracked in the State IDS system; therefore it is not information that is easily retrieved. It is, however, a practice that the counties started tracking in July 2006 and the county Quality Assurance units began validating during the second reporting period. For the third reporting period, the Accountability Agents collected information directly from the documentation in children's records. To measure this outcome, the record reviewers looked for documentation indicating that children saw at least one sibling in custody from whom they were separated at least once a month during each of the previous 12 months in custody.

b. State Performance

• The State Fell Short of the Outcome 23 Threshold.

As noted in Table IV-1 for Outcome 23, the Consent Decree's sibling visitation requirements were met for **12 (21%) of the 58 children**³³ in the sample who had one or more siblings in custody but in separate placements. These children visited with at least one separated sibling every month for the last 12 months or since they entered care. The outcome threshold is 80 percent. Although the measurement was limited to the frequency with which the child saw at least one sibling, it should be noted that when visitation did occur, the reviewers saw a pattern of children seeing all or many siblings during a visit. Table IV-8 describes the visitation picture captured by the case record review.

These third period results are about the same as the second period results of 19 percent of separated siblings who had 12 sequential months of monthly visits. However, there continue to be signs that indicate movement in the right direction. First, another 7 children (12%) only missed sibling visitation in one of the required months. Second, over time, monthly sibling visitation ranged from 44 percent to 72 percent each month January through June 2007 compared to 16 to 41 percent July through December 2006. This means that an increasing proportion of children have the opportunity to see each other monthly, every month over an extended period of time. Third, the Counties continue to focus on improving the monthly visitation rate through internal tracking and reporting.

³² See p.36, Outcome 23, in the Consent Decree

³³ Because this is smaller than the entire sample of 180, any conclusions drawn from the 58 children who were separated from their siblings for all or some of the time they were in care would have a margin of error of at least +/- 13%. It could possibly be greater or worse since the sample was not drawn from only the universe of children who were separated for some or part of the time.

Barriers to performance include children who's behaviors prevent more regular visitation for fear of harm or stress on the their siblings, children living with relatives but separated by more than 50 miles, children who do not wish to see their siblings or who run away. Children with these barriers still had some visits with their siblings in the last 12 months.

Table IV-8
Separated Sibling Visitation Pattern for the 12 months Preceding June 30, 2007 or the last
date of DFCS custody*
N=58

Frequency of meeting required visitation	Number	Percent
Met outcome requirement of monthly visits each month for every month of previous 12 months.	12	21%
Missed visitation in one of the required months (i.e. equivalent to 11 of 12 months)	7	12%
Did not meet outcome requirement but visited with siblings at least half of the months separated (i.e. the equivalent of 6-8 visits in a 12 month period)	19	33%
Visitation pattern was infrequent and sporadic (i.e. the equivalent of less than 6 visits in a 12 month period)	19	33%
No visits were documented	1	2%
Total	58	101%

Source: Case record review, August-September 2007. Total is greater than 100% due to rounding.

*For those children in custody less than 12 months, only the applicable number of months in custody was considered.

2. Children Achieve Permanency: Outcomes 4, 8a, 9, 10, 11, 14, 15, 27, and 28

Permanency for a child can be achieved in many ways. Subject to the absolute constraint represented by child safety, the initial focus of child welfare work is always on reunification with the birth parents. Should that result be unattainable, the state may pursue transfer of custody to a relative or adoption by a relative or another family. Legal guardianship is also a means of securing permanency for a child. The Consent Decree stipulates another permanency option. This option is designed for a relative who is "willing to assume long-term responsibility for the child but has reasons for not adopting the child or obtaining guardianship or permanent legal custody, and it is in the child's best interest to remain in the home of the relative rather than be considered for adoption, permanent legal custody, or guardianship by another person."³⁴ In these circumstances, the child will remain in the custody of the state with the relative committing to the "permanency and stability" of the placement.

Table IV-9 displays the distribution of permanency goals for the 180 children in the foster care sample. About two-thirds (64%) of the children had a judicially determined or presumed goal of

³⁴ See p.3, definition T of the Consent Decree

reunification.³⁵ The permanency goal of reunification is presumed for those children in the sample who had been in DFCS custody less than 12 months unless there was evidence of a “non-reunification” court order prior to the first annual permanency hearing.³⁶ As noted earlier in the discussion of parental visits (Outcome 21,) a permanency goal of reunification may not be realistic or appropriate for all the children who currently have that goal. Children with the goal of adoption represented the next largest proportion -- 12 percent of the 180 children. Another 10 percent had the goal of placement with a fit and willing relative, and 10 percent had the goal of long term foster care or “emancipation” referring to when a youth reaches the age of 18. For two percent, a permanency goal was not documented.

Table IV-9
Permanency Goals of Children
N= 180

Permanency Goal	Number	Percent
Judicially Determined/ Presumed Reunification*	116	64%
Adoption	21	12%
Placement with a Fit and Willing Relative	18	10%
Long Term Foster Care	9	5%
Emancipation	9	5%
No goal documented	4	2%
Total	180	100%

Source: Case Record Review, August 2007. * Presumed re-unification goal for children in care for less than 12 months.

When children exit foster care, it is a goal of Georgia’s child welfare system that they will have exited to a stable, family care arrangement. In particular, exits to reunification and adoption are intended to be life-long arrangements. The casework done while a child is in custody and the planned aftercare can help ensure these exits remain successful. Unfortunately, circumstances sometimes require children to reenter care to ensure their safety or well-being. Two outcomes, Outcome 4 and Outcome 14, focus on the State’s performance in ensuring long-term permanency.

Outcome 4 – Re-Entry into Custody

In Outcome 4, the Consent Decree establishes a measure of the stability of foster care exits: the percentage of children who re-enter state custody within 12 months of having previously left custody.³⁷ Outcome 4 sets the same standard as the national outcomes established by the U.S.

³⁵ For an explanation of what is meant by “presumed goal of reunification in the first 12 months, see Social Services Manual Chapter 1006.4 Georgia Department of Human Resources and Josylyn-Gaul, D., *Georgia’s Responsibilities Toward Children in Foster Care: A Reference Manual*, Karen Worthington, editor, the Barton Child Law and Policy Clinic of Emory University (1st ed. Dec. 2004). p 43.

³⁶ See Social Services Manual, Chapter 1006.4 Georgia Department of Human Resources

³⁷ See p 32, Outcome 4, of the Consent Decree

Department of Health and Human Services, no more than “8.6 percent of all foster children entering custody shall have re-entered care within 12 months.”

a. Interpretation and Measurement Issues

The State’s information system (IDS) does provide a calculation to measure Outcome 4. The case record review of a sample of 180 children in foster care at any time during the first half of 2007 only included 50 children who entered custody during the review period. As a result, this number is too small to accurately assess the State’s performance. The IDS data is used for reporting performance, with the case record review as a comparison.

b. State Performance

• The State Fell Short of the Outcome 4 Threshold.

As noted in Table IV-1 for Outcome 4, the state’s IDS system reports that **9.6 percent** of all children in custody as of June 30, 2007, had re-entered care within 12 months of previously exiting custody. The outcome threshold is 8.6 percent. The case record review looked at the re-entry rate of those children who entered custody in the first six months of 2007. Of the 50 children who entered, it appeared to be the second entry within a year for 1 child, or 2 percent. As measured by IDS, the State’s performance remained about the same as it was at the end of 2006.

Outcome 14 – Adoption Disruptions within 12 Months of Finalizations

Outcome 14 is concerned about adoptions that fail or are at the brink of failure. These are situations where adoptive parents no longer can or wish to parent the children to whom they made lifetime commitments or the children are found to be at risk of harm and the children must be removed. DFCS works with these families to achieve reunification and prevent dissolution, but the effort is not always successful. The Consent Decree establishes an on-going threshold that no more than 5 percent of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to finalization.³⁸

a. Interpretation and Measurement Issues

The interpretation of this measure, as agreed to by the parties, includes those children who return to the custody of DFCS/DHR after their adoption has been finalized. This includes children who are in the temporary custody of the Department while reunification is attempted and those children who return to the Department’s permanent custody because the adoption has been dissolved.

³⁸ See p. 34, Outcome 14, of the Consent Decree

Measurement issues include timing and case identification. In terms of timing, the first cohort of children for whom this outcome can be measured are those children who were adopted during the first reporting period, October 27, 2005 to June 30, 2006. In terms of case identification, it is difficult to link case records of children who are returning to foster care from an adoption to their previous case records because key identifying information has changed and adoption records have been sealed. An adopted child always receives a new last name and social security number. In some cases, the child also receives a new first name. In addition, adoptive parents may live or move out of Georgia after the adoption and the disruption or dissolution may occur in another state. Furthermore, children who are discharged to relatives for the purposes of private adoption will not necessarily be reflected in the case files or data system as an adoption. Case identification, therefore, currently relies on a case manager's familiarity with the family through on-going post adoption communication, and comparing adoption dissolution actions that occur in the state to the adoptions that occurred in the state. In March 2007, the State established new procedures for collecting information about prior adoption activity as children enter care. This change requires case managers to record in IDS, 1) whether the child was ever adopted, 2) type of adoption – public or private, 3) country of adoption, 4) state of adoption, and 5) if a Georgia adoption, the county of adoption.

Finally, although assessing adoption disruptions is problematic for the reasons cited above, such cases have been identified in the record reviews that have been completed of the general placement populations. What has typically been found in these reviews are adoption disruptions that have occurred several years after the adoption, when the children are older and more behavioral issues have emerged. None of the adoption disruptions identified through the first three reporting period's placement samples has disrupted within 12 months.

b. State Performance

• The State Surpassed the Third Period Threshold for Outcome 14.

The total number of finalized adoptions for the period October 27, 2005 to June 30, 2006 was 161. Within this group, one child is known to have re-entered the Department's custody and it appears the adoption will be dissolved. This one child represents **less than one percent** of the children in the cohort. The outcome threshold is no more than 5 percent.

Outcome 8a – Permanency Exits for Those Children Who Entered DeKalb or Fulton Custody on or After October 27, 2005

Outcome 9 – Permanency Exits For Those Children Who Had Been In the Custody of Dekalb or Fulton Custody Up To 24 Months as Of October 27, 2005

Outcome 10 - Permanency Exits For Those Children Who Had Been In the Custody of Dekalb or Fulton Custody More Than 24 Months as Of October 27, 2005

The Consent Decree established four permanency outcomes to be achieved among four different cohorts of children. Outcome 12, achieved in the first period, related to the cohort of children with identified adoptive resources at the time the Consent Decree was entered.³⁹ Outcome 8 (parts a and b) relate to children that enter care after the effective date of the Consent Decree.⁴⁰ The children to whom Outcome 8 applies represent a dynamic cohort. In other words, it will continue to change as new children enter care and others exit. Outcome 8a will continue to apply to all those children who exit within 12 months. Outcome 8b will be applied to all those children who enter on or after October 27, 2005.⁴¹ The third cohort, to which Outcome 9 relates, consists of children who were in care less than 24 months at the Consent Decree's inception in October 2005.⁴² Finally, children who were in state custody for 24 months or more at the Consent Decree's inception are the focus of Outcome 10.⁴³

a. Interpretation and Measurement Issues

There were no interpretation or measurement issues. Performance reported for outcomes 8a, 9, and 10 is based on IDS data and documentation of relatives who have signed "an agreement for long-term care."⁴⁴ The outcome data from IDS were not independently validated by the Accountability Agents. However, the Accountability Agents did participate with County leadership in monthly review of the data and the State's efforts to safely discharge children to permanent families. Furthermore, removal dates and discharge dates were collected for children in the foster care sample and compared to what was in IDS.

b. State Performance

- **The State Surpassed the Third Period Threshold for Outcomes 8a**

As noted in Table IV-1 and displayed in detail in Table IV-10, the State's Outcome 8a performance as reported from the state's IDS system is as follows:

- **Of 2803 children, who entered DFCS custody since October 27, 2005, 1254 (45%) exited State custody within 12 months to return to their parents, live with relatives or guardians, or begin life with a new, adopted family. (Outcome 8a)**

Through June 30, 2007, there were approximately 2800 children who met the Outcome 8a criteria. From this cohort, 45 percent (1254 children) had exited to a "positive permanency" arrangement within 12 months. The outcome threshold is 40 percent. This means that that these

³⁹ Dimas, J.T. and Morrison S. *Period I Monitoring Report, Kenny A. v Perdue*, November 2006, pp 41-45.

⁴⁰ October 27, 2005

⁴¹ See p. 32 and 33, Outcomes 8a and 8b, of the Consent Decree

⁴² See p. 33, Outcome 9, of the Consent Decree

⁴³ See pp 33 and 34, Outcome 10, of the Consent Decree

⁴⁴ See p. 3, Definition T, of the Consent Decree

children had returned to live with their parents, other relatives or guardians. In a few cases the children were adopted into new families. Table IV-10 provides the distribution of all the children in this group who exited custody by June 30, 2007. Another 58 children exited to reunification, custody of relatives, or guardianship since coming into care, but these permanency exits occurred more than 12 months after the children entered. Of the 58, 12 did exit to guardianship in less than 24 months and can be included in the Outcome 8b performance measurement, but the remaining 46 can not. Although the permanency exits of the 46 children do not contribute to either Outcome 8a or Outcome 8b, the accomplishment should be recognized. In order to address this issue accurately, Table IV-10 does provide preliminary data for Outcome 8b, but it is not a measurement of performance because the time frame for fully achieving Outcome 8b does not begin until October 27, 2007, in the fourth reporting period. The State's performance on Outcome 8a is comparable to that at the end of period two.

Table IV-10
Outcome 8a
Children Entering DFCS Custody on or after October 27, 2005 Who Exited to Permanency by
June 30, 2007

	Outcome 8a	Preliminary Outcome 8b data
	Children who entered custody on or since October 27, 2005 in custody 12 months or less as of June 30, 2007	Children who entered custody on or since October 27, 2005 as of June 30, 2007
Number of children in cohort	2803	2803
Exits as of June 30, 2007		
Reunification	1025	1025
Adoption	8	8
Guardianship	71	83
Live with other relative (permanent legal custody)	150	150
Permanent Placement with relatives	0	0
Number Exited to Permanency but not in required time frame	58	46
Total number exiting	1312	1312
Other exits (transfer to other counties, emancipation, etc)	168	168
Total for Outcome Measurement	1254	1266
Percentage exiting for Outcome Measurement	45%	46%
Remaining number in cohort at June 30, 2007	1323	1323
	Average length of stay: 8 months	
	Median length of stay: 7 months	
	Average age: 8	
	49.5% female; 50.5% male	

Source: IDS and county tracking systems. *Beginning Third Period cohort numbers are slightly lower than the period II ending number previously reported due to data entry lag time for formally closing cases.

- **The State Fell Short of the Third Period Thresholds for Outcomes 9 and 10.**

As noted in Table IV-1 and displayed in detail in Table IV-11, the State's Outcomes 9 and 10 performance as reported from the state's IDS system is as follows:

- **Of 625 children who had been in DFCS custody up to 24 months as of October 27, 2005 and remained in custody on December 31, 2006, 122 (20%) had positive permanency exits between January 1 and June 30, 2007. (Outcome 9)**

As of December 31, 2006, 625 children remained in the cohort of children who had been in DFCS custody for 24 months or less on October 27, 2005. By June 30, 2007, another 122 (20%) had returned to live with their parents, other relatives or guardians, or been adopted. This compares to the third period threshold of 40 percent established in the Consent Decree. Another 36 children had other permanency exits during this time period while 469 children remained in custody.

The Accountability Agents want to recognize the State's current practice efforts to help the children in this cohort achieve permanency as quickly as possible and not simply "manage by the numbers." By December 31, 2006, the State was expected to help "at least" 35 percent of the cohort or approximately 500 children achieve permanency. In fact, the State's performance went beyond the minimum and helped about 700 children achieve permanency. Ironically, this strong performance in period two made the period three threshold harder to attain. In the second period, 199 children in excess of the number needed to meet the standard achieved permanency. That was a positive development for those children, but having exited care in the second period, they did not count toward the period three standard. The Accountability Agents believe that in considering the State's performance on Outcomes 9 and 10, the cumulative accomplishments since the Consent Decree are meaningful in addition to the performance in an individual reporting period.

- **Of 414 children who had been in DFCS custody over 24 months as of October 27, 2005 and remained in custody on December 31, 2006, 39 (9%) had positive permanency exits between January 1 and June 30, 2007. (Outcome 10)**

As of December 31, 2006, 414 children remained in the cohort of children who had been in DFCS custody for over 24 months as of October 27, 2005. By June 30, 2007, another 39 (9%) had returned to live with their parents, other relatives or guardians, or been adopted. The outcome threshold was 35 percent. The majority have been adopted, the rest returned to live with their parents, other relatives or guardians. Another 27 children had other permanency exits while 349 children remained in custody.

The members of the cohort of children in custody more than 24 months as of October 27, 2005 are, not surprisingly, older children. The average age of the children is 13 compared to 8 for the

children remaining in the Outcome 8 cohort. In addition, many of the remaining children have been in custody well over 24 months, with the average length of stay being 7.4 years. The children's age and their length of time in care present serious challenges to achieving the next outcome threshold for these children.

Table IV-11
Outcomes 9 and 10
Remaining Children Who Entered DFCS Custody before October 27, 2005 and Who Exited to
Permanency by between January 1 and June 30, 2007

	Cohorts of Children		
	Children in custody for <u>up to</u> 24 months and still in custody on October 25, 2005 (Outcome 9)	Children in custody for <u>more than</u> 24 months and still in custody on October 25, 2005 (Outcome 10)	Total
Number of children in cohort	625*	414*	1039
Exits			
Reunification	44	7	51
Adoption	41	19	60
Guardianship	5	2	7
Live with other relative	34	11	45
Permanent Placement with relatives	0	0	0
Other exits (transfer to other counties, emancipation, etc)	36	27	63
Total number exits	160	66	226
Total for Outcome Measurement	124	39	163
Percentage exiting for Outcome Measurement	20%	9%	
Remaining number in cohort July 1, 2007	469	349	818
Average length of stay	30 months (2.5 years)	89 months (7.4 years)	
Median length of stay	30 months (2.5 years)	75 months (6.25 years)	
Average age	10	13	
Percent female	50.1%	45%	
Percent male	49.9%	55%	

Source: IDS and county tracking systems. *Beginning Third Period cohort numbers are slightly lower than the period II ending number previously reported due to data entry lag time for formally closing cases.

Outcome 11 – Adoptions within 12 Months of Termination of Parental Rights

Outcome 11 cannot be measured yet because it focuses on successful adoption within 12 months of children whose parents had their rights terminated between July 1 and December 31, 2006.⁴⁵ Outcome 11 will be measured after July 1, 2007.

Outcome 15 – Permanency Actions for Children Reaching Their 15th Month of Custody in Most Recent 22 Months

To prevent children from long-term foster care stays, Federal law requires DFCS to file for termination of parental rights when a child has been in care for 15 cumulative months of the previous 22 months. There are three exceptions to this requirement, they are:

- The child is being cared for by a relative;
- The state has documented a compelling reason that filing a petition to terminate would not serve the child's best interests; or
- The state has not made reasonable efforts to reunify the family.⁴⁶

Furthermore, Federal regulations state and DFCS policy advises, that a “compelling reason” must be based on the individual case circumstances guided by what is in the best interest of the child.⁴⁷ Examples of compelling reasons provided in Federal regulations include:

- Adoption is not the appropriate permanency goal for the child;
- No grounds to file a petition to terminate parental rights exist; and,
- The child is an unaccompanied refugee minor.⁴⁸

DFCS policy offers these additional examples:

- The child is 14 (or older), has been counseled about the decision and its ramifications, and maintains his/her objection to being adopted;
- The child is in a residential treatment facility where his/her therapeutic needs are being met; adoption is unlikely or undesirable; and,
- The child has spent a significant portion of his life in the home of his parents and has a positive and meaningful attachment to them.

The Consent Decree Outcome 15 stipulates an increasing threshold for the percentage of children who reach their 15th month who have had either 1) a petition for the termination of parental rights filed as to both parents or legal caregivers, as applicable, or 2) documented compelling reasons in the case record as to why such action is not in the best interest of the

⁴⁵ See p34, Outcome 11, of the Consent Decree

⁴⁶ Adoption and Safe Families Act, see also Social Services Manual Chapter 1000, Section 1002.7, Georgia Department of Human Resources

⁴⁷ See Social Services Manual, Section 1002.12.3, 1002.17, and 1013.11 Georgia Department of Human Resources

⁴⁸ See the website http://ncsconline.org/WC/FAQs/Print/Prt_TermPRFAQ.htm

child.⁴⁹ In period two this percentage was 80 percent and this continues to be the standard for the third period. The Consent Decree also stipulates that *“DFCS will not use as a documented compelling reason for not filing a petition for termination of parental rights that fact there is an absence of an adoptive resource for the child.”*⁵⁰

a. Interpretation and Measurement Issues

Each county has a data base for tracking children who have reached or are approaching their 15th month in care within the most recent 22 months. The counties add to this data base by extracting information regarding length of stay and “TPR status” from the State’s IDS system. County data, therefore, was used as the primary source of information to evaluate the continued progress on this outcome. Information found in the sample of placement records was used to independently validate the county data.

The Accountability Agents reviewed and validated the county data as follows.

- First, independent of the county data, the case record review of children in foster care collected information about the parental rights of children in custody at least 15 months. These questions asked whether parental rights had been terminated for one or both parents, if a petition to terminate rights had been filed, and, if neither of these actions had been taken, were there exceptions for taking these actions, including compelling reasons, documented primarily in the case plan or court documentation, or, secondarily, other file documentation. These questions applied to 79 children in the sample of 180 children based on their length of stay.⁵¹
- Second the Accountability Agents reviewed all of the compelling reasons cited in the data bases and compared them to Federal and State policy guidance. This effort frequently involved requesting more information about the circumstances of the case that led to the compelling reason.

Final measurement of the State’s performance used the population of children to whom the Federal regulatory exceptions did not apply. In other words, if a child was placed with a relative or there was a judicial indication in the child’s record that the State had yet to make “reasonable efforts to reunify the family,” the child was removed from the analysis.

⁴⁹ See p 34, Outcome 15, of the Consent Decree

⁵⁰ See p. 11, paragraph 4E.2 of the Consent Decree

⁵¹ Because this is smaller than the entire sample of 180, any conclusions drawn from the 79 children used in this analysis are subject to a margin of error of ± 11 percent.

b. State Performance

- **The State Surpassed the Second Period Outcome 15 Threshold**

As noted in Table IV-1 for Outcome 15, **86 percent** of the children in care 15 of the previous 22 months were legally free to be adopted or the State had filed to terminate parental rights or documented reasons why it had not taken such action. The outcome threshold was 80 percent. Table IV-12 summarizes the different components of the Counties' performance as analyzed from the data in their tracking systems.

The majority of reasons cited noted the relationship of the child to his/her parents or other relatives. In addition, in a number of cases, the parents were still attempting to complete the case plan. A portion of the children were over 14 and did not want to be adopted. For a small number of the cases, the compelling reason cited was "no adoptive resource." Per the Consent Decree,⁵² cases with this reason were not considered to have a documented compelling reason.

⁵² See p. 11, paragraph 4E.2 of the Consent Decree

Table IV-12
Status of Children Who Had Been in DFCS Custody 15 of the Previous 22 months
As of June 30, 2007

Category		Total		
		Number	Percent	Cumulative
Children who reached or had surpassed their 15 th month in custody in the last 22 months between January and June 2007		1306		
Excepted subpopulations total		202		
<i>Children placed with relatives</i>		196		
<i>The State has not made reasonable efforts to reunify the family</i>		6		
Pool of Children for Outcome 15 Measurement		1104		
Parental Rights of Both Parents have been terminated or relinquished		305	28%	
DFCS has filed a petition to complete the termination of the parental rights of both parents or care givers where applicable		52	5%	32%
There is a documented compelling reason for not terminating parental rights		592	54%	86%
Reasons cited	Number			
Child is age 14 or older and does not wish to be adopted	183			
Reunification remains the goal and child has a close bond with family; parents are completing plan	195			
Child behavior/special need, making TPR at this time inappropriate	44			
Other (unique circumstances or a combination of the two or more of the reasons given)	170			
There is no documented Compelling Reason not to file a petition to terminate parental rights before June 30 or date of discharge		104	9%	95%
There are plans to terminate parental rights, but a petition had not yet been filed as of June 30 or date of discharge		51	5%	100%
Total		1104		

Source: County tracking systems compared to August-September Case Record Review

Outcome 27 – Timely Semi-annual Judicial or Administrative Case Plan Reviews

Children are expected to have case plans developed within 30 days of entering State custody. According to State policy and the Consent Decree, they are to be initially reviewed by the court or designated panel within six months and every six months in custody thereafter.⁵³

⁵³ See p. 7, paragraphs 4A.4 and pp. 7-8, paragraphs 4B.1-6, and p. 37, Outcome 27, of the Consent Decree

According to Outcome 27, at least 85 percent of the children are to have timely semi-annual reviews by the end of the second reporting period.

a. Interpretation and Measurement Issues

There were no interpretation or measurement issues. Performance reported for outcome 27 is based on case record review data. However, in the second period, the record review was designed to collect information on the timeliness of DFCS submission of plans for review. In the third period, the record review collected information on the date of actual reviews and timeliness of the reviews.

b. State Performance

- **The State Fell Short of the Outcome 27 Threshold**

As noted in Table IV-1 for Outcome 27, case file documentation indicates that **33 percent (41)** of the foster children in custody for six months or more had documented timely case plan reviews completed by the Juvenile Court or Juvenile Court Review Panel (JCRP) or a timely request for review. The threshold for this outcome in period three was 85 percent. In the sample of 180 children, 126⁵⁴ children had been in custody 6 months or more as of June 30, 2007. For these 126 children:

- 39 children had their case plans reviewed within 6 months of entry or the previous six month court review according to case file documentation which included court orders, JCRP reports, case manager narrative, and other correspondence indicating the timing of reviews;
- 2 children had not had their case plan reviewed, but DFCS had filed a motion requesting a review within 45 days of when it was due;
- 24 children had their plans reviewed, but not within 6 months;
- 57 children do not appear to have had their plans reviewed at all;
- 2 children were scheduled to have their plans reviewed; and
- 2 children had no case plans

This performance represents a substantial decline from the second reporting period where 70 percent of the children had timely 6-month court reviews. Part of this difference may be the result of changing the wording in the case review data collection guide as previously noted. This potential difference between the dates of submission and actual review dates will be explored further in the in the 4th period review to better understand what may affect performance in this area.

⁵⁴ Because this is smaller than the entire sample of 180, any conclusions drawn from the 126 would have a margin of error of ± 9 percent.

Among all 63 plans reviewed by either the Juvenile Court or the JCRP, there were court orders documenting Court approval for 34 (54%). There were no court orders in 29 files to indicate adoption or rejection of the plans by the court.

Table IV-13 provides the information captured from the case files regarding the 63 documented six-month reviews (those that were timely as well as those that were not.)

Table IV-13
Characteristics of Six-month Case Reviews
N=63 (all plans reviewed)

Characteristic	Number	Percent
Participants		
Birth Mother	25	40%
Birth Father	8	13%
Child	21	33%
Pre-adoptive parents	1	2%
Relative care givers/ Extended Family Members	8	13
Foster parents/placement providers	11	17%
DFCS case manager	58	92%
DFCS supervisor	4	6%
Other DFCS representative	2	3%
CCFA provider	3	5%
Private agency case manager	5	8%
Medical and mental health professionals	1	2%
Parents' attorney(s)	13	21%
SAAG (State Assistant Attorney General)	15	24%
Child's advocate	18	29%
Panel members	42	67%
Elements Evaluated/Considered		
Necessity and appropriateness of child's placement	53	84%
Reasonable efforts made to obtain permanency	42	67%
Degree of compliance with specific goals and action steps	41	65%
Progress made in improving conditions that caused removal	28	44%
Changes that need to be made to plan	15	24%
County recommendations	19	30%
Parent recommendations	6	10%
JCRP conducted review	46	73%
Total JCRP reports submitted	43	93%
Number of reports with Panel findings	42	98%
Number of reports with Panel recommendations	40	93%
Number of reports with County findings	22	51%
Number of reports with County recommendations	21	48%
Number of reports with County proposed plan for permanency	5	12%
Court conducted review	17	27%
Plan adopted by Juvenile Court	34	54%

Source: Case Record Review, August-September 2007

Outcome 28 – Timely Annual Judicial Permanency Reviews

According to Federal and State policy and the Consent Decree, children are expected to have a permanency review every 12 months they are in custody.⁵⁵

a. Interpretation and Measurement Issues

There were no interpretation or measurement issues. Performance reported for outcome 28 is based on case record review data.

b. State Performance

- **The State Fell Short of the Outcome 28 Threshold**

As noted in Table IV-1 for Outcome 28, **70 percent** of the foster children in custody for 12 or more months had timely permanency hearings held by the Juvenile Court or a timely request for a hearing when the time had expired. The threshold for this outcome was 95 percent. In the sample of 180 children, 95⁵⁶ had been in custody 12 months or more as of June 30, 2007 or their last day in custody. Sixty-six of these children had a permanency hearing within 12 months of entry or the previous twelve-month permanency hearing. These hearings are held to determine whether reasonable efforts have been made to achieve permanency. There were no instances of DFCS follow-up within 45 days of the expiration of the 12-month time frame.⁵⁸

The State's performance has declined since the second reporting period when the case record review found 80 percent of children had timely permanency hearings.

B. Other Practice and Process Requirements for Helping Children Achieve Permanency

Placement with relatives has been demonstrated to help children have placement stability⁵⁹ and placement stability contributes to children achieving permanency. In addition, DFCS policy and the Consent Decree requirements establish several guidelines for practice to help children move to permanency. These requirements include regular parental visitation with children who have the permanency goal of reunification,⁶⁰ and internal DFCS permanency reviews for

⁵⁵ See p. 9, paragraph 4B.10, and p.37, Outcome 28, of the Consent Decree.

⁵⁶ Since this is smaller than the entire sample of 180, any conclusions drawn from the 94 would have a margin of error of +/-10 percent.

⁵⁷ Inadvertent review error. Data collection was skipped for one record.

⁵⁸ See p. 9, paragraph 4B, sub paragraph 9 of the Consent Decree

⁵⁹ Zinn, Andrew, DeCoursey, Jan, Goerge, Robert M., Courtney, Mark E. *A Study of Placement Stability in Illinois*, Chapin Hall Center for Children, 2006.

⁶⁰ See p 6, paragraph 4A.6vi, of the Consent Decree for visitation planning in Family Team Meetings. Visitation schedules are also an element of DFCS case planning

children who reach their 13th month in custody and county-state staffings for children who reach their 25th month in custody.⁶¹

1. Placement with Relatives

Of the 180 children in the foster care sample, 50 (27%) were in/had been placed with relatives on June 30, 2007 or the last day the children were in custody. Children placed with family were in a combination of relative homes, relative homes approved and being reimbursed for foster care, and with parents themselves.

2. DFCS Permanency Reviews at the 13th or 25th month in custody.

a. 13th month Permanency Reviews

Regularly scheduled reviews of progress toward permanency take place in each county, conducted by a team of three quality improvement specialists and an administrative program assistant. The state risk director provides administrative oversight for the permanency review process. The review teams are guided by a Permanency Reviews Practice Manual. According to the manual, the reviews are to include the following activities:

- Case readings using an on-line Case Review Guide
- Case packet reviews – these packets contain the information specifically required in the Consent Decree for this process (Child Profile, FTM form, case plan, court orders, etc)
- Documentation of findings, recommendations, and concurrence with the County's permanency plan.

Staffings are held for those cases where the review team does not concur with the permanency plan or there is a belief that the plan would benefit from more discussion and additional actions. Post conference site meetings are held at the completion of the monthly reviews. The purpose of the meetings is to debrief the Permanency Review process and identify practice strengths and areas for improvement.

The State is now preparing quarterly reports on the Permanency Review efforts. Table IV-14 draws on the two reports spanning the period January 1 through June 30, 2007 and summarizes some of the characteristics of the 13th month permanency review practice. According to State data, 299 children reached their 13th month in custody sometime during the first half of 2007. The quarterly reports of permanency reviews indicate that permanency reviews were conducted for 288 (96%) children. This information was not independently verified by the Accountability Agents.

⁶¹ See p. 9-10, paragraphs 4C.1 -5, of the Consent Decree

State reviewers concurred with the county permanency plans in 68 percent of all cases reviewed during the six-month period. As reflected in the table, the concurrence rate declined between April and June over the previous quarter and the concurrence rate was lower for the whole six-month period compared to the last 6 months of 2006 (68% compared to 71%) County-state staffings were convened for 165 (57%) of the reviews. The State reports that all staffings occurred within one week of the review. These staffings included the reviewer, a regional adoption coordinator, field program specialist, and a county supervisor and/or case manager.

The State quarterly reports have the following recommendations for improvement:

Permanency Goals: Special attention should be given to the examination of cases with a plan of reunification when there is no documentation or a sufficient level of interaction with the parents/guardians to support this goal.

Case Plans continue to need attention. They need to be current and reflective of the most recent case activity.

Family Team Meetings continues to be an area needing enhancement. Non-traditional strategies to increase the participation of parents/relatives such as scheduling and location should be explored. Recommendations from FTMs should identify specific steps, timeframes, individual responsibility and requirements for successful achievement.

The first two recommendations are supported by the findings of the recent case record review.

Table IV-14
13th Month Permanency Review Implementation
January 1 and June 30, 2007

	January - March		April-June		Full Period	
	No.	%	No	%	No	%
Total Cases Reviewed	128		160		288	
Reviewer Concurrence	94	73%	102	64%	196	68%
Permanency Goal						
Reunification	102	80%	123	77%	225	78%
Permanent Placement with relative	13	10%	21	13%	34	12%
Adoption	9	7%	8	5%	17	6%
Guardianship		0	1	<1%	1	<1%
Another planned arrangement	4	3%	7	4%	11	4%
Totals	128	100%	160	100%	288	100%
Practice Findings						
Cases with current case plans	109	85%	128	80%	237	82%
Cases with steps and timeframes to promote permanency	110	86%	137	86%	247	86%
Case plans with court/panel review recommendations incorporated	84	66%	112	70%	196	68%
Cases with "Family Team Meetings" within the last 90 days	105	82%	141	88%	246	85%
FTMs with parents/legal guardians involved	55	52%	68	48%	123	50%
FTMs with relatives involved	42	40%	60	43%	102	41%
FTMs with foster parents involved	43	41%	62	44%	105	43%
FTMs identified specific Family/Child Needs	89	85%	113	80%	202	82%
FTMs that developed specific steps and time frames	45	43%	49	35%	94	38%

Source: Division of Family and Children's Services, State Risk Director, Quarterly Reports on 13th month Permanency Reviews.

a. **25th Month County-State Staffings**

In addition to the 13th month permanency reviews, DFCS reports holding State/county staffings for 142 children who had reached their 25th month in care. According to state data, 112 children reached their 25th month sometime between January 1 and June 30, 2007. The State reported that all of these children had a 25th month staffing. The staffings concurred with the direction of the cases nearly all the time, according to state reporters. Observations from the staffings provided by the review team to the counties at a “G2” meeting included:

- Fewer problems with case documentation and casework at the 25th month staffing because these cases are assigned to case managers with smaller caseloads;
- Cases have additional requirements for parents that go beyond safety and risk, including income and educational goals and housing space;
- There is a need to explore paternal relatives more;
- There is a need to engage all parents more, there is insufficient re-exploration of relatives;
- More transfers to Adoption staff are occurring and there has been greater case movement with the Adoptions unit handling the petitions for terminations of parental rights;
- Case managers and supervisors should staff cases weekly between the 13th and 25th month to assure 13th month recommendations are implemented.

C. Post Adoption Assistance

Sixty-four children were adopted during the first half of 2007. Another three children were also adopted by relatives after permanent custody had been awarded to the relatives. According to data obtained from the Office of Adoptions, of the 64 children adopted from DeKalb and Fulton Counties between January and June 2007, 94 percent were receiving or were scheduled to receive monthly Adoption Assistance benefits and Medicaid. Twenty-seven received one-time non-recurring adoption assistance, and four received Special Services, and another four families are receiving day care services. Special Services are benefits that are time limited or one-time only services. These benefits may include special medical equipment, psychiatric/psychological testing, and therapy; special educational equipment, tutorial services, orthodontic services or respite care.

Part V WELL-BEING

Children in Care Experience Stable Placements and Worker Continuity and Receive the Services They Need

One of the Consent Decree principles is “Children in foster care should have stable placements that meet their needs and services necessary to address both the trauma of foster care and the problems surrounding their removal from their family.”⁶² In addition, the policy of the Department of Human Resources asserts that foster care services are to “focus on strengthening and rebuilding families to bring about the child’s early return. If this is not possible within a reasonable period of time, foster care promotes the permanency of children by arranging for placement in another stable, nurturing home. While in care, the comprehensive needs of children are assessed and services arranged and/or provided to promote their well-being.”⁶³ Five of the six of the Consent Decree outcomes focused on the well-being of children while they are in care had thresholds to be met during the third reporting period. This chapter reports on the State’s performance on these outcomes and the practice in this area.

A. Outcome Performance

The language of the Consent Decree and summary of State outcome performance for the third period is summarized in table V-1, below and the following page.

Table V-1
Well-Being Outcomes

Children Experience Stable Placements and Worker Continuity	3rdPeriod Performance
Outcome 17: By the end of the second reporting period, at least 86.7% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody. By the end of the fourth reporting period, at least 95% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody.	84.4%
Outcome 18: By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had 2 or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption worker or Specialized Case Manager; case managers who have died, been terminated, or transferred to another county; or case managers who have covered a case during another case manager’s sick or maternity leave.	91%

⁶² See p. 4, paragraph 7 of the Consent Decree

⁶³ See Social Services Manual Section 3060, Georgia Department of Human Resources

Children Experience Stable Placements and Worker Continuity	3rdPeriod Performance
Outcome 20: By the end of the second reporting period, at least 95% of children in care at a point in time during the reporting period shall have had at least one in-placement visit and one other visit, as defined in Section 5.D, each month by their case manager during the prior 12 months in custody.	15%
Outcome 22: By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had visits between their DFCS placement case manager and their foster parent, group care, institutional or other caretaker at least one time each month during the prior 12 months in custody.	45%
Children and Youth Receive the Services they Need	
Outcome 24: By the end of the second reporting period, the percentage of youth discharged from foster care at age 18 or older with a high school diploma or GED will increase over baseline by 10 percentage points. By the end of the fourth reporting period, that percentage shall increase by an additional 10 percentage points.	Next measure- ment at end of 4 th reporting period
Outcome 30: By the end of the second reporting period, at least 80% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child's most recent case plan. By the end of the fourth reporting period, at least 85% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child's most recent case plan.	77%

1. Children Experience Stable Placements and Worker Continuity: Outcomes 17, 18, 20 and 22

The Consent Decree stipulated four Outcomes (numbered 17, 18, 20, and 22) related to children experiencing a stable placement and continuity of care and case management that had thresholds to be achieved by the end of the second reporting period and maintained in the third reporting period.

Outcome 17 – Placement Stability

Once placed in an appropriate setting, a casework goal is to maintain the stability of the placement and avoid the trauma of disruption and placement into another setting. With Outcome 17, the Consent Decree establishes a threshold for placement stability by requiring that at least 86.7 percent of children in custody have 2 or fewer moves during the most recent 12 months in custody.⁶⁴ By the end of the fourth reporting period (December 2007), the threshold increases to 95 percent.

⁶⁴ See p. 35, Outcome 17 of the Consent Decree

a. Interpretation and Measurement Issues

Outcome 17 is similar, but not identical to the federal standard for placement stability. The federal standard is applied to the number of placements, not moves, and suggests that at least 86.7 percent of children should experience no more than two placements in the most recent 12 months in custody. Therefore, for comparison purposes the number of moves is equivalent to the number of placements minus one.

The Accountability Agents continue to be concerned that IDS is not capturing all of the placement moves. Therefore, the results of the case record review rather than IDS are used to measure the progress in this outcome.

b. State Performance

- **The State Fell Short of the Second Period Outcome 17 Threshold**

As noted in Table V-2, **84.4%** percent of the 180 children in the foster care sample experienced two or fewer moves during the previous 12 months in custody. The outcome threshold was 86.7 percent. For the children in DFCS custody at the end of June 2007, the State reported from IDS that 95 percent had experienced two or fewer moves. Table V-2 provides a breakdown of the number of moves experienced by the children in the placement sample. For those children experiencing more than two moves in 12 months, the most frequent reason for placement changes cited in the case records is child behavior including frequent episodes of running away from placements. The State's performance appears to have declined from the second period rate of 90 percent (although the change is within the sample's margin of statistical error) and the difference between what is reported by IDS and what was found in the case file review increased. The State may need to take steps to prevent further slippage on this outcome, and to understand and reconcile the differences with IDS.

Table V-2
Number of Moves Experienced by Children in the 12 months prior to June 30, 2007 or the
Last Date of Custody
N=180

Number of Moves	Number	Percent	Cumulative Percent
No Moves	77	42.8%	42.8%
One Move	57	32.0	74.4%
Two Moves	18	10.0%	84.4%
Subtotal	152		
Three Moves	12	6.7%	91.1%
Four Moves	5	2.8%	93.9%
Five Moves	5	2.8%	96.7%
Six Moves or more	6	3.3%	100%
	180		

Source: Case Record Review, August-September 2007.

Outcome 18 – Worker Continuity

Worker continuity also contributes to a child achieving permanency more quickly and to a child's well-being while in care. Outcome 18 requires that at least 90 percent of children in custody have no more than 2 workers during their most recent 12 months in custody. There are exceptions that allow for case manager terminations, death, transfers, and temporary assignments to cover another case manager's cases while out on sick leave. The Consent Decree also allows for the child's transfer to a Specialized or Adoptions case manager.⁶⁵

a. Interpretation and Measurement Issues

The performance measurement is based on data drawn from IDS for children in Dekalb and Fulton Counties' custody on June 15, 2007 and updated by the counties as to the reasons for case manager changes since June 16, 2006. Exemptions noted were case manager changes that resulted from 1) transfers to a Specialized Case Manager or Adoptions Case Manager, 2) case manager deaths, terminations, and transfers to another county or, 3) temporary assignments to cover cases during a maternity or sick leave.⁶⁶ Resignations and promotions were not exempted because they were not specifically identified as such in the Consent Decree. State performance on this outcome does not reflect staff turnover rates. Children may still experience more than two case managers in a 12-month period if they are assigned to a series of case managers who leave as a result of terminations or transfers. This Outcome does encourage the counties to minimize reassignment of children among case managers for other reasons. The

⁶⁵ See p. 35, Outcome 18, of the Consent Decree.

⁶⁶ See p. 35, paragraph 18, of the Consent Decree.

county data was reviewed by the Accountability Agents for consistency with the appropriate reasons and compared to monthly caseload data to verify resignations, terminations, transfers, and promotions.

b. State Performance

- **The State Exceeded the Outcome 18 Threshold**

As noted in Table V-1, **91 percent** of the 2150 children in custody on June 15, 2007 had had 2 or fewer placement case managers since June 16, 2006 once the allowable exceptions were taken into account. The outcome threshold for this is 90 percent. This is an improvement over the second period performance of 84 percent.

Outcome 20 – Case Manager Visitation with Children

Visits are an opportunity to engage children and assess their well-being and address the trauma they are experiencing or from which they may be healing. Frequent visits can increase the case manager's knowledge base about the children and their needs if they are quality visits. At the time the Consent Decree was established, there was no Federal visitation standard. Recent federal legislation will require monthly case manager visitation with 90 percent of the children in custody starting October 1, 2011.⁶⁷

The Consent Decree stipulates multiple expectations for case manager visitation with the children in State custody. First, it stipulates that the frequency and intensity of in-placement visits and other visits with a child "shall be determined by the individual needs of the child."⁶⁸ Second it specifically defines what is meant by in-placement and other visits. Third, it specifies near weekly visitation in the first eight weeks of a new placement for a child. Finally, to achieve the Outcome 20 threshold, case managers must have two visits per month with each child, each and every month of the previous 12 months in custody. Furthermore, Outcome 20 references the section of the Consent Decree that defines the nature of the twice monthly visits very specifically. One visit is to be "in-placement" and there shall be one "other visit" each month.⁶⁹ The nature of these visits is further defined as follows: "an in-placement visit refers to a private face-to face visit with the child *in the child's home/placement....* A visit refers to a face-to-face visit with the child."⁷⁰ All visits should be used to monitor and document the "*child's adjustment to placement, the appropriateness of placement to meet the child's needs, the receipt of appropriate treatment and services by the child, the child's safety, and service goals.*"⁷¹ According to Outcome 20, 95 percent

⁶⁷ See Sections 424(e)(1) and (2) of the Social Security Act. As of October 1, 2007, States are required to provide data on monthly visits between a child in foster care and "the caseworker handling the case of the child" and to make progress toward 90 percent of children in foster care in the State being visited by "their caseworkers."

⁶⁸ See p.19, paragraph 5.D, of the Consent Decree.

⁶⁹ See p. 35, Outcome 20 of the Consent Decree

⁷⁰ See p. 19, Section 5D of the Consent Decree

⁷¹ Ibid.

of the children in custody should be receiving at least two visits each month from their case managers for 12-months straight as of January 1, 2007.

a. Interpretation and Measurement Issues

The case record review collected information about the number of visits a child received each month from his or her case manager as well as whether the requirement for two monthly visits as defined by the Consent Decree was met. This allowed an analysis of how many children had been receiving visits that did not fit the twice-monthly each and every month of the last 12 month pattern for Outcome 20. In addition, it is important to note that these results represent visitation for 12 sequential months prior to and including June 30, 2007 or the last day the child was in custody – not for the 6-month reporting period. If a child was in custody for less than 12 months as of June 30, 2007 or the last date of custody, visitation was counted only for the applicable months of custody. Months that children were on run away status were also excluded from the analysis.

b. State Performance

- **The State Fell Short of the Outcome 20 Threshold**

As noted in Table V-1, case manager visits with **15 percent** of the children met the Outcome 20 criteria for twice-monthly visits each and every month of the previous 12 months. The threshold for this outcome is 95 percent. This performance is about the same as the second period performance of 16 percent. Table V-3 presents the break down of the number of months in which visits as stipulated by Outcome 20 were conducted for 179 children, with adjustments for those children who were actually in custody less than 12 months.

Table V-3
Continuous Case Manager Visitation with Children as Stipulated in Outcome 20:
Visitation Pattern over the 12 months prior to
June 30, 2007 or last date of custody
N=179*

Number of Months Achieving Two Visits per Month That Meet the Outcome 20 Definition	Number of Children	Percent	Cumulative Percent
12 of 12 months	27	15%	15%
11 of 12 months	6	3%	18%
10 of 12 months	12	7%	25%
9 of 12 months	11	6%	31%
8 of 12 months	10	6%	37%
7 of 12 months	8	4%	41%
6 of 12 months	12	7%	48%
5 of 12 months	9	5%	53%
4 of 12 months	12	7%	60%
3 of 12 months	16	9%	69%
2 of 12 months	15	8%	77%
1 of 12 months	14	8%	85%
0 of 12 months	27	15%	100%
TOTAL	179	100%	

One child was excluded from the analysis because she had been placed in an adoptive home out of state through ICPC for the 12 months under study. Source: Case record review, August-September 2007.

The Accountability Agents continue to believe that visitation practice, if not the documentation of it, is improving, and that the difference between the outcome performance and the actual documented visitation patterns continues to be the result of three factors. First, the outcome measure's continuity feature (each and every month of the previous 12) means that if one visit is missed in any month, that child will not meet the requirement for a full twelve months from the missed month. This makes the measure one that takes a long time to improve. Second, while case documentation clearly indicates where the visits take place, it is often difficult to determine in a case review if there was any private time spent with the children during the visit. Third, the case documentation often does indicate that case managers are having private conversations with the children, but these conversations are taking place outside of the child's placement. They may be taking place at school, in court, in DFCS offices, and at locations used for Family Team Meetings or sibling and/or parent visitation.

The impact of the first factor, the continuity feature, is evident in the fact that while only 15 percent of the children received the Consent Decree-defined two visits each and every month of the previous 12 months, 79 percent of the children in the sample each received an *average* of two or more visits per month from their case managers in the 12 months prior to June 30, 2007 or the last date they were in custody. Another 20 percent were visited an average of once a month.

The impact of the second and third factors, concerning the documentation in the case record of the Consent Decree's specific requirements about the type and nature of visits, can be seen in Table V-4. Table V-4 presents the break down of the number of months in which children received 2 or more visits - any type of visit -- per month, with similar adjustments for those in custody less than 12 months.

A comparison of Table V-3 and Table V-4 indicate that case managers are visiting children nearly twice a month more frequently than reflected in the Outcome 20 requirement. As previously noted, 15 percent had twice monthly visitation that met the Outcome 20 parameters and 26 percent had 2 or more monthly visits every month for 12 months.

Table V-4
Continuous Case Manager Visitation with Children:
Visitation Pattern over the 12 months preceding
June 30, 2007 or last date of custody
N=179*

Number of Months with visits	Children with 2 or more visits each month	Percent of 179	Cumulative Percentage
12 of 12 months	46	26%	26%
11 of 12 months	45	25%	51%
10 of 12 months	22	12%	63%
9 of 12 months	11	6%	69%
8 of 12 months	8	4%	74%
7 of 12 months	4	2%	76%
6 of 12 months	7	4%	80%
5 of 12 months	10	6%	85%
4 of 12 months	6	3%	88%
3 of 12 months	9	5%	94%
2 of 12 months	1	1%	94%
1 of 12 months			
No Visits	3	2%	
TOTAL	172**	96%	

*One child was excluded from the analysis because she had been placed in an adoptive home out of state through ICPC for the 12 months under study.

** Five children received one visit per month

Source: Case record review, August-September 2007.

Case manager visitation with the children typically covered a range of issues. For 80 percent of the children visits addressed issues surrounding their placements: safety, adjustment and appropriateness. Two-thirds of the children had case managers discuss with them service goals and service delivery. Both Counties continue to employ a quality review process that reviews the monthly visitation documentation not only to determine if the visits are occurring, but also the quality of the interaction that is taking place and the information that is being obtained.

Outcome 22 – Case Manager Visitation with Substitute Caregivers

In Outcome 22, the Consent Decree requires case managers to visit once a month with placement caregivers.⁷² This includes foster parents, group home and institutional staff and others charged with the responsibility of caring for children in DFCS custody. In situations where the child has been returned home but remains in DFCS custody, “caregivers” refers to the birth parents or other reunification resources.

a. Interpretation and Measurement Issues

Case manager-caregiver visitation has a similar measurement issue to case manager-child visitation. Again, the Consent Decree only counts case manager visits with care givers if they happened at least once a month, each and every month, for 12 sequential months preceding June 30, 2007. Again, if a child was in custody for less than 12 months as of June 30, 2007 or the last date of custody, visitation with the caregiver was counted only for the applicable months of custody.

b. State Performance

- **The State Fell Short of the Outcome 22 Threshold**

As noted in Table V-1, **45 percent** of the children had caregivers who were visited by case managers at least once each month in the 12 months prior to June 30, 2007 or the last day in custody. The threshold for this outcome is 90 percent. Although the performance is low, it appears to be an improvement over the second reporting period where the record review found 39 percent of the children’s substitute caregivers received monthly case manager visits each and every month of the previous 12 months (although the change is within the sample’s margin of error). Case Managers only missed one month with another 41 caregivers. Table V-5 summarizes the pattern of case manager visitation with care givers.

⁷² See p. 36, Outcome 22 of the Consent Decree

Table V-5
Case Manager Visits with Placement Caregivers over the 12 months preceding December
31, 2006 or last day of custody
N=179*

Proportion of Monthly Case Manager Visits with Substitute Caregivers	Number	Percent
All required sequential monthly visits	81	45%
All but one monthly visit (missed one month in the applicable sequence)	41	23%
All but two monthly visits (missed two months in the applicable sequence)	13	7%
Some Visits	35	20%
No visits (5 children were in custody less than 20 days)	9	5%
Total caregivers	179	100%

*One child was excluded because she was placed out-of-state in an adoptive home through ICPC. Source: Case Record review, August-September 2007.

2. Children and Youth Receive the Services They Need: Outcomes 24 and 30

Outcome 24 – Educational Achievement of Youth Leaving Foster Care at age 18 or Older

Outcome 24 in the Consent Decree focuses on the educational attainment of youth leaving DFCS care at age 18 or later. Specifically, it sets increasing targets over a baseline year for the percentage of youth who are “discharged from foster care at age 18 or older ... who have graduated from high school or earned a GED.”⁷³ This Outcome called for the State to increase by 10 percentage points, the proportion of youth who achieve a high school diploma or a graduate equivalency diploma (GED) over a pre-Consent Decree baseline year. As reported in the period two monitoring report, the State compiled the baseline and the first measurement year, October 27, 2005 to October 26, 2006, by reconciling DHR records with those maintained by the State of Georgia, Departments of Education (DOE) and Technical and Adult Education (DTAE). These two sister agencies maintain records of all Georgia residents who earn a high school diploma from a public school or Graduate Equivalency Diploma (GED) in Georgia, respectively. These records were supplemented, where necessary, with actual copies of diplomas or GED certification. The baseline created from this approach revealed that 65.7 percent of the youth 18 years old or older who left DFCS care in the baseline year had earned a high school diploma or GED.

However 34.4 percent the youth who left DFCS care at age 18 or older between October 27, 2005 and December 31, 2006 achieved a GED/ High School Diploma. This represented 43 out of 125 exiting youth. This is considerably lower than the baseline performance year. The State has taken another look at both years and believes the levels are accurate for each. The next measurement of this outcome will be at the end of the fourth reporting period.

⁷³ See p. 36, paragraph 24 of the Consent Decree

During the third reporting period, both Counties created separate caseloads for youth who are age 18 or older and have voluntarily remain or returned to foster care to continue their transition to adulthood. The purpose of these caseloads is to better focus on the needs, especially educational achievement, of these older youth.

Outcome 30 – Meeting the Needs of Children as Identified in their Case Plans

The Consent Decree specifies that the needs to be considered for achieving Outcome 30 are those medical, dental, mental health, educational or other needs found in the child’s most recent case plan.⁷⁴ As noted previously, in Chapter IV, case plans are to be developed within 30 days of a child’s entry into foster care and every six months thereafter. The plans are to be reviewed by the Court every six months.

- **Interpretation and Measurement Issues**

For purposes of determining whether needs identified in the most recent case plans were being met, the following exclusions from the sample of 180 children in foster care were necessary for the analysis: 9 children who had been in custody less than 30 days and would not be expected to have a case plan and another 15 children for whom no plans were found in their case records. Therefore there were 156 children in the sample for on whom this analysis is based.

Among the 156 plans, 119 (76%) had been developed within the seven months prior to June 30 or child’s discharge. Another 25 (16%) were seven to 12 months old and the remaining 12 plans were older than 12 months or their exact age could not be determined. Among the group with the oldest plans, two children were discharged during the period. Among the 15 children for whom no plans were found, four had been discharged within three months and two had been in custody more than 6 months.

The current case plan format used by DFCS is part of the Case Plan Reporting System (CPRS.) This format allows case managers to include routine goals and responsibilities for DFCS and others for parents when reunification is the goal. Although DFCS pre-service training provides guidance on tailoring the case plan and the initial case plan should be a product of a Family Team Meeting, multi-disciplinary meeting and the insights from the Comprehensive Child and Family Assessment, the CPRS format does not appear to be conducive to tailored plans without a good deal of modification. Child-specific need and treatment information therefore is often limited in the plans.

To better align the case record review with the CPRS format, reviewers were asked to categorize the needs found in the plan as being “routine” or “child-specific.” Routine needs included regular medical appointments, school enrollment, educational progress or grade completion.

⁷⁴ See p 38, Outcome 30 of the Consent Decree

These routine needs are likely to be standard for every child. Child-specific needs included information about chronic conditions, prescribed treatment follow-up, placement requirements, and special education or academic assistance. Both types of needs were combined in the analysis for Outcome 30.

To measure whether the identified needs were being met the sample of case files were reviewed for evidence that services had been delivered or were being delivered to respond to the need. This information was gathered from any and all sources found in the files.

Outcome 30 is related to how the State is performing in identifying and meeting the needs of children on a regular, on-going basis. This performance is discussed later in this chapter under section *C. Practice for Meeting the Needs of Children, Youth, and Families*. The Accountability Agents have not attempted to compare the findings from these related but different aspects of practice because the contexts and timeframes are different. As previously described, the context for Outcome 30 is the case plan and the current CPRS format lends itself to more generic planning that may define needs very broadly. The context for the later analysis is the routine screening and subsequent follow-up. The health screens and other assessments required at different points apply very specific tools and identify very specific needs for follow-up.

In addition, the timeframe for analysis is the time elapsed since the plan was developed. The timeframe applied to the analysis of follow-up to routine screening is the six months of reporting period three. If the identified needs are quickly resolved, they will likely not appear in a subsequent case plan. For example, if a child is diagnosed as needing a pair of glasses and obtains them within a week, this need may not be incorporated into the next plan because it has been resolved.

a. State Performance

• The State Fell Short of the Second Period Outcome 30 Threshold

As noted in Table V-1, **77 percent** of the children had all needs identified in their most recent case plan met. The threshold for this outcome was 80 percent. Although still short of the threshold, this performance appears to be an improvement over the second reporting period performance of 74 percent (although the change is within the sample's margin of statistical error).

Among the 156⁷⁵ plans analyzed, nearly all (151) had at least one routine or child-specific need identified. Medical and dental health needs were the most often cited, noted in over 90 percent of the plans. Medical, mental health and educational needs have been met most often. This information is presented below in Table V-6.

⁷⁵ Because this is smaller than the entire sample of 180, any conclusions drawn from the 156 would have a margin of error of +/- 8 percent.

As reflected in Table V-6, DFCS has been more successful in ensuring services are delivered for identified medical needs than any other type of need. Individualized “other” needs and dental needs appear to have the most room for improvement. Examples of “other needs” cited by case record reviewers most often include transportation to medical and other appointments and independent living skill development and services.

Files contained very few documented barriers to meeting children’s needs. In the few cases where barriers were noted, the child’s runaway behavior was cited as making it difficult to help the child receive the treatment or services identified. Waiting lists and provider scheduling protocols were never cited as barriers. In some cases, it appeared that the plan was too recently developed to allow sufficient time for the services to be put into place.

Table V-6
Needs Identified in Most Recent Case Plans and Degree Needs Met as of
June 30, 2007 or last Day of Custody

Children with Case Plans N=156			Children Received/Receiving Services N varies depending on need identified		
	No	%		No	% of identified need
One or More Need Identified (routine or child-specific)	151	97%	All Identified Needs Met (N=151)	116	77%
Frequency of different identified needs			Frequency of different needs being met		
Medical	148	95%		136	92%
Dental	147	94%		121	82%
Mental Health	123	79%		111	90%
Educational/ Developmental	138	89%		124	90%
Other	24	15%		20	83%

Source: Case Record Review, August-September 2007

B. The Placement Experience

This section describes characteristics and placement practices identified in the case record review of 180 children in foster care between January 1 and June 30, 2007. This includes county placement environment, the use of temporary placement settings, and case manager visitation in new placements.

1. Placement Setting

There have been no significant changes to the placement process from that reported on in the first report. Principle number six of the Consent Decree refers to children being placed in the “least restrictive, most family-like setting possible.”⁷⁶ Table V-7 provides the distribution of children among placement settings found in the case record review. When the different family settings children are in are combined, 134 (74%) of the children in the sample are/were in family settings during their time in custody. These settings included family foster homes, relative foster homes, relative homes, and the homes of birth parents and guardians. The remaining children were in congregate care settings, detention settings, or had run away from their official placement.

Table V-7
Placement Settings of Children in DFCS Custody on June 30 or the last day of custody
(N= 180)

Placement Type	Frequency	Percent
Emergency Shelter/Assessment Center	0	0%
Foster Home (DFCS or Private Agency Supervised)	86	47%
Relative Home (Foster and non Foster Home)	41	23%
Parents/Guardian	9	5%
Group Home	21	12%
Residential Treatment Facility/ Child Caring Institution/ Specialty Hospital	11	7%
Runaway status	9	5%
Regional Youth Detention Center (RYDC)	3	2%
Total	180	101%

Source: Case Record Review August-September 2007. Total is greater than 100% due to rounding.

2. Use of Congregate Care

The Consent Decree has several restrictions related to the use of group care.⁷⁷ First it stipulates that no child under the age of 6 will be placed in a group care setting without the written approval by the Social Services Director based on the certification of need. It further stipulates that when a child under the age of six has a certified, approved need for group care, the child cannot be placed in a group care setting of more than 12 beds. Similar stipulations apply to children aged 6 to 12. For those children under the age of 6, an exception to these stipulations is provided when the child is placed with his or her parent. There is also a one-time exception for all those children under the age of 12 who were placed in a group care setting with a

⁷⁶ See p 4, Principle 6 of the Consent Decree

⁷⁷ See p. 16-17, paragraph 5C.5f of the Consent Decree

capacity of more than 12 beds before the entry of the Consent Decree (October 27, 2005.) Under this exception, children under the age of 12 are allowed to remain in the placement settings if they are siblings of other children placed in those settings. However, the State was to move these children to either foster home settings (children under the age of 6) or non-group care settings (children aged 6 to 12) within 12 months after the Consent Decree (October 26, 2006) *“unless doing so would not be in the best interest of the children in question.”*

With regard to placement of the youngest children, those under the age of six, the State has done well in placing them in small group care settings when such placement has been deemed necessary. Table V-8 summarizes the State’s actions with regard to these stipulations. Seven children were placed in these settings during the reporting period. Two children exited these settings. Therefore as of June 30, 2007, 15 children under the age of six were in group care settings of 12 or less; one was placed with his/her mother in a setting with an 18 bed capacity. Seven of the remaining 14 children in smaller settings were placed with their mothers and the remaining seven were medically fragile infants and toddlers placed in a facility operated by a university medical center. These children have multiple medical issues and the staff in the placement setting are trained to respond to their medical and emotional needs.

Placement of children between the ages of 6 and 12 in small group care settings, although improving since the Consent Decree appears to remain a challenge for the State. Four children were placed in settings with more than 12 beds during the reporting period and two exited, leaving 18 children in placements with a capacity of more than 12 beds on June 30, 2007. Two of the 18 children were siblings of other children in the placement settings and the remaining 16 had special needs that could only be met in the group care settings in which they were placed. Some of these placements have occurred after an episode in an acute psychiatric hospital or as a result of a Multidisciplinary Team Meeting. Symptoms and diagnoses of needs include:

- Suicidal behavior
- Self-mutilation
- Bipolar Disorder
- Post Traumatic Stress Disorder
- Perpetrator of sexual abuse
- Aggressive and violent outbursts

These children are placed in what the State refers to as “specialty hospitals.” For each child there is a placement authorization signed by the DFCS Family Services Director. These authorizations generically describe services the placement setting is providing and confirmation that the placement setting is the least restrictive environment for the child at the time of placement. In some cases there are plans to “step-down” the children to therapeutic foster homes.

Table V-8
Children Younger Than Age 12 in Group Care Settings
January 1 through June 30, 2007

Children under the age of 6						
Reason for placement	Number placed as of December 31, 2006		Number placed between January 1 and June 30, 2007		Number still placed as of June 30, 2007	
With mother	6		4		8	
Service Need	4		3		7	
Total	10		7		15	
Placement Setting size	One child, placed with mother, is in a setting with an 18 bed capacity, the rest are placed in settings of 12 or fewer beds; all 7 children with service needs are medically fragile					
Children aged 6 to 12						
Reason for placement	Number placed as of December 31, 2006		Number placed between January 1 and June 30, 2007		Number still placed as of June 30, 2007	
	Bed Capacity		Bed Capacity		Bed Capacity	
	<=12	12>	<=12	12>	<=12	12>
With sibling since before the Consent Decree	1	2				2
Service Need	2	12		4	2	16
Total	17		4		20	

Source: State reported data, waivers and documentation of need reviewed by Accountability Agents.

3. Use of Emergency or Temporary Placements

The Consent Decree has several requirements addressing placement appropriateness. It requires that “no child shall be placed in an emergency or temporary facility....for more than 30 days.” It also stipulates that no child shall spend more than 23 hours in a County DFCS office or any facility providing intake functions.⁷⁸

The case record review found that 16 children (17%) of the 97 children in the foster care sample who entered care and/or changed placements between January 1 and June 30, 2007 experienced some time in an emergency or temporary setting. This is the same number of children and nearly the same proportion as found in the second reporting period sample. Among the 16

⁷⁸ See p. 16, paragraph 5C4.c of the Consent Decree

children, seven children were placed in more than one such facility compared to four in period two. Ten children spent less than 30 days in such facilities, five children spent from 37 to 88 days, and the documentation did not indicate the length of stay for one child. This compares to 13 children in period two who spent less than 30 days in such facilities. File documentation indicated that three children spent more than 23 hours in a County DFCS office or a facility providing an intake function before being appropriately placed. This is no different than period two. In another five files, reviewers could not determine how long children were in these settings. This compares to similar difficulties in seven files in period two. As of June 30, 2007 or the last day of custody, no child in the sample was placed in an emergency placement.

4. Informing Caregivers and Providing Appropriate Clothing

The Consent Decree stipulates that DFCS will ensure available information concerning a specific foster child will be provided to foster parents before the child is placed.⁷⁹ Based on the information in the child records, a small number of foster parents (12) who received 49 children into their homes during the period appear to have received information at the time of placement. However, an additional review of the files at the Fulton County Resource Center that handles the majority of placements for Fulton County revealed more documentation of information provided to foster parents in another 27 instances. Thus, the assessment based solely on children's records understates actual case practice and the Accountability Agents will seek a means of obtaining a more complete assessment of this practice in the fourth period. The information found in the Resource Center records included not only the basic contact and medical information but also sleep patterns, eating habits, fears, etc. Among all 97 children who had an initial and/or a new placement during the period, case managers appeared to have reviewed the clothing needs for 28 (29%) children and taken the necessary steps to ensure that the children had appropriate clothing in the new placement setting.

5. Case Manager Visitation with Children Who Experienced a New Placement

The Consent Decree stipulates a frequent case manager visitation schedule for the first eight weeks of a new placement.⁸⁰ Children are to have at least one visit in the first week and one visit between the third and eighth weeks with six additional visits at any time within the eight week period; essentially, weekly visitation. Of the 97 children in the sample who entered and/or changed placements during the reporting period, the file documentation indicated the pattern arrayed in Table V-9. The proportion of children seen in the first week of placement (48%) was comparable to the second period proportion (50%). However, a higher proportion of children were seen at least once in the third through eighth weeks of a new placement. In the second reporting period, 60 percent were visited in this time frame compared to the 73 percent in the third period. Of the 45 children in a new placement a full 8 weeks, three do not appear to have

⁷⁹ See p. 19, paragraph 5C.6d of the Consent Decree

⁸⁰ See p. 19, paragraph 5D.1 of the Consent Decree

received any visits in the 8 weeks and two were on runaway status after the third week. The remaining 40 children had an average of 4 visits from their case managers in 8 weeks.

Table V-9
Pattern of Case Manager Visits with Children in the First 8 Weeks
of a New Foster Care Placement
N=Varies by timeframe

Timeframe	Number of children	Visitation Pattern
5 Days or More in new placement as of end of reporting period	94*	43 children received one visit (48% of 90)
15 Days to 56 Days or More in new placement as of end of reporting period	78	57 children received one visit sometime in the third through 8 th week in new placement (73% of 78)
57 Days or more in new placement as of end of reporting period	45	<p>Of the 45 children:</p> <ul style="list-style-type: none"> • 2 were runaways shortly after first three weeks and had no visits after first week • 3 received no visits • 40 received an average of 4 visits each in the first eight weeks of new placement (expected number of visits is 8)

Source: Case Record Review, August-September 2007.

*Three children were excluded from the analysis because they had been in their new placements 4 days or less at the end of the reporting period.

C. Practice for Meeting the Needs of Children, Youth, and Families

In addition to safe, appropriate, and stable placement settings, DFCS policy and the Consent Decree stipulates that DFCS will provide for the physical, developmental, and emotional needs of children in its custody.⁸¹ As a means of “*strengthening and rebuilding families to bring about the child’s early return*”⁸² it is also responsible for providing services to birth families. Finally, it is responsible for supporting and assisting foster parents to more effectively address the needs of the children in their care. This section of the report reflects on the State’s practice as obtained through state and county reported data, the case record review, and staff interviews.

⁸¹ See p. 4, principle 7; pp. 20-21, section 6; p.38, Outcome 30 of the Consent Decree; See also Social Services Manual Section 3060, Georgia Department of Human Resources.

⁸² See Social Service Manual 3060, Georgia Department of Human Resources

1. Needs Assessment at Foster Care Entry

Once a child enters custody, one of the earliest opportunities for assessment of family strengths and needs is a Family Team Meeting (FTM), to be held within three to nine days of entry.⁸³ Each county has a core unit of Family Team Meeting facilitators who facilitate most of the FTMs when children enter care and at the 13th month of custody. Supervisors, case managers, and others who have received the appropriate training co-facilitate these meetings. One private provider is used to facilitate the meetings of families with sibling groups coming into custody.

During the third reporting period, the State reported from IDS that 856 children entered custody. However, 113 children were in DFCS custody fewer than nine days as of June 30, 2007. According to the county tracking systems, timely Family Team Meetings (within 3 to 9 days) were convened for 600 of the 743 children (81%) who remained in care. Another 13 percent of the children did have Family Team Meetings but they were not convened within the first nine days. The participation and determinations of the Family Team Meetings were not explored during the third reporting period. The Accountability Agents have reviewers taking a closer, monthly look at the Family Team Meeting practice and related assessment work during the fourth period and plan to report on the results of this review in the fourth period report.

2. Health Care

The Consent Decree requires both an immediate corrective action with regard to children's health screenings⁸⁴ as well as on-going regular screening and treatment.⁸⁵ DFCS' performance in these areas is discussed below.

b. Regular and timely screening

The case record review of 180 children in placement collected information about the timeliness of health and dental examinations provided at entry and discharge as well as on-going "well-child" health screenings. The documentation indicates a mixed picture. There appears to be continued improvement in providing initial health screens for children as they enter custody and regular on-going regular health examinations. Ensuring children receive initial and periodic dental screenings continue to need improvement. Another area of focus should be discharge screenings. It appears that children are rarely receiving a health screening before being discharged. The specific findings regarding timelines of routine care are summarized in Table V-10. Of note are the following:

- The State's overall performance around initial health screening at entry into care continued to improve with 69 percent of the children who entered custody in the first

⁸³ See pp 5-7, section 4A of the Consent Decree.

⁸⁴ See p. 30, paragraph 13A in the Consent Decree.

⁸⁵ See p. 20, paragraphs 6A 1 and 2, and p.21, 6B, paragraphs 1-8 of the Consent Decree

half of 2007 receiving initial health screens within 10 days of entering care. This is an increase over 58 percent in period two. In total, when the ten-day time frame is relaxed, 81 percent of the children received an initial health screen. For those not meeting the ten-day timing, the elapsed time ranged from 12 to 29 days.

- Initial dental screening performance remained about the same as the second period for those receiving the screen within 10 days, 34 percent in period two; 35 percent in period three. However, the total proportion receiving an entry dental screening within any timeframe appears to have increased from 49 percent to 56 percent (although the change is within the sample's margin of statistical error). The 10-day requirement was exceeded by 11 to 39 days for a portion of the children.
- By the end of the third period, 81 percent of the children in the sample were current with their EPSDT/Georgia Health Check defined physical exam schedule compared to the 75 percent in period two. Regular dental check-ups appear to have declined. A smaller proportion of children were current with their dental examinations in the third period (67%) compared to the second period (76%).
- As in the second period, a small proportion of children (7% of those discharged) are receiving health examinations before discharge.

Table V-10
Timeliness of Health (Physical, Dental, Mental) and Developmental Assessment
January 1 through June 30, 2007
N=Varies Depending on Length of Stay, Age of Child, Requirement

Component and Action	Number	Percent
Initial Health Screen At Foster Care Entry (N=48 applicable)		
Received within 10 days	33	69%
Received, but not within 10 days (12 to 29 days, 1 unable to determine)	6	13%
Total Initial Health Screens	39*	81%
Initial Dental Screen At Foster Care Entry (N=48)		
Received within 10 days	17	37%
Received, but not within 10 days (11 to 39 days, 1 unable to determine)	10	22%
Total Initial Dental Screens	27*	60%
Initial Mental Health Assessment in Compliance with EPSDT Standards (children age 4 and older) At Foster Care Entry (N=25)		
Received within 30 days	19	76%
Received, but not within 30 days (within 33 and 66 days)	2	8%
Total Initial Mental Health Assessment	21	84%
Initial Developmental Assessment (children younger than age 4) At Foster Care Entry (N=15)		
Received within 30 days	9	60%
Received, but not within 30 days (within 34 and 35 days)	2	13%
Total Initial Developmental Assessment	11	73%
On-Going Health Care Exams received according to EPSDT schedule (includes initial screens) (N=178)	142	80%
On-Going Health Care Exams received but not according to EPSDT schedule or standards (exams received were overdue) (N=178)	3	2%
On-Going Dental Exams received according to EPSDT schedule (includes initial screens) (N=178)	114	64%
On-Going Dental Care Exams received but not according to EPSDT schedule or standards (exams received were over due) (N=178)	5	3%
Discharge Health Screen (N=29)		
Received within 10 days of discharge	2	7%
Received, but not within 10 days	0	0%
Total Discharge Health Screens	2	7%

*In four cases, reviewers could not determine compliance with EPSDT/Georgia Health Check Standards
Source: Case record review, August-September 2007

c. Response to Medical and Dental Needs

Responsiveness to health needs remains an area for continued State focus. According to the case record review, 35 (40%) of the 88 children who received regular (initial and on-going) health screening during the period had health needs identified. Among these 35 children, the documentation in their files indicated that 20 (57%) had received appropriate treatment for all the needs identified during the reporting period. Another 5 children (14%) appear to have had some of their needs met and treatment was scheduled for two children. For eight (23%) of the 35 children, no follow-up treatment was documented in the case record. The proportion of children with potentially unmet health needs as identified in a periodic screening is higher in the third period than in the second period in which 15 percent of the sampled children had unmet health needs identified through health screenings.

Again, as in the second period, the State appears to do better at responding to immediate health needs as they arise, but this effort too appears to have declined since the second period. According to the case record review 42 children of the 180 children in the entire sample experienced medical needs between screenings. Thirty-six (86%) appear to have had these needs met and another child had treatment scheduled. This compares to 94 percent in period two.

Responding to dental health needs continues to lag behind physical health. More children have needs identified and fewer children are receiving the required treatment for dental needs. According to the case record review, 18 (25%) of the 72 children who received regular dental screening had dental needs identified. Among the 18 children with dental needs, the case documentation indicated that 11 (61%) had all needs met. Seven (39%) of the 18 children had not received treatment nor did treatment appear to have been scheduled by the end of the reporting period.

According to the case record review, 13 children in the entire sample experienced dental needs between screenings. Seven (54%) appeared to have had these needs addressed during the reporting period.

3. Mental Health

a. Timeliness of assessment

The Consent Decree requires that all children four years of age or older receive a mental health screening within 30 days of placement in compliance with EPSDT standards.⁸⁶ As included in Table V-10, 25 of the children in the placement sample who entered DFCS custody in the first half of 2007 were age 4 or older and remained in care 30 days or more. Among these 25, 21 (84%) had completed mental health assessments – 21 within 30 days and 2 within 37 days and

⁸⁶ See p. 20, paragraph 6A.3 of the Consent Decree.

66 days, respectively. This represents about the same performance as found in the second reporting period.

b. Mental Health Treatment

Of the 48 children that received a mental health assessment during the reporting period, 34 (71%) had mental health needs identified in the assessments. Among these children, 15 were getting all needs met. Six more were getting some needs met and treatment was scheduled for one child. For 12 children (35%) however, there was no documentation that the needs revealed had yet been addressed. This proportion with potentially unmet needs appears to have declined from the second period level of 40 percent (although the change is within the sample's margin of statistical error).

Although the State appears to be more responsive to episodic or emerging mental health needs of children when compared to the response to needs identified in the assessments, the third period response to episodic needs declined from the second period. According to the case record review, 45 children (25%) of the 180 children in the entire sample experienced mental health care needs between screenings. Of these children, 39 (87%) had the emerging needs addressed while six children had needs that appeared not to be met. This appears to be a decline from the 93 percent of children who experienced mental health needs between screenings and had those needs met in second period (although the change is within the sample's margin of statistical error).

4. Education and Development

a. Timeliness of developmental assessment at entry

The Consent Decree requires that all children under the age of four years receive a developmental assessment within 30 days of placement in compliance with EPSDT standards.⁸⁷ As included in Table V-10, 15 of the children in the placement sample who entered DFCS custody between January 1 and June 30, 2007 were younger than four. Among these 15, 11 (73%) had completed developmental assessments – 9 within 30 days and 2 within 35 days. This is an improvement from the second period in which 29 percent of the children under age 4 had received a developmental assessment at entry. Six of the children assessed had developmental needs identified; 5 of these children were getting some or all of their needs met or services were scheduled.

b. Developmental and Educational Needs

To ascertain how many children may have on-going educational or developmental needs, the record review of children in placement collected information about assessments and needs

⁸⁷ See p. 20, paragraph 6A.3 of the Consent Decree.

identified. Between January 1 and June 30, at least 35 percent (62) of the children in the sample had some developmental and/or educational need identified. One third of the children needed academic assistance because of educational delays and poor academic performance. Another 43 percent had multiple physical, emotional, behavioral, and developmental challenges. The remaining children had a variety of symptoms. Approximately 75 percent of the children were having their needs addressed, 12 percent of the children ran away while services were being delivered, and the remaining 12 percent did not appear to be having their needs addressed.

Other indicators of developmental or educational needs are Supplemental Security Income (SSI) benefits and Individualized Education Plans (IEP). Eight (4%) of the children in the sample are receiving SSI benefits and thirty-three (18%) had IEPs. Of those with IEPs, 60 percent of the IEPs appeared to be current. These should be developed annually.

c. School enrollment

Children aged 7 or older are required to be enrolled in school in Georgia. Within the placement sample, 114 children were age 7 or older by August 31, 2006. Among these children 94 (83%) were enrolled in school or a GED program in the first half of 2007. Ten children (8%) experienced gaps in school enrollment for different reasons. For example, five children ran away, one child was expelled, three were considering enrolling in a GED program, and the remaining one was the result of placement changes. Six other children (5%) did not appear to be enrolled at all during the period for similar reasons or there was insufficient documentation to determine school status. In four instances (4%), the children were in custody during the summer months, between school sessions and school enrollment while in placement was moot. About one third of the children younger than age seven were enrolled in a kindergarten or pre-school program.

5. Initial Case Plans

Among the 40 children entering custody during the reporting period and remaining in custody more than 30 days, 29 (73%) had an initial case plan developed by June 30, 2007 or their last day in custody. This appears to be an increase from the second reporting period in which 68 percent of a similar cohort had initial plans (although the change is within the sample's margin of statistical error). Two of these plans had been reviewed by the Court and another was scheduled to be reviewed. The majority, however, were too recently developed to have been reviewed during the reporting period.

PART VI STRENGTHENING THE SERVICE DELIVERY INFRASTRUCTURE

Several of the Consent Decree requirements focus on DHR/DFCS organizational capabilities, with the intent of enhancing or creating capacity thought to be instrumental to the achievement of desired outcomes. This includes specialized staff, caseload sizes, workforce skill development, and having the resources and services to meet needs and quality assurance. This chapter reports on the progress of the State in meeting Outcomes 25, 26, 29, and 31 as well as capacity requirements.

A. Outcome Performance

Four outcomes (25, 26, 29, and 31) have been attributed to creating a stronger infrastructure for caring for the children in DFCS custody. Table VI-1 on the next two pages provides the language of the Consent Decree and the degree of achievement for each outcome.

Table VI-1
Strengthening Infrastructure Outcomes

Effective Oversight of Placement Settings	3 rd Period Performance
Outcome 25: By the end of the first reporting period, at least 85% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status. By the end of the second reporting period, at least 95% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status. By the end of the fourth reporting period, at least 98% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status.	86%
Outcome 31: By the end of the second reporting period and continuing thereafter, no more than 10% of all children in foster homes shall be placed in foster care homes that exceed the capacity limits referenced in Section 5.C.4.e. of the Consent Decree, concerning the requirement that no child shall be placed in a foster home if that placement will result in more than three(3) foster children in that foster home, or a total of six (6) children in the home, including the foster family's biological and/or adopted children.	5%

Timely and Complete Court Orders for Placement Authorization	3 rd Period Performance
Outcome 26: By the end of the second reporting period, at least 85% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act. By the end of the fourth reporting period, at least 95% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act. This outcome shall be measured for court orders entered after the entry of the Consent Decree.	42%
Outcome 29: By the end of the third reporting, no more than 5% of all children in custody of DHR/DFCS for 12 months or more shall have lapse of legal custody within the prior 13 months.	30%

1. Effective Oversight of Placement Settings: Outcomes 25 and 31

Two Outcomes (numbers 25 and 31) relate to the supervision of placement settings. Both had thresholds to be achieved by the end of the second reporting period. Data for these outcomes were gathered from case record reviews, State administrative data systems, and site visits to private providers.

Outcomes 25 - Approved Placement Settings for Children

Outcome Measure 25 seeks to reduce the risk that children may be placed in harmful situations by requiring foster care placements to be evaluated and to be in full approval and/or licensure status. Outcome 25 stipulates that "...by the end of the second reporting period, at least 95% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status."⁸⁸

a. Interpretation and Measurement Issues

The Consent Decree language framing Outcome 25 presents a difficult measurement challenge, as described in the Accountability Agents' reports on the first and second monitoring periods.⁸⁹ This outcome contains the phrase "*By the end of the first reporting period...*" and adds the phrase "*...children in custody at a point in time during the reporting period...*" This makes it quite clear that it is intended as a point-in-time measure to be taken at the end of the reporting period. To operationalize the measure as specified in the Consent Decree, data on the current approval status of individual foster placements on a particular date must be linked to data about the number of class member children in those individual homes on that same date. Existing data

⁸⁸ See p 36, Outcome 25, of the Consent Decree

⁸⁹ For a complete discussion of this issue, see Dimas, J.T. and Morrison, S. A. *Period I Monitoring Report, Kenny A. v. Perdue*, November 2006, pp. 93-96 and "Period II Monitoring Report, Kenny A. v. Perdue," 2007, pp. 96-97.

sources are unable to accomplish this linking with satisfactory rigor.

By agreement of the parties and the Accountability Agents, measurement of this outcome is based on a subset of the 180 records sampled for the foster care placement file review. The full foster care placement file review is based on the universe of children in foster care at ANY time between January 1 and June 30, 2007. The subset used for measurement of Outcomes 25 represents the 150⁹⁰ children from the sample of 180 who were in foster care on June 30, 2006. For each child in this subset, the Accountability Agents “followed-back” the child’s placement setting to its relevant approval status on June 30, 2007, using a variety of data sources, as indicated in Table VI-2.

b. State Performance

• The State Fell Short of the Third Period Outcome 25 Threshold

During the period January 1 – June 30, 2007, **86 percent** of the children in custody were in placements that were in full approval and/or licensure status. This is comparable to the second period performance of 86 percent. Additional detail on this measurement appears in Table VI-2. The Outcome 25 threshold is 95 percent.

As indicated in Table VI-2, compliance with the relevant approval processes was particularly strong among group homes (100%), child-caring institutions (100%), and DFCS-supervised foster homes (100%). In addition, modest improvement was apparent in conducting and/or properly documenting the approval process among provider-supervised foster homes (which appear to have increased from 81% to 88% since the second reporting period) and unpaid relative placements (which appear to have increased from 56% to 59%). However, both changes are within the sample’s margin of statistical error, and even with the apparent improvement remain too low. The approval performance for unpaid relative placements is especially disappointing since the approval process itself is substantially less complex than for other types of placements. DFCS is urged to make the approval rates among provider-supervised foster homes and unpaid relative placements a priority for improvement during the fourth reporting period.

Among the six provider-supervised foster homes lacking full approval status, five had overdue re-evaluations (overdue by six weeks to 12 months, with a median of 14 weeks) and for one, the re-evaluation report was not found in the file. With respect to unpaid relative placements, the criteria specified in Section 1004 of the DFCS Policy Manual for approval of a relative placement are the Social Services Supervisor’s approval and completion of a satisfactory relative care assessment (RCA).⁹¹ For purposes of the file review, a judge’s signature was also accepted as evidence of supervisory approval. Among the 13 relative placements that were not “fully

⁹⁰ Because this is smaller than the entire sample of 180, any conclusions drawn from the smaller subset of children in care on June 30, 2007 provides a margin of error of approximately ± 8 percent.

⁹¹ Social Services Manual, Chapter 1000, Section 4, Georgia Dept. of Human Resources, July 2005

approved,” seven had a completed RCA but no documentation of supervisory approval; two had documented supervisory approval but no documented RCA; and four had documentation of neither supervisory approval nor a completed RCA.

Table VI-2
Outcome 25 – Children in Placements in Full Approval Status

Placement Type	Children in Placement Sample	Children in Placements on 6/30/2007	Children in “Fully Approved” Placements on 6/30/2007	Percent of Children in care on 6/30/2007 in “Fully Approved” Placements
Relative Placement ^{a b}	38	32	19 ^c	59%
DFCS-supervised Foster Home ^d	32	28	28	100%
Provider-supervised Foster Home ^{e f}	57	51	45	88%
Group Home ^g	21	17	17	100%
Child Caring Institution ^h	7	5	5	100%
Other (NA) ⁱ	25	17	NA	NA
Total	180	150	114/133	86%

^a Data source: Placement file review.

^b Data source for ICPC relative placements: Georgia’s ICPC records.

^c The criteria specified in Section 1004 of the DFCS Policy Manual for approval of a relative placement are the Social Services Supervisor’s approval and completion of a satisfactory relative care assessment (RCA). For purposes of the file review, a judge’s signature was also accepted as evidence of supervisory approval. Of the 13 relative placements that were not “fully approved,” seven had a completed RCA but no documentation of supervisory approval; two had documented supervisory approval but no documented RCA; and four had documentation of neither supervisory approval nor a completed RCA.

^d Data source: Placement Central

^e Data source: Review of child-placing agency’s records.

^f Data source for ICPC foster home placements: Georgia’s ICPC records.

^g Data source: LORE data system

^h Data source: LORE data system

ⁱ Includes children in state custody in settings with no relevant approval process including: placed with parents, hospitalized, Youth Department of Corrections, or on runaway status

Outcome 31 – Foster Home Capacity Limits

Outcome 31 seeks to limit the number of children placed in individual foster homes. By the end of the Second reporting period, it stipulates that “...no more than 10% of all children in foster homes shall be placed in foster care homes that exceed... [specified] capacity limits...”⁹² The capacity limits referenced in Outcome 31 are contained in Section 5.c.4.e of the Consent Decree.⁹³

a. Interpretation and Measurement Issues

Outcome 31, like Outcome 25, is also intended as a point-in-time measure. This measure specifies “*children in foster homes*” as the unit of analysis and requires these data to be linked with point-in-time data on the census of individual foster homes. This measure, therefore, constitutes a measurement challenge similar to that represented by Outcome 25.

By agreement of the parties and Accountability Agents, measurement of Outcome 31 for this report is based on the subset of children from the placement sample that were in foster home placements on June 30, 2007 – a total of 79⁹⁴ children. Outcome 31 references the capacity limits enumerated in Section 5.c.4.e of the Consent Decree, “...concerning the requirement that no child shall be placed in a foster home if that placement will result in more than three (3) foster children in that foster home, or a total of six (6) children in the home, including the foster family’s biological and/or adopted children.”⁹⁵ Section 5.c.4.e. also enumerates certain exceptions to these capacity limits.⁹⁶ The parties further agreed that for purposes of measuring compliance with Outcome 31, the only exception that will pertain is that provided for the placement of a sibling group when there are no other children in the home.

b. State Performance

- **The State Surpassed the Third Period Outcome 31 Threshold**

At the end of the third reporting period, four children (5% of the 79 children in the placement sample that were placed in foster homes on June 30) had been placed in foster homes that exceeded the specified capacity limits. By comparison, eight percent of the children in foster homes on December 31, 2006 had been placed in foster homes that exceeded the specified capacity limits. The two DFCS supervised foster homes exceeding the capacity limits in the

⁹² See p. 38 of the Consent Decree

⁹³ Ibid, p. 16

⁹⁴ Because this is smaller than the entire sample of 180, any conclusions drawn from the 78 children used in this analysis provides a 95 percent confidence interval with a margin of error of approximately ± 11 percent.

⁹⁵ See p. 38 of the Consent Decree,

⁹⁶ Ibid, p. 16.

third period were relative foster homes in which the three foster child limit was exceeded due to the placement of sibling groups; however, they did not qualify for the exception enumerated in Section 5.c.4.e. because those homes already contained other foster children. None of the children in the sample that were placed in foster homes on June 30 were placed in homes containing more than six children total. Additional detail on this measurement appears below in Table VI-3.

Table VI-3
Outcome 31 – Children in Foster Homes Exceeding Capacity Limits
N=79

Placement Type	Sampled Children in Foster Homes on 6/30/2007	Children Placed in Foster Homes Having 3 or More Foster Children	Children Placed in Foster Homes Having 6 or More Children	Percent of Children in Foster Homes that Exceeded Capacity Limits
DFCS-supervised Foster Homes ^a	28	2 ^b	0	7%
Provider Supervised Foster Homes ^c	51	2	0	4%
Total	79	4	0	5%

^a Data Source: Placement Central

^b Both of these placements exceeded the three foster child limit due to the placement of sibling groups in relative foster homes that already contained other foster children

^c Data Source: Targeted review of provider foster home files

2. Timely and Complete Court Orders for Placement Authorization: Outcomes 26 and 29

Two Outcomes (numbered 26 and 29) relate to strengthening the infrastructure by establishing benchmarks for practices that help ensure DFCS has the appropriate authority to keep children in custody and to seek federal reimbursement appropriately for the services these children receive.

Outcome 26 – Required IV-E Language in Court Orders

Outcome 26 relates to DFCS having the proper documentation in a child's file to support an appropriate claim for Federal reimbursement under the Title VI-E program.⁹⁷ Judicial orders authorizing the removal of a child from his or her home and placement into foster care must

⁹⁷ See pp 36-37, Outcome 26 of the Consent Decree

contain determinations that remaining in the home is “contrary to the welfare” of the child in question and that “reasonable efforts” were made to prevent the child from being removed from his/her home. These determinations must be made on a case-by-case basis and be child-specific.

For those children who entered care on or after October 25, 2005, judicial determinations regarding “...*contrary to the welfare...*” must be made in the first order that sanctions the State agency’s action to remove the child from home. In practice, this is often the court order from the 72 hour hearing. In addition, there must be documentation of a judicial determination that “reasonable efforts” were made no later than 60 days from the date of child’s removal from the home.”⁹⁸

a. Interpretation and Measurement Issues

Data for Outcome 26 were collected from the case records of the sample of 180 children in foster care. The Outcome 26 analysis was applicable to those children who had entered DFCS custody after the Consent Decree was entered on October 27, 2005. This represented 119 children (66%) in the sample of 180.⁹⁹

Previous measurements of this outcome included children who entered custody before the Consent Decree. Measurement in the third period was limited to those children who entered on or after the Consent Decree because of the specific language in the Consent Decree. The significance of this for the analysis is the application of the federal requirements for those children who entered custody since March 2000. Among the cohort that entered before the Consent Decree, a portion of them entered custody before March 2000. A different set of federal documentation requirements apply to those children. The requirements for those children allow an expanded timeframe in which to meet the requirements. For those children who entered custody after the Consent Decree, the more restrictive timeframe from the federal standards effective after March 2000 apply.

b. State Performance

▪ **The State Fell Short of the Outcome 26 Threshold**

As indicated in Table VI-1, **42 percent** of the case records of those children who entered custody after the Consent Decree had all the applicable language in the court orders necessary within the required time frames to assess eligibility for federal funding under Title IV-E. The applicable threshold for this outcome in the third period is 85 percent. This performance appears to be lower than that of previous reporting periods. In periods one and two, 55 percent of the orders had all the applicable language.

⁹⁸ Ibid.

⁹⁹ Because 119 is smaller than the entire sample of 180, the margin of error for this smaller number is ± 9 percent.

The performance in the third period may be a result of lower actual performance or a different measurement of the performance by only analyzing the records of children who entered custody since the Consent Decree, and thereby excluding those who entered before March 2000. One barrier to assessing this performance is the proportion of case files that were missing court orders or other documentation. Slightly more than a one third of the records did not have the initial court order or the judicial determination. As in the earlier periods, a larger proportion of the files had one or the other documentation requirement in the necessary timeframes. That is, 50 percent had the child specific language in the applicable initial court order and about 66 percent had child specific reasonable efforts language in the judicial determination. Improving performance in this outcome requires a strategy that involves a strong partnership with the judges and court administration in the counties.

The potential impact of improving this performance in terms of increasing federal reimbursement for foster care expenditures is discussed more fully later in this chapter in Section G “*Maximizing Federal Funding*.” As noted in a State commissioned independent analysis of Georgia’s efforts to claim a larger proportion of federal funding, improving compliance with the required court order language could improve Georgia’s Title IV-E penetration rate 8 to 12 percentage points but “this is beyond the range of DHR/DFCS’ authority and responsibility.” The experts go on to note that “some strategy will have to be developed to increase judicial compliance with the federal requirements even further than that found currently. Given the experience of other states, a realistic goal for improvement in this area would be eight percentage points, and little or none of that should be expected immediately.”¹⁰⁰

Outcome 29 – Lapses in Legal Custodial Authority

The Consent Decree strives to limit the percent of children for whom DHR/DFCS custodial authority lapses.¹⁰¹ Outcome 29 stipulates that no more than 5 percent of all children should have a lapse in their legal custody within the most recent 13 months of their placement. This outcome became effective in the third period.

a. Interpretation and Measurement Issues

Data for Outcome 29 was collected from the case records of the sample of 180 children in foster care. The outcome 29 analysis was applicable to 86 children (48%) in the sample of 180 who had been in custody 12 months or more and were still in the temporary custody of the Department.¹⁰²

¹⁰⁰ Hornby Zeller Associates Inc, *Georgia’s Use of Title IV-E*. August 2007, p. ii.

¹⁰¹ See p 37, Outcome 29 of the Consent Decree

¹⁰² Because this is a smaller number than the entire sample of 180, the margin of error for 86 is approximately ± 10 percent.

b. State Performance

• The State Fell Short of the Third Period Outcome 29 Threshold

As indicated in Table VI-1, DFCS had timely extensions of custody for 60 (70%) of the 86 children of the children for whom a custodial issue would be applicable. This means that **30 percent** or 26 children had lapses in custody. The outcome threshold is no more than 5 percent. There has been limited improvement in this area since the first reporting period.

In three of the lapsed cases, there was documentation to show that DFCS had filed a motion to extend the custody 90-120 days prior to the expiration. For the most part, however, there was no documentation of such action. The length of lapses appear to have ranged from less than 30 days to 2 years, with half of them being 2 months or less.

B. *Lower Caseloads and Staff Qualifications*

1. Caseload Sizes and Supervisory Ratios

There are five primary types of case managers responsible for direct interventions with children and families. These case manager types are as follows:

- Child Protective Services Investigators (CPS Investigations). These case managers are responsible for responding to and investigating reports of child maltreatment.
- Child Protective Services On-Going Case Managers. These case managers are responsible for providing services and supervising the safety of children who are not taken into state custody and remain in their own homes.
- Placement Case Managers. These case managers are responsible for providing services to the children and families of children who are in the custody of the state.
- Adoptions Case Managers. These are case managers responsible for providing services to children whose parents' parental rights have been terminated and who have the permanency goal of adoption.
- Specialized Case Managers. These case managers are responsible for providing services to the children and families of children who have been in state custody 18 months or more.

An additional distinction may be a Diversion Case Manager. These are case managers responsible for short-term intervention with families who come to the attention of DFCS because they are in need of services that will help them keep their families safe. Counties handle these cases differently. DeKalb County has created separate caseloads with designated Diversion case managers. In Fulton County, CPS Investigators respond to and serve Diversion cases.

Counties may also use different strategies for Child Protective Services. Many counties have two distinct types of units. Units that do only CPS investigations and those that provide only on-going case management services to families while the children remain home under protective supervision. This is the approach Fulton County uses. DeKalb, however, combined these two functions in late 2006 creating units in which the case managers conduct investigations as well as provide on going in-home services to families with an open CPS case.

A “case” in each of these practice areas is defined differently. For CPS investigations, on-going, and diversion, a case is defined as the family unit being investigated, or receiving services and supervision. For Placement, a case is defined as a child, whether it is a “regular,” adoption, or “specialized “case. In this situation, siblings in State custody are considered separate cases. Case managers for children in the custody of the state, however, are also expected to provide services to birth parents, foster parents, and prospective adoptive parents in addition to the children.

The Consent Decree establishes caseload caps for the five primary types of case managers to be achieved by the end of the second reporting period.¹⁰³ It also establishes supervisory ratios. These caps and ratios are as follows:

- CPS case managers (investigators): 20 cases (the equivalent of 20 families)
- CPS ongoing case managers: 20 cases (the equivalent of 20 families)
- Placement case managers: 25 cases (the equivalent of 25 children)
- Adoption case managers: 22 cases (the equivalent of 22 children)
- Specialized case managers: 12 cases (the equivalent of 12 children)
- The supervisory ratio should be no more than 6 case managers reporting to 1 supervisor.

At the end of the fourth reporting period (December 2007) these caseload caps and supervisory ratios are to be further reduced.

a. State Performance as of June 30, 2007

Caseloads can and do fluctuate daily, especially among CPS investigators as investigations are completed and new ones are added. Adoption caseloads generally have the most stability, but they too can change within a month as children achieve permanency with a new family and new children become legally free for adoption. Therefore, the Accountability Agents chose to measure the caseloads using the number of cases open after the final data entry “posting” for the month of June. For practical purposes, this is referred to as June 30, 2007. A count of Diversion cases was included for those case managers who had a mixed CPS and Diversion caseload. Case managers responsible only for Diversion cases were not included in the analysis.

¹⁰³ See page 22, Section 8, paragraph A.1 of the Consent Decree

As of June 30, 2007, 70 percent of the case managers in DeKalb and Fulton Counties had caseloads that were at or within the designated caps, as reflected in Table VI-4. This represents a decline from the second period performance of 95 percent. After the highly publicized tragic death of a child in November 2006 and some internal organizational changes, both counties struggled with increased maltreatment investigations and child protective cases and with staff turnover. The higher caseloads were not limited to child protective services. Not surprisingly, all program areas experienced slippage compared to the second period. There is usually a “ripple effect” after a child death that not only increases the number of reports and open in-home child protective services cases, it also increases the number of children brought into custody, thereby increasing all workloads.

The degree to which the caseloads exceeded the caps varied by program area. In Child Protective Services Investigations and On-Going, 45 of 136 caseloads were over the cap of 20 cases; the size of the caseloads exceeding the cap ranged from 21 to 51. Ten case managers had caseloads of 30 or more, while the average caseload for the remaining 35 was 25 families per case manager. Among foster care case managers, 15 of 65 case managers had caseloads exceeding the cap of 20; the size of the caseloads exceeding the cap ranged from 26 to 33 children. Also, one worker with provisional certification had 14 cases, exceeding the DFCS policy limit of seven cases for provisionally-certified case managers. All adoption case managers were under the Consent Decree stipulated caseload cap of 22 children. The counties have committed to keeping these caseloads at 12 or fewer to be equivalent with the specialized case manager requirements; however two adoption case managers had caseloads of 13 children each. Finally, 23 of 60 specialized case managers had caseloads ranging from 13 to 15 children.

Additionally, not all children appear to be moving to specialized case managers when they reach their 18th month in custody. Forty children remained assigned to “regular” placement case managers after reaching their 18th month in state custody. Their reassignment would affect the caseload sizes of both placement case managers and those of the specialized case managers.

The state and counties have taken steps to address the vacancies left by turnover and the growing caseloads. They have safely reduced the number of open cases by temporarily drawing on the assistance of retired veteran workers, regional field staff, and staff that had been assigned as court liaisons but had been certified to work in Child Protective Services. In addition, new staff have been hired and trained over the summer. By the end of the summer, retired staff and field specialists had been phased-out of CPS case management responsibilities and the caseloads had come down. In Fulton County in particular, the number of CPS case managers with caseloads greater than 30 was four on August 31, 2007, compared to eight on June 30, 2007. In addition, those with caseloads exceeding the 20 case cap on August 31, 2007 had caseloads ranging from 21 to 33.

To fill vacancies, new staff have been hired and trained. This process, however, takes time as new staff move through periods of being trainees and having provisional certification status before they can assume caseloads greater than seven. In addition, staff turnover continues as

individuals learn better about the job demands and decide they are not suited for the work, or as supervisors and program administrators counsel staff that they may not be suited for this career choice. This situation is no different in Georgia than around the country.

This set back in the third period makes the further reduced caseload requirements by the end of the fourth reporting period (December 2007) all the more challenging. In order to meet the Consent Decree requirements, the State will need to:

- Continue to recruit and hire individuals who have the attitudes and skills that will enable them to be successful in the work;
- Provide the training that furthers skill development;
- Provide supportive supervision;
- Continually evaluate recruitment and retention strategies.

Table VI-4
DeKalb and Fulton County Caseload Status at June 30, 2007

Case Manager Function	Target Caseload Cap: Number of cases	Number of Active Staff on 06/30/07 ¹	Number of Active, On-leave Staff on 06/30/07 ²	Actual Performance				
				Meeting Cap		Not Meeting Cap		Cases assigned to separated workers/ Supervisors
				Number	%	Number	%	
CPS Case Manager	20	75	1	53	70%	23	30%	38 ³
Ongoing Case Manager	20	61		39	64%	22	36%	2 ⁴
Placement Case Manager	25	65		49	75%	16	25%	6 ⁵
Adoption Case Manager	22	28		26 ⁶	93%	2	7%	
Specialized Case Manager	12	60		37	62%	23	38%	7 ⁶
Total		289	1	204	70%	86	30%	52

Sources: State data base: IDS; county personnel systems for leave and separation information

Notes:

¹Active staff are those staff who were not on leave of absence at 6/30/07 that was expected to be more than 30 days. Includes workers with mixed caseloads of CPS investigations and diversions. Excludes workers who had diversion cases only. Excludes case managers who have caseloads of children placed through ICPC and not in DFCS custody

²Active staff on leave at 6/30/07 but leave anticipated to be more than 30 days; one CPS investigator was on leave on June 30, 2007. Three cases remained assigned to this investigator in IDS on June 30, 2007.

³ Of the 38 cases, seven remained assigned in IDS to three case managers who had resigned during June, three cases were assigned to one case manager on medical leave on June 30, 2007 (same as in footnote 2), and 28 cases were assigned to five supervisors. For one supervisor, six of these cases had been her responsibility before she was promoted to a supervisory position during June.

⁴The two CPS ongoing cases were assigned to a supervisor

⁵The six cases were assigned to a case manager who was terminated June 29, 2007.

⁶The seven cases were assigned to one supervisor.

As shown in Table VI-5, on June 30, 92 percent of the supervisory units had a ratio of 6 workers to one supervisor or better. This is an improvement over the second period performance of 82

percent. All five of the units that exceeded these ratios were child protective services units. One supervisor was responsible for supervising as many as ten case managers and two others had responsibility for eight workers each. According to the Fulton County CPS caseload data for August 31, 2007, these supervisory ratios have been reduced since June. The majority of units had a ratio of 5 workers to one supervisor so the fourth period standard of a ratio of five to one appears attainable.

Table VI-5
DeKalb and Fulton County Supervisory Ratios at June 30, 2007

Program/Service Area	Number of Units	Meeting 1 to 6 ratio		Not Meeting 1 to 6 ratio	
		Number	%	Number	%
Child Protective Services (Investigations* and Ongoing)	26	21	81%	5	19%
Placement	15	15	100%		
Adoption	6	6	100%		
Specialized Case Management	14	14	100%		
Total	61	56	92%	5	8%

*Includes supervisors of diversion units where diversion case managers also carrying CPS cases
Sources: State IDS and county personnel systems for leave and separation information

C. Building Workforce Skills

The Consent Decree has several training requirements.¹⁰⁴ In this report section, the Accountability Agents describe the qualifications of new supervisors and the Department's compliance with pre-service and in-service training requirements.

1. Education and Training Services Section¹⁰⁵

There were no changes in the Education and Training Services (ETS) during the third period. There were some organizational changes after July 1, 2007, including the naming of a new director. These changes will be reported on further in the fourth reporting period.

2. Response to the Assessment of the Pre-Service Curriculum for Foster Care Case Managers.

During the second period, the Accountability Agents had an outside expert evaluate the pre-service curriculum for foster care case managers. This curriculum, along with the curricula for child protective services and for supervisors were undergoing revision during the third period.

¹⁰⁴ See pages 25 and 26 of the Consent Decree for the complete description of the requirements.

¹⁰⁵ See Dimas, J.T. and Morrison, S. A. *Period I Monitoring Report, Kenny A. v. Perdue*, November 2006, for a description of the Education and Training Services Section.

The recommendations of the outside expert, therefore, were particularly timely. Some of the recommendations had to do with sequencing and organization of the modules to assure that case managers receive information in a logical fashion, building on each previous step. Others suggestions included making the curriculum more skill-based with more direct observation by supervisors or field practice advisors.

The State reports that a “New Worker Training Series” was being developed to be launched in conjunction with the implementation of “Georgia Shines”, the State’s Statewide Automated Child Welfare Information System (SACWIS). Georgia Shines was originally scheduled to be implemented statewide in January 2008. However, as discussed later in this chapter, the implementation schedule has been revised.

The new curriculum has been designed to combine the current Keys (required of all new staff), separate CPS and Foster Care Track classes, along with the new Georgia Shines training into one eight-week long training that covers foundational knowledge for case practice, Child Protective Services, and Foster Care Services case practice. The State reports, *this training will be more focused on skills needed to successfully work a caseload and will cover the case continuum from Intake through Foster Care. The trainees will be given twelve cases to work through the training process. The training will consist of Classroom training combined with a very structured Field Practice and on-line training. Once a new worker completes the new training series they will be certified as a Case Manager, and can work in either Foster Care or CPS depending on their county’s need.*¹⁰⁶

3. New Supervisor Qualifications

As stipulated in the Consent Decree, case manager supervisors employed by the counties after October 27, 2005 must have, at a minimum, a Bachelor’s degree in Social Work (BSW) and two years of experience.¹⁰⁷ Sixteen individuals were promoted or newly employed as case manager supervisors between January 1 and June 30, 2007. All sixteen individuals met these criteria. Table VI-6 summarizes the activity in the first 18 months of the Consent Decree.

¹⁰⁶ Email correspondence from Jeffery Brown, Unit Manager, Social Services Learning and Development Unit Organizational Skills Development Group, July 11, 2007.

¹⁰⁷ See p. 26 of the Consent Decree

Table VI-6
Qualifications of Individuals Employed as/ Promoted to Supervisors
Since October 27, 2005

	Total	Description of Cohort
First Period (October 27, 2005-June 30, 2006)	16	<ul style="list-style-type: none"> Two did not have the required years of experience and one did not have a BSW, however, they were assigned supervisory responsibility for non case management units. One had the minimum degree and experience level. Thirteen exceeded the minimum experience levels and of the thirteen, four exceeded the minimum degree requirement by possessing master's degrees in social work and other disciplines
Second Period (July 1 to December 31, 2006)	6	All 6 exceeded the required years of experience and four exceeded the minimum degree requirement by possessing master's degrees in social work and other disciplines
Third Period (January 1 to June 30, 2007)	16	All 16 exceeded the required years of experience and six exceeded the minimum degree requirement by possessing master's degrees in social work and other disciplines

Sources: County personnel data

4. Pre-Service and On-going Training Hours

Table VI-7 summarizes the training requirements in the Consent Decree and what DFCS has in place to meet these requirements. Tracking training hours is a split responsibility between the State Education and Training unit and the counties. There is currently no standard, shared data base for county use. Each employee has a "training transcript" in which the training hours provided directly by the Education and Training Unit and Georgia State University are recorded. The counties have developed their own in-house training log to track the hours provided in the county. According to the county data and the certification data reviewed by the Accountability Agents, it appears that new case managers are receiving the required number of hours of pre-service training. New supervisors appointed or hired in the last year appear to have received the supervisory pre-service training. However, a small proportion of case managers and supervisors do not appear to be receiving the required 20 hours annually of professional development. In reviewing the training hours for the 12-month period July 1, 2006 to June 30, 2007, 84 percent of the 290 case managers with cases assigned on June 30, 2007 had the required training hours. Likewise, 85 percent of the supervisors had received the required training. The Accountability Agents intend to do more verification of this information in the fourth period.

Table VI-7
Training and Professional Development Requirements

Level	Requirement ¹⁰⁸	Provided
Case manager	160 hours pre-service	<p>This requirement is met over a period of approximately 10 weeks with a combination of</p> <ul style="list-style-type: none"> ▪ 97.5 classroom hours in “Keys to Child Welfare” in the first six weeks of employment ▪ 32.5 hours of program track classroom training (Child Protective Services or Foster Care Services) ▪ 200-240 hours of field practice activities and self-paced on-line training, depending on the program track. (3 weeks interspersed with classroom instruction in the first six weeks, and 2 to 3 weeks with 1 week of classroom in the subsequent 3 to 4 weeks) <p>Culminates with a three-part certification process that tests case manager knowledge and skills</p>
	20 hours/year on-going	<ul style="list-style-type: none"> • 36-48 required hours in the first six months after certification, depending on program track • 16-48 required hours in the 6-12 months after certification, depending on program track • 18 to 36 required hours in the 12-18 months after certification, depending on program track • Approved professional development classes, conferences, work shops, etc
Supervisor	40 hours pre-service	<ul style="list-style-type: none"> • 40 required hours of classroom, 15 days of field practice, and additional assignments <p>Culminates with a three-part certification process that tests supervisor knowledge and skills¹⁰⁹</p>
	20 hours/year on-going	<p>36 required hours, subject matter depends on what they received as case managers</p> <p>Approved professional development classes, conferences, work shops, etc</p>

Source: Compiled from the Education and Training Services Certification Manuals, second period Foster Care curriculum assessment commissioned by the Accountability Agents, and the Social Services Training Course Descriptions, DFCS Education and Training Services, June 19, 2007.

¹⁰⁸ See p. 25. Section 10. B paragraph 3 of the Consent Decree,

¹⁰⁹ Ibid

5. Case Manager and Supervisor Certification

With the assistance of a nationally-recognized child welfare training expert, the Education and Training Services Section developed a skills-based competency assessment as a component of the certification¹¹⁰ process for all social service case managers and supervisors. The certification process has three parts, 1) classroom knowledge test, 2) field observation, and 3) case record review. Through this process, not only is “book learning” assessed, but the candidates must demonstrate the appropriate abilities and knowledge in the field and in their case documentation. Case managers and supervisors must complete and pass each part of the process to be fully certified. According to State policy, new case managers cannot carry a full caseload until they are fully certified.¹¹¹ The entire process usually takes three to four months for a new case manager. Case manager and new supervisor pre-service training is considered complete when they have achieved certification. However, once a new case manager has successfully passed the classroom knowledge test, county directors may provisionally certify them and allow them to carry no more than seven cases under the supervision of a fully-certified case manager.

The certification process began in the spring of 2005 and has been implemented in two phases. The first phase addressed certification for all case managers and supervisors hired before April 1, 2004.¹¹² The second phase of certification implementation is ongoing. For all those hired after April 1, 2004, certification is acquired through the new worker and supervisor training process. Table VI-8 summarizes the certification status available from the State at the end of June 2007 for social service case managers and supervisors in Fulton and DeKalb Counties.

¹¹⁰ Certification is defined by the Education and Training Services section as “*the successful demonstration, at a given point in time, that the employee possess the foundational competencies needed to perform the job.*”

¹¹¹ County Directors can provisionally certify new workers after six weeks if they pass the knowledge test. Provisionally certified workers can carry up to seven low risk cases under the oversight of another case manager. Full case responsibility, however, remains with the overseeing case manager.

¹¹² Among these individuals a distinction was made. The requirement for incumbent certification applied to case managers hired before April 1, 2004, who had less than 5 years experience, and to supervisors hired before December 1, 2005, who also had less than 5 years experience. “Fast track” certification was awarded to staff persons who had 5 years of satisfactory social services case management or supervisor practice in DFCS as of October 1, 2004. Resource Development staff and CPS Intake only case managers and supervisors were exempted from the certification requirement.

Table VI-8
Certification Status of Case Managers and Supervisors in
DeKalb and Fulton County DFCS as of June 30, 2007

Position Title	Fully Certified	Results Pending	Provisional	Not Certified	Total
Case Managers					
CPS Investigators	49 (64%)		27		76
CPS On-Going Case Managers	44 (72%)	1	15	1	61
Placement Case Managers	59 (91%)		6		65
Adoption Case Managers	27 (96%)		1		28
Specialized Case Managers	56 (93%)	3	1		60
TOTAL	235 (81%)	2	50	1	290
Supervisors					
CPS (Investigations and On-Going)	14 (54%)	7		5	26
Placement	12(80%)	2		1	15
Adoption	3 (50%)	3			6
Specialized Cases	8 (57%)	5		1	14
TOTAL	37 (51%)	17		7	61

Source: Compiled from data supplied by Education and Training Services Section and County Kenny A. staff. Not verified by Accountability Agents.

As noted in Table VI-6, 81 percent of case managers and 61 percent of supervisors had achieved full certification as of June 30, 2007. Staff who have failed to achieve certification on the first attempt are required to engage in remediation and retesting. The level of full certification for case managers is not surprising given the number of new staff both counties brought in during the third period, but is slightly lower than the second period. The level of supervisor certification has improved from 48 percent and it continued to improve after the third reporting period as 11 of the 17 that had certification pending on June 30 were certified in July and August. The State however needs to continue to focus on certifying all supervisors and to review the training needs of those individuals who are not certified. While some of those serving as supervisors may be getting the required number of professional development hours, they may not be getting the specific training needed for the supervisory certification.

6. Private providers required to meet same standards

The Consent Decree requires “private provider agencies with whom DFCS contracts for the provision of placements for children in DFCS custody shall be required, through contract provisions, to certify that employees providing management or supervisory services for DFCS.” Essentially, private provider agencies must meet similar qualification, training, and certification as required for DFCS case managers and supervisors.¹¹³ The state convened a meeting with all the providers serving DeKalb and Fulton Counties on March 30, 2007 at which it was announced that their FY 2007 contracts would reflect this requirement. Plans for making the required training accessible to private providers are still being developed.

D. Assuring Needed Services Are Available

The Consent Decree stipulates that DFCS engage in a needs assessment to “identify what new and/or different placements and related services, if any, are needed to provide substantially for the care of the Plaintiff Class.”¹¹⁴ At the completion of the needs assessment, DFCS is to phase-in the identified needed services over a period of twelve months. After selection and contractual delays, the needs assessment was initiated by Hornby Zeller Associates, Inc. (HZA) in March 2007 and a final report was delivered to the Department August 29, 2007. The report’s Executive Summary is included as Appendix C to this report. The assessment made six recommendations. Four recommendations focused on increasing the number and location of foster homes for children in the custody of Fulton and DeKalb Counties. Specifically, HZA recommended increasing homes in Fulton County in general and in the neighborhoods where the greatest disparity between need and resources exist. The contractor also recommended these homes be specifically recruited to serve adolescents and sibling groups. Another recommendation urged DFCS to expand and enhance its placement prevention efforts to reduce the need for placement settings. The sixth recommendation suggested implementing an automated placement matching system that would facilitate matching children with homes that can meet their needs and provide a better means for managing and tracking available resources.

E. Placement Support

In this section of the report, the State’s performance is described regarding a number of issues related to the regulation and support of foster care providers. These issues are described in the Consent Decree in Section 5C4e-i, 5C6¹¹⁵ and Section 11.¹¹⁶ Generally, the State appears to be performing well relative to most of these issues.

¹¹³ See pp. 35 and 36, paragraph 10.B.4 of the Consent Decree

¹¹⁴ See pp 12 – 13, paragraphs 4A,1-4 of the Consent Decree

¹¹⁵ Ibid, pp. 16-19.

¹¹⁶ Ibid, pp. 26-28.

Section 11 of the Consent Decree contains a variety of requirements with respect to the screening, licensing, and training of foster parents. Paragraph B of Section 11 requires a set of uniform standards to be in place for the approval or re-approval of all foster and pre-adoptive families. In Paragraph F, the State agrees not to allow the perpetrators of substantiated maltreatment to become or to remain foster parents. The State's performance against each of these requirements is considered below.

The file review of 159 foster homes sought evidence in each file that the home was in compliance with applicable standards at the end of the reporting period. Data from the file review are presented below. These data can be said to fairly represent the status of the sampled foster homes at the end of the reporting period, but may not accurately reflect the quality of the regulatory approval process. The reasons for this include changes that may occur in family circumstances or characteristics between the approval date and date the home's file was reviewed, and certain nuances of the regulatory process such as "grace periods," and aspects of the approval process that may have been underway at the end of the reporting period but had not yet been concluded and documented in the case record. The foster home file review instruments for the third reporting period attempted to correct for these nuances to the extent possible, but the Accountability Agents have not yet had the opportunity to evaluate how successfully they did so.

1. Regular and timely evaluations to ensure placement settings meet standards

Successfully preventing maltreatment in care is aided by effective evaluation and reevaluation of care settings. In addition, foster caregivers need to be supported and well-trained to effectively care for and, when necessary, appropriately discipline the children in their care.

To ensure that foster homes are equipped to provide safe and appropriate care, DFCS has promulgated a uniform set of approval standards that are intended to apply to DFCS-supervised and provider-supervised foster homes alike. In addition, the Office of Regulatory Services has promulgated licensing rules that apply to the Child Placing Agencies that supervise private foster homes.

However, the existence of uniform standards by itself cannot ensure children in care are safe and well. Therefore, the review of foster home files specifically sought evidence that the foster homes reviewed were in compliance with the DFCS approval standards. Overall, evidence of compliance was found to be satisfactory and to be comparable to the second reporting period, although it varied significantly by requirement.

Table VI-7 summarizes the extent to which documentation was found in the foster home records reviewed indicating that these homes met specific approval standards, and compares the results for the second and third reporting periods.

Table VI-7
Foster Care Approval and Licensing Standards
N=36

Foster Care Screening, Licensing, Training, and Investigative Requirements	Documentation found indicating requirement met	
	2 nd Period	3 rd Period
Family assessment completed	98%	98%
No violations of agency discipline or other foster care policies	95%	98%
Gender of children in home never varied from that approved	96%	97%
Pre-service foster parent training requirements met	97%	96%
Timely Criminal Record Checks for foster parents	98%	92%
Comprehensive medical report for each foster parent	89%	91%
Number of children in home never exceeded approved capacity	90%	89%
Timely annual re-evaluation (no lapses)	92%	88%
CPS history has been checked	91%	85%
Age of children in home never varied from that approved	79%	85%
Appropriate health statements for household members	86%	81%*
Timely Criminal Record Checks for other adults in the home	89%	78%*
Sexual Offender Registry has been checked	76%	77%
Ongoing foster parent training requirements met	82%	75%
Comprehensive Drug Screen for Foster Parents	54%	57%

Source: Case Record Review, July 2006 and January 2007

* As these measures are based on a sub-sample of 36 foster homes, they have a margin of statistical error of $\pm 16\%$.

The file review found completed initial/re-evaluation reports in 96 percent (151 of 158) files in which they should have appeared, compared to 99 percent in the second reporting period. The file review found evidence that for most approval standards, 88 percent or more of the homes reviewed were in compliance. This is comparable to the second reporting period, for which most of the approval standards were met by 90 percent or more of the homes reviewed. Compliance appears to have improved on 4 of the 15 requirements; five were virtually unchanged (± 1 percentage point); and six appeared to decline; however, all the observed changes were within the foster home sample's margin of statistical error.

For four of the approval standards, evidence of compliance was found in fewer than 80 percent of the foster home records sampled: timely criminal record checks for other adults in the home, sexual offender registry checks, fulfillment of ongoing foster parent training requirements, and comprehensive drug screens for foster parents. These standards have something in common:

although all are now required by the standard DFCS child placing agency contracts that went into effect July 1, 2007 (i.e., after the close of the third reporting period), each had previously been deemed not mandatory for private provider-supervised foster homes.

As discussed in the Accountability Agents' second period report, State Law 49-5-69 permits children to be placed with private agency foster homes on the basis of a satisfactory preliminary criminal records check for the foster parents and other adult residents in the home, and a satisfactory finger print check for the foster parents.¹¹⁷ This law had been interpreted in practice as leaving to the discretion of child placing agencies such things as sex offender registry checks, finger print checks of other adults in the home, and drug screening of private agency foster parents.

However, Section 11 B of the Consent Decree establishes that DFCS will develop and maintain uniform standards for the approval and re-approval of foster homes.¹¹⁸ Section 1015 of the Social Services Manual establishes among other standards, that satisfactory criminal record and finger print checks are required of all foster parents and other adult residents of the home every five years; that comprehensive drug screening is required of each foster parent at the time of their initial approval; and that sex offender registry checks are required for the foster parents and all adult residents of the home at initial approval.¹¹⁹ Providers were informed at a March 30, 2007 meeting convened by the State that these and other requirements of the Consent Decree would be contained in their contracts that became effective July 1, 2007. However, this was too late to impact the third period file review results. As shown in Table VI-8, documentation of compliance with each of these standards was substantially higher (82-87%) among DFCS-supervised foster homes than among provider-supervised homes (41-76%).

Table VI-8
Foster Care Approval and Licensing Standards, by Home Type

Foster Home Approval Standard	DFCS – supervised Foster Homes	Provider-supervised Foster Homes	Total
Timely Criminal Record Checks for other adults in the home	82%	76%	78%
Sexual Offender Registry has been checked	87%	70%	77%
Ongoing foster parent training requirements met	87%	67%	75%
Comprehensive Drug Screen for Foster Parents	82%	41%	57%

Source: Case Record Review, September 2007.

¹¹⁷ O.C.G.A. §49-5-69

¹¹⁸ See p. 26, Section 11, paragraph B of the Consent Decree

¹¹⁹ Social Services Manual, Chapter 1015 and Appendix B, Georgia Dept. of Human Resources, July 2005

One of these requirements merits additional discussion: “sexual offender registry has been checked.” The performance on this important requirement appears to be about the same as in the second period. As with some of the other items monitored (e.g., the file contains a complete history of any Child Protective Services substantiations) conducting an accurate file review can be problematic and the results potentially misleading when the desired information rests on the clarity with which caseworkers and file reviewers are able to document the absence of an event. If a foster parent or other household adult does not appear on the sexual offender registry, there may be no physical evidence to place in the file. In that circumstance caseworkers are instructed to make a note to that effect in the case record, but they may not always do so, or such notes can be missed by file reviewers working through sometimes voluminous case records. Because of the importance of sexual offender registry checks to ensuring the safety of the foster care environment, the file review team checked the sexual offender registry for each of the 37 foster homes for which documentation of this check was not found by the file reviewers. None of the adults living in those 37 foster homes appeared on the sexual offender registry. While this does not necessarily mean that the caseworker checked the sexual offender registry and failed to make note of it in the case record, or that such a note was made but was not found by the file reviewer, it does offer reassurance that none of these 37 foster homes had registered sex offenders living in them. The State and the counties are again encouraged to emphasize with caseworkers the importance of prominently documenting the results of sexual offender checks, even when they come up clean, to facilitate accurate assessments of practice quality.

2. Prohibition of perpetrators of substantiated maltreatment to be foster parents

Section 11F of the Consent Decree specifies that DFCS will not allow perpetrators of substantiated maltreatment, those with policy violations that threaten child safety, or those who repeatedly or unrepentantly use corporal punishment to become or to remain foster parents. The State’s performance on this requirement was found to be excellent, and is considered in greater detail below.

The state’s performance in preventing foster parents from using corporal punishment was found to be excellent. Of the 159 foster home files reviewed, none (0%) had a confirmed incident of corporal punishment during the third reporting period. Similarly, no confirmed incidents of corporal punishment were identified in the second period’s foster home sample. More detail on the State’s performance in preventing the use of corporal punishment is discussed earlier in this report, in Section III.

To assess the State’s performance in not allowing perpetrators of substantiated maltreatment to become or to remain foster parents, the Accountability Agents examined any file in the foster home sample that indicated any history of substantiated maltreatment, and cross-referenced these cases with the Data in IDS, and in some instances, had the file reviewers re-examine the case records on the homes involved and the children in them.

Three homes in the sample of 159 (2%) were found to have a prior substantiation of maltreatment and to be open during the reporting period. This is similar to the second reporting period, when two such homes (1%) were found. The disposition of these homes is detailed below.

- Home 1 was a DFCS-supervised foster-to-adopt home that had an allegation of inadequate supervision substantiated in 2003. The home was closed to additional placements, but was allowed to remain open under a waiver from the central office to complete the adoption. The adoption of the child remaining in the home was completed in May 2007.
- Home 2 was a provider supervised foster home that had an allegation of inadequate supervision substantiated in 2006. The supervising CPA developed a Corrective Action Plan that addressed getting the foster father more involved so both parents did not have to attend meetings leaving the children unsupervised, and updating the family's approved support system. The supervising CPA requested a waiver from the county office to allow the home to remain open, but there is no evidence the county followed this up with a waiver request to the central office.
- Home 3 was a provider supervised home that had an allegation of inadequate supervision substantiated in 2006. The child involved in the allegation was removed from the home several weeks prior to the date the report was received. The child who was in this home during the third reporting period was removed from the home in August, 2007 and placed with a relative. The home currently has no placements, but appears to remain open.

Three other homes in the sample had allegations of maltreatment that were substantiated during the reporting period. (This is comparable to the second reporting period sample which included five such homes.) One of the three foster homes was closed at the conclusion of the investigation; one had the foster children removed from the home at the conclusion of the investigation but remained open at the end of the reporting period (the investigation was concluded within two weeks of the reporting period's end); and one was allowed to remain open under a corrective action plan because the maltreatment substantiated involved the foster parent's adoptive child, not the foster child in the home.

Given the importance of preventing perpetrators of substantiated maltreatment from becoming or remaining foster parents, the Accountability Agents vetted each of these six cases very carefully. In two of the cases, the foster homes were appropriately closed at the conclusion of the investigation. In two of the four that remained open, it appears that reasonable and appropriate efforts were made to assure the safety of the children remaining in the home while, in their best interest, preserving the continuity of their placement arrangements, (although in one of these cases, it appears that a required waiver was not requested from the central office).

In two remaining cases, the most current information available to the Accountability Agents is that the homes have no foster children placed in them, but appear to remain open. The State is urged to follow up on these cases to ensure that these homes are either closed if appropriate, or are properly approved to remain open under waivers.

Section 11F also stipulates that DFCS shall be able to identify DFCS-supervised or provider-supervised foster parents that have perpetrated substantiated maltreatment or had their home closed, and subsequently seek foster home approval from a CPA or a different CPA. The Treatment Services Unit uses a provider registry to identify and to prevent such foster parents from attempting to do this. No examples of a foster parent with a history of substantiated maltreatment attempting to change supervision environments were identified during this reporting period.

3. Operational Context

Section 11 C of the Consent Decree requires the process of licensing and approving foster homes to be carried out jointly by DFCS and the Office of Rehabilitative Services. This section describes the Accountability Agents' understanding of how DFCS and ORS collaborate in this process. It is based on interviews with staff of both these units as well as interviews with other central office and county staff.

The Office of Regulatory Services (ORS) licenses Child Placing Agencies (CPAs) and other institutional providers. A CPA must be licensed by ORS before DFCS will execute a contract with them to provide foster care. In these private provider arrangements, the CPA conducts the approval process for the foster homes it supervises. For DFCS-supervised foster homes, the approval process is conducted by DFCS.

Section 5C4i of the Consent Decree stipulates that DFCS will contract only with licensed placement contractors. To assess compliance with this requirement, data from the foster home file review were compared against the CPA licensing information available in Placement Central. Of the provider-supervised foster homes sampled that had a class member in care at the end of the reporting period, 100 percent were overseen by CPAs that had a valid license on July 10, 2007 (the closest date available to June 30, 2007).

ORS licenses the CPAs themselves, not the foster homes supervised by the CPAs. ORS only gets involved with individual provider-supervised foster homes if they receive a complaint about a particular home. To receive a license, a CPA must allow ORS to review their policies and procedures for compliance with the ORS rules regarding such things as home studies, visitation, non-discrimination, etc. In deciding whether to renew a CPA's license, ORS reviews the files of individual children against the provider record to ensure the placement was an appropriate match for the child and conducts unannounced inspections of a sample of the foster homes supervised by each CPA. If rule violations are found in the course of these the CPA can be cited for licensure violations.

CPAs wishing to serve children in DFCS custody must, in addition to licensure by ORS, be approved by the DFCS Treatment Services Unit (TSU). The DFCS policy manual specifies a set of uniform standards that foster care settings must meet to be approved by DFCS – in the case of DFCS supervised homes – or by CPAs – in the case of provider supervised homes. (As discussed in the previous section, “*Regular and timely evaluations to ensure placement settings meet standards,*” the uniform application of these approval standards has been compromised by the existence of State Law 49-5-69, which is somewhat contradictory of certain aspects of DFCS’ uniform approval standards.) Before arriving at an initial approval decision, TSU reviews the ORS licensing decision and follows up with ORS on any questions they have; performs a desk review and staffing of each application; and visits three of the CPAs foster homes to review physical plant and other issues not covered by the ORS licensing process. TSU also conducts utilization reviews every six months after approval in which they visit three homes of each CPA, meet with the staff, tour the cottages, and interview the children. TSU became the Provider Services Unit on July 1, 2007. The extent to which this change alters TSU’s previous responsibilities and activities will be addressed in the Accountability Agent’s fourth report.

4. Other Practice/Process Requirements Regarding Placement Support

The Consent Decree contains a number of other requirements related to placement. These include restrictions on the capacity of foster and group homes; payment, training and support requirements pertaining to foster parents; and automating placement data.

a. Foster Home Capacity Restrictions

Section 5C4e of the Consent Decree limits the capacity of foster homes to three foster children or a total of six children (including the family’s biological or other children) absent the written approval of the Social Services Director. It also prohibits any placement that would result in more than three children under the age of three residing in a foster home, unless the children in question are a sibling group. Data from the foster home file review indicate that the state performed extremely well in meeting these requirements.

Of the foster home files reviewed, 96 percent had three or fewer foster children in them on June 30, 2007.¹²⁰ With respect to the limit of six total children, 98 percent of the foster homes reviewed were within that limit on June 30, 2007. Finally, all of the foster homes reviewed (100%) had three or fewer children under the age of three in them on June 30, 2007.

¹²⁰ In the first and second reporting periods, the foster home file review assessed whether homes exceeded the capacity limits *at any time* during the reporting period. The file review assessed compliance with capacity limits as a *point-in-time* measure for the third reporting period so the results could be used to validate similar data in Placement Central. (See discussion in Section G of this chapter, *Improving Automated Support*.)

b. Foster Care Maintenance Payments

Section 5B1 of the Consent Decree establishes specific Basic Foster Care Maintenance payments that were to be effective July 1, 2005. Those per diem rates were: for children aged 0-6, \$13.78; for children aged 7-12, \$15.50; and for each child aged 13 and older, \$17.75. In addition, the DHR Commissioner is to propose a periodic increase in these rates in succeeding fiscal years.

Through interviewing the DFCS Deputy Director and reviewing DFCS budget documents and contract language the Accountability Agents determined that the State met this provision. Since the inception of the Consent Decree, the Commissioner has proposed and implemented increases each year in the foster care per diem rates. For SFY 2008, a cost-of-living-type increase of approximately 3% in foster care per diem rates was implemented. The per-diem rates that went into effect July 1, 2007 are: for children aged 0-6, \$14.60; for children aged 7-12, \$16.50; and for each child aged 13 and older, \$18.80. All DFCS foster homes were paid the required per diem rates and all new provider contracts contained language mandating the new rates.

c. Foster Parent Training and Support

Sections 5C6 and 11D of the Consent Decree stipulate that foster and pre-adoptive parents will receive uniform pre-service training prior to being approved or having a child placed in their home; and that they will be required to complete ongoing, annual training as part of the annual re-approval process. Section 5C6 further stipulates that foster parents will be able to contact DFCS 24 hour a day, seven days a week with their questions or concerns. The Accountability Agents found DFCS' performance to be quite good on the first and last of these requirements, but that performance on the second of these three requirements needs further improvement.

The foster home case record review found evidence in the files of 96 percent of the foster homes reviewed that the pre-service training requirements had been met. This was about the same as the second period rate of 97 percent.

With respect to ongoing annual training, documentation supporting that the requirements had been met was found in 75 percent of the files of the 120 foster homes sampled to which the requirement applied. This appears to be a decrease from the second reporting period, for which the comparable rate was 82 percent, although the observed change falls within the sample's margin of statistical error. Compared to second period performance, compliance appears to have declined among both DFCS-supervised foster homes (from 93% to 87%) and provider-supervised foster homes (from 74% to 67%), although both changes were within the sample's margin of statistical error. Evidence of compliance with ongoing training requirements remained substantially higher among DFCS-supervised foster homes than among provider-supervised homes. As discussed in Section 1 *Regular and timely evaluations to ensure placement settings meet standards*, above, the implementation of the new provider contracts effective July 1, 2007 can be expected to reduce this disparity.

With respect to the 24/7 phone support requirement, Resource Development staff in the Counties report that they provide foster parents with the phone number of their assigned monitoring worker whom they can call during work hours, and that during pre-service foster parent training, they receive the phone number of an on-call worker they can reach after hours.

d. Automated Placement Data

Section 11E of the Consent Decree stipulates that, within 90 days of the entry of the Consent Decree, DFCS will have an automated information system that can provide: demographic characteristics and information on every foster or pre-adoptive family; a list of all foster children in the home and the DFCS office in whose custody they have been placed; information about the other children or adults in the home; the approval or re-approval status of the home and, for provider-supervised homes, the name and address of the supervising CPA; and a complete history back to January 2002 of any reports of maltreatment and substantiations of maltreatment. This requirement has been met.

An information system is only as good as the quality and completeness of the data it contains. In the first period report, the Accountability Agents urged the State to strengthen DFCS' ability to manage and be accountable for provider-supervised foster homes by completely populating Placement Central with provider-supervised foster home data. DFCS undertook an initiative to do just that. Initially, a spreadsheet was designed to secure relevant information from Child Placing Agencies (CPAs) about the capacity, census, and approval status (among other things) of the foster homes they supervised. CPAs were asked to provide updates about foster homes as needed (utilizing the spreadsheet) by directly sending them to Data Integrity Specialists at the Central Office who would input the new data into Placement Central. TSU (now PRU) subsequently determined that not all CPAs were consistently reporting data changes as intended.

To facilitate consistent compliance from the CPAs, PRU has redesigned the reporting process. PRU regional staff throughout the state now initiates a weekly census request to the CPAs within their region utilizing an electronic spreadsheet. PRU is responsible for ensuring CPA compliance with the updating process and the completeness of reporting from the CPAs.

Completed spreadsheets are forwarded weekly to the Central Office Data Integrity Specialists for input of updates to Placement Central. An historical account of the spreadsheet data is also maintained within PRU. The weekly census requests should help to ensure the completeness and correctness of Placement Central data on provider-supervised foster homes.

Section 11E of the Consent Decree further stipulates that DFCS shall consider the information described in that Section before a child is placed or a foster home is approved or re-approved. The Accountability Agents' found, in the review of compliance with foster home approval and licensing standards (discussed above), evidence that DFCS routinely considers the required

information before placing children or approving or re-approving foster homes. However, this process presently involves a combination of “look-ups” in Placement Central and the Protective Services Data System components of IDS, and evaluating the contents of paper files. The Accountability Agents believe this process will be significantly streamlined and made less error prone when Placement Central is completely populated and its data integrity ensured.

F. Supervision of Contract Agencies

Sections 5B, 9, and 10B of the Consent Decree contain various provisions regarding provider reimbursement rates and contracts, specific language to be included therein, and the licensing and inspection of provider-supervised placement settings.

In May 2006, the Accountability Agents learned that the Federal Centers for Medicaid and Medicare Services (CMS) had informed DHR that it was no longer willing to provide Medicaid funding for “bundled” services, as it had for years under Georgia’s per diem system of reimbursement. CMS announced it was withholding approximately \$70 million in reimbursement until DHR restructured its method of reimbursement.

In response, DHR submitted a proposal to CMS that significantly changed the way providers are reimbursed for services provided. The changes included:

- Eliminating the current bundled Therapeutic Residential Intervention Services (TRIS) per diem rate;
- Eliminating the Level of Care system currently used to determine the per-diem rate;
- Moving Behavioral Health Services to a fee-for-service basis; and
- If Behavioral Health Services are determined to be medically necessary, providing and billing for them through the State’s outpatient Rehabilitation Options Services Program.

CMS approved DHR’s proposed “unbundling” plan in January, 2007. The State rolled out unbundling Statewide on July 1, 2007. DFCS also moved forward on that date with some of the other contract changes required by the Consent Decree (see Section F.2 ***New Contract Provisions***, below), and with the reorganization of TSU into the Provider Relations Unit (PRU). PRU will transition from TSU’s previous focus on medically-oriented utilization reviews to a watchful oversight role focusing on the quality of provider-delivered services and provider compliance with the terms of their contracts.

1. Rate Reimbursement Task Force

Section 5B2-7 of the Consent Decree stipulates that a Rate Reimbursement Task Force (RRTF) be established within 60 days of the entry of the Consent Decree to recommend changes to the Level of Care system and to design a rate structure based on measurable outcomes for

children.¹²¹ The RRTF was established within the required timeframe and held at least three face-to-face meetings, ten teleconferences, and three video conferences.

While the State waited to learn the fate of its unbundling proposal to CMS the RRTF members, one-by-one resigned. The parties have agreed to appoint replacement members and to ask the RRTF to begin meeting again now that unbundling has been officially rolled out.

2. New Contract Provisions

Section 5B1, 9A-C and 10B4 of the Consent Decree stipulate specific language and concepts that are to be incorporated into provider contracts.¹²² Some of these (e.g. requiring providers to pass through to their foster homes the full basic maintenance payment) were incorporated into new contracts at the start of fiscal year 2006 (July 1, 2005). However, other provisions (e.g. mandating detailed reporting requirements and adding contract language to bring provider-supervised placements into full compliance with DFCS approval and training standards) were implemented along with the new rate structures occasioned by the unbundling issue. The required contract provisions were fully implemented in the provider contracts that took effect on July 1, 2007.

G. Improving Automated Support

1. SACWIS Implementation

Georgia is currently designing a Statewide Automated Child Welfare Information System (SACWIS) in conformance with federal requirements and the Consent Decree.¹²³ This system, Georgia Shines, will replace several of the State's existing systems used for collecting and reporting data to the federal government as well as to DFCS management and staff. The Consent Decree required Georgia to select and contract with a vendor by December 31, 2005. Accenture LLP was selected in November 2005 and the State signed a contract with the firm to begin the work immediately. However, the State was not able to execute the contract with the firm until February 2006 due to another bidder's protest of the selection and the time required resolving the protest. The implementation date designated in the contract is December 31, 2007. All required design and planning requirements have received approval from the Federal oversight office. As planned, the system was piloted in Douglas County in September 2007. As a result of the knowledge gained from the pilot, the current schedule is to implement the new system in DeKalb and Fulton Counties in June 2008, not February 2008 as reported in the second period report. According to the State, the pilot implementation underscored the need to have certain manual processes in place to ensure successful implementation. Because Fulton and DeKalb Counties have the largest caseloads in the state, the preparation work is more

¹²¹ See pp. 14-15, paragraphs 2-7 of the Consent Decree

¹²² See pp. 13 and 23-26, Sections 5B.1, 9A-C and 10B.4 of the Consent Decree

¹²³ See p. 22, Section 7 of the Consent Decree

extensive and it was determined that it was not in the best interest of the Counties or the system implementation as whole to attempt implementation before June 2008.

2. Placement Central

Placement Central is DFCS' automated system for tracking child placements and certain information about those placements. Although Placement Central has historically contained a limited amount of data on provider-supervised foster care placements, DFCS is currently undertaking an effort to completely populate it with certain provider data, as discussed previously in this Chapter. This is an important step forward in improving DFCS' ability to manage placement providers and to be accountable (and to hold providers accountable) for the work that is contracted out.

For the third reporting period the Accountability Agents undertook a limited effort to validate the data currently in Placement Central. The purpose of this validation effort was to understand the reliability of data from Placement Central for monitoring and accountability purposes, specifically as it relates to Outcome 31. The Accountability Agents are interested in moving away from file review data in favor of automated administrative data when such automated data can be demonstrated to be sufficiently reliable. A cross-match was performed between the computerized file review data and corresponding data in Placement Central to ascertain the degree to which they were in agreement. This cross-match was performed on three specific data fields related to the census of individual foster homes at a point-in-time:

- Were there more than three foster children residing in this foster home on June 30, 2007?
- Were there more than six children total (including birth and adopted children) residing in this foster home on June 30, 2007?
- Were there more than three children under the age of three residing in this foster home on June 30, 2007?

As described in the Accountability Agents' second period report, DFCS undertook an effort within the past year to populate Placement Central with data on provider-supervised foster homes to complement the data on DFCS-supervised foster homes, group homes, and residential treatment facilities that historically as been found in Placement Central. Therefore, the comparison of file review and placement central data was made for the entire sample of 159 foster homes. Table VI-9 displays the results of this comparison.

Table VI-9
Comparison of Placement Central (PC) and File Review (FR) Data

Data Field	Records Compared	Records with No Difference	% of records with No difference	Characteristics of Variance
More than 3 foster children in home on June 30, 2007?	159	155	97%	PC equally likely to understate (2 records) or overstate (2 records) compliance found by file review
More than 6 children total in home on June 30, 2007?	159	156	98%	PC understated census on 2 records, overstated census on 1 record compared to file review
More than 3 children > age 3 in home on June 30, 2007?	159	159	100%	No variance
Total Fields Compared	477	470	99%	

As displayed in Table VI-9, overall, Placement Central and the foster home file review matched exactly on 99 percent of the 477 data elements compared. The rate of agreement was consistently high across the three data elements compared. This is a positive development because, by agreement of the Parties and the Accountability Agents, while Placement Central has been the source of the census data for DFCS-supervised foster homes used to calculate achievement of Outcome 31, it was thought to be less reliable for provider-supervised foster homes and so data on their censuses was collected by the file review team in site visits to the supervising CPAs. The results of the third period validation of Placement Central foster home census data suggest that it may be possible for future review cycles to replace this labor intensive manual data collection process by relying on Placement Central without sacrificing data accuracy.

H. Maximizing Federal Funding ¹²⁴

The Consent Decree contains requirements for DHR/DFCS to 1) maximize available federal funding through Titles IV-B and IV-E of the Social Security Act, and 2) not supplant state dollars for foster care services with any federal increase that results from the maximization efforts.¹²⁵ In addition, there are a number of the outcomes that pertain to actions and documentation required to support and to enhance claiming IV-E reimbursement for Foster Care expenditures. To evaluate this requirement, the State is to establish a baseline of “present”

¹²⁴ See Dimas, J.T. and Morrison, S. A. *Period I Monitoring Report, Kenny A. v. Perdue*, November 2006 for background on Title IV-E

¹²⁵ See p. 31, Section 14 of the Consent Decree

levels of state and federal funding.¹²⁶ In the second period report, the Accountability Agents provided funding information for State Fiscal Year 2006 (July 1, 2005 – June 30, 2006,) as the baseline year. Similar information for State Fiscal Year 2007 (July 1, 2006 –June 30, 2007) will be included in the fourth period report.

In July and August 2007, the Department engaged Hornby Zeller Associates, Inc (HZA) in an assessment of the Department's IV-E reimbursement efforts. According to HZA, the study was to identify 1) both the extent to which the state's Title IV-E penetration rate can legitimately increase and the limits beyond which it cannot increase; and 2) mechanisms through which DHR/DFCS can increase its level of federal reimbursement, even in the face of the limitations on the penetration rate.¹²⁷

As noted by HZA, the amount of federal reimbursement each state receives under Title IV-E *"depends on two factors: the rate of federal reimbursement and the percentage of foster children eligible for federal funding. The reimbursement rate for foster care maintenance costs (room, board and supervision for eligible children) varies from state to state based upon the state per capita income. Poorer states are reimbursed as much as 77 cents on the dollar while states with the highest income per capita are reimbursed at the rate of 50 cents on the dollar for foster care maintenance payments."*

*The percentage of children in out-of-home placements who are eligible to receive federal reimbursement under Title IV-E is known as the penetration rate. Penetration rates vary by state even more widely than do reimbursement rates, but the national average percent of children eligible for Title IV-E is 42 percent according to AFCARS data for 2004."*¹²⁸

The HZA analysis found Georgia's Title IV-E penetration rate of about 28 percent "very low" but estimated it realistically could be increased to about 45 percent. However, they also note that achieving this goal will "require time and DHR/DFCS cannot do it by itself."¹²⁹ Their analysis indicated what specific efforts could potentially produce incremental changes in the rate. Reducing errors may increase the rate to 32 percent. Another effort with the potential of an 8 to 12 percentage point increase (allowing the penetration rate to climb to 36 to 40 percent) is a focus on court order language. However, as previously noted in the discussion of Outcome 26, this effort requires a strategy that involves local judges and court administration. These data should help make the importance of such a strategy clear to all.

Finally, another area with the potential for producing a larger incremental increase is the placement of children in licensed settings. HZA estimated that as many as 17 percentage points might be achieved with more emphasis in this area. However, this recommendation may be at odds with other principles central to good practice and to the Consent Decree. One such

¹²⁶ Ibid.

¹²⁷ Hornby Zeller Associates, Inc., *Georgia's Use of Title IV-E*, August 2007, p.i.

¹²⁸ Ibid.

¹²⁹ Ibid, p. ii.

principle is the importance of placing children in proximity to their community of origin. HZA cautions against a result that would place more children out of county or in higher cost settings, such as congregate care settings. Another such principle is the desirability of placing children with relatives if they cannot safely be reunited with their birth parents. This principle may conflict with the revenue maximization goal of placing more children in licensed care settings when relatives are unwilling to become licensed providers.

PART VII MISCELLANEOUS PROVISIONS

Section 20 of the Consent Decree contains the Agreement's miscellaneous provisions. Two provisions, contained in Section 20G, contain substantive data reporting requirements.¹³⁰ These are covered in this part of the report.

A. Repeat Maltreatment Data

Section 20.G.1 of the Consent Decree requires DHR to provide the Accountability Agents data and information sufficient to enable them to verify data reported by the State on the number of children in DeKalb and Fulton Counties during the reporting period (other than those in foster care) that experienced repeat maltreatment. This is operationalized in the Consent Decree as follows:

- The number of children in each county who, during the reporting period, experienced substantiated maltreatment;
- The number and percentage of children in the first item who also experienced maltreatment during the preceding 12 month period. These data, as reported by the State, are reproduced in Table VII-1, below. The Accountability Agents' verification approach is discussed in Appendix B.

<i>Table VII-1 Repeat Maltreatment</i>			
<i>Reporting Period: January 1, 2007 – June 30, 2007</i>			
		DEKALB	FULTON
a) Number of children during the reporting period experiencing substantiated maltreatment		648	1130
b) the number of children in a) of this item who also experienced maltreatment during the preceding 12 month period		33	76
Percentage of children who had substantiated maltreatment during the preceding 12 months		5.1%	6.7%

These repeat maltreatment rates represent an improvement compared to the second period rates of 5.9 percent and 8.0 percent for DeKalb and Fulton counties, respectively.

¹³⁰ See pp. 45-46 of the Consent Decree,

B. Diversion Data

Section 20.G.2 of the Consent Decree requires DHR to provide the Accountability Agents data and information sufficient to enable them to verify data reported by the State on the number of children in DeKalb and Fulton Counties during the reporting period (other than those in foster care) that experienced substantiated maltreatment within 11-365 days after being referred to DHR's diversion program. These data, as reported by the State for the period October 27, 2005 – June 30, 2006 are reproduced in Table VII-2, below. (Due to the 11-365 day follow up period for the diversion statistics, the diversion data reported here is for the first reporting period.) The Accountability Agents' verification approach is discussed in Appendix B.

<i>Table VII-2 Diversions with Subsequent Substantiated Maltreatment</i>			
<i>Reporting Period: October 27, 2005 – June 30, 2006</i>			
		DEKALB	FULTON
a) Number of cases in each county during the reporting period in which there was a referral into DHR's diversion program		492	636
b) the number of cases in a) in which there was substantiated maltreatment within 11-365 days after referral to DHR's diversion program		20	30
Percentage of cases in which there was substantiated maltreatment within 11-365 days of referral into DHR's diversion program		4.1%	4.7%

Appendix A

Kenny A. v. Sonny Perdue Consent Decree Outcomes

Section 15 of the Consent Decree requires 31 outcomes. These outcomes are grouped in the categories of Safety, Permanency, Well-Being, and Strengthened Infrastructure

SAFETY

1. Children in Foster Care are Safe From Maltreatment

- **Outcome 1:** By the end of the first reporting period, at least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of report.
- **Outcome 3:** By the end of the first reporting period, at least 99% of all investigations of reported abuse or neglect of foster children during the reporting period shall include timely, face-to-face, private contact with alleged victim, including face-to-face contact with a child who is non-verbal due to age or for any other reason.
- **Outcome 2:** By the end of the first reporting period, at least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of report.
- **Outcome 5:** By the end of the first reporting period, no more than 1.27% of all children in foster care shall be the victim of substantiated maltreatment while in foster care. By the end of the second reporting period, no more than .94% of all children in foster care shall be the victim of substantiated maltreatment while in foster care. By the end of the fourth reporting period, no more than .57% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.
- **Outcome 6:** By the end of the second reporting period, 90% of all foster homes will not have an incident of corporal punishment within the previous six months. By the end of the third reporting period, 98% of all foster homes will not have an incident of corporal punishment within the previous 12 months.

PERMANENCY

2. Children in Placements Maintain Family Connections

- **Outcome 7:** By the end of the second reporting period, at least 70% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 90 days of entering foster care. By the end of the fourth reporting period, at least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.
- **Outcome 16:** By the end of the second reporting period, at least 70% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings. By the end of the fourth reporting period, at least 80% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings.
- **Outcome 19:** By the end of the second reporting period, at least 70% of all children in

care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii). By the end of the third reporting period, at least 80% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii). By the end of the fourth reporting period, at least 90% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii).

- **Outcome 21:** By the end of the third reporting period, 75% of all the children with the goal reunification shall have had appropriate visitation with their parents to progress toward reunification. By the end of the fourth reporting period, 85% of all the children with the goal reunification shall have had appropriate visitation with their parents to progress toward reunification.
- **Outcome 23:** By the end of the second reporting period, at least 80% of children in the Class at a point in time during the reporting period who have one or more siblings in custody with whom they are not placed shall have had visits with their siblings at least one time each month during the prior 12 months in custody, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placement is more than 50 miles and the child is placed with a relative.

3. Children Achieve Permanency

(permanency= reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.)

Children in care at the time of the Consent Decree:

- **Outcome 12:** For children whose parental rights have been terminated or released and the child has an identified adoptive or legal guardian resource at the time of the entry of the Consent Decree, 90% shall have had their adoptions or legal guardianships finalized within six months after the entry of the Consent Decree.
- **Outcome 13:** For all children for whom parental rights have been terminated or released at the time of entry of the Consent Decree, and the child does not have an identified adoptive resource, 95% shall have been registered on national, regional, and local adoption exchanges, and have an individualized adoption recruitment plan or plan for legal guardianship within 60 days of the Consent Decree.
- **Outcome 15:** Permanency efforts (15/22): By the end of the second reporting period, at least 80% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child's case record why termination of parental rights should not be filed.

By the end of the fourth reporting period, at least 95% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child's case record why termination of parental rights should not be filed..

- **Outcome 9:** Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the "24 backlog pool"): For all children in the 24 month backlog pool, by the end of the second reporting period, at least 35% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the 24 month backlog pool, who remain in custody at the end of the second reporting period, by the end of the third period at least 40% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the 24 month backlog pool, who remain in custody at the end of the third reporting period, by the end of the fourth reporting period at least 40% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.
- **Outcome 10:** Children in custody for more than 24 months and still in custody upon entry of the Consent Decree (children in the "over 24 backlog pool"): For all children in the over 24 month backlog pool, by the end of the second reporting period, at least 35% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the over 24 month backlog pool, who remain in custody at the end of the second reporting period, by the end of the second reporting period, by the end of the third reporting period, at least 35 percent shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the over 24 month backlog pool, who remain in custody at the end of the third reporting period, by the end of the fourth reporting period at least 35% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.

Children entering custody after Consent Decree:

- **Outcome 8a:** Of all the children entering custody following the entry of the Consent Decree, at least 40% shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.
- **Outcome 8b:** Of all the children entering custody following the entry of the Consent Decree, at least 74% (1) shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification or permanent placement with relatives; or (2) shall have had one of the following permanency outcomes within

24 months or less of entering custody: adoption, permanent legal custody, or guardianship.

Permanency actions after Consent Decree:

- **Outcome 11:** By the end of the second reporting period, for all children whose parental rights have been terminated or released during the reporting period, 80% will have adoptions or legal guardianships finalized within 12 months of final termination or release of parental rights.
- **Outcome 4:** By the end of the second reporting period, no more than 8.6% of all foster children entering custody shall have re-entered care within 12 months of the prior placement episode.
- **Outcome 14:** No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.

Court reviews of permanency actions

- **Outcome 27:** By the end of the second reporting period, at least 80% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review. By the end of the third reporting period, at least 85% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review. By the end of the fourth reporting period, at least 95% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.
- **Outcome 28:** By the end of the second reporting period, at least 95% of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.

WELL BEING

4. Children Experience Stable Placements and Worker Continuity.

- **Outcome 17:** By the end of the second reporting period, at least 86.7% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody. By the end of the fourth reporting period, at least 95% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody.
- **Outcome 18:** By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had 2 or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption worker or Specialized Case Manager; case managers who have died, been terminated, or transferred to another county; or case managers who have covered a case during another case manager's sick or maternity leave.
- **Outcome 20:** By the end of the second reporting period, at least 95% of children in care at a point in time during the reporting period shall have had at least one in-placement visit and one other visit, as defined in Section 5.D, each month by their case manager. During the prior 12 months in custody.
- **Outcome 22:** By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had visits between their DFCS placement case manager and their foster parent, group care, institutional or other caretaker at least one time each month during the prior 12 months in custody.

5. Children and Youth Receive the Services they Need

- **Outcome 24:** By the end of the second reporting period, the percentage of youth discharged from foster care at age 18 or older with a high school diploma or GED will increase over baseline by 10 percentage points. By the end of the fourth reporting period, that percentage shall increase by an additional 10 percentage points.
- **Outcome 30:** By the end of the second reporting period, at least 80% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child's most recent case plan. By the end of the fourth reporting period, at least 85% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child's most recent case plan.

STRENGTHENED INFRASTRUCTURE

6. Capacity to Support Placement Process

- **Outcome 25:** By the end of the first reporting period, at least 85% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status. By the end of the second reporting period, at least 95% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status. By the end of the fourth reporting period, at least 98% of all foster children in custody at a point in time

during the reporting period shall be in placements that are in full approval and/or licensure status.

- **Outcome 31:** By the end of the second reporting period and continuing thereafter, no more than 10% of all children in foster homes shall be placed in foster care homes that exceed the capacity limits referenced in Section 5.C.4.e. of the Consent Decree, concerning the requirement that no child shall be placed in a foster home if that placement will result in more than three(3) foster children in that foster home, or a total of six (6) children in the home, including the foster family's biological and/or adopted children.

7. **Timely and Complete Court Orders**

- **Outcome 26:** By the end of the second reporting period, at least 85% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act. By the end of the fourth reporting period, at least 95% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act
- **Outcome 29:** By the end of the third reporting, no more than 5% of all children in custody of DHR/DFCS for 12 months or more shall have lapse of legal custody within the prior 13 months.

Appendix B Methodology

The Accountability Agents used several methodologies to arrive at the judgments, conclusions and recommendations contained in this report: (i) review of written materials and data supplied by the State and Counties; (ii) interviews; (iii) extensive case record reviews; and (iv) strategic engagement of State and county personnel for pro-active, hands-on monitoring through biweekly meetings known as the “G2.” This appendix describes these data sources and methods and also catalogues and explains interpretation and measurement issues that were addressed and resolved during the first reporting period. The final portion of this appendix describes the specific methodology employed to report on Outcome 7 (Diligent Search) and Outcome 16 (Sibling Placement) because a separate file review was conducted in April 2007 to collect data for performance measurement.

A. Data Sources and Methodology for Measuring State Performance in the Third Reporting Period

Four primary sources of information were used to assess the State of Georgia’s progress during the second reporting period, January 1 – June 30, 2007.

1. State Data Systems

The first source of information is the DFCS administrative data systems that the Department currently employs to hold case-related information and prepare reports for the Federal Department of Health and Human Services, the citizens of Georgia and other interested parties. This system is known as “IDS.”

There is general agreement that IDS is not sufficiently robust to support the kind of case management and data analysis desired by the State of Georgia. Over the next few years it will be replaced by a Statewide Automated Child Welfare Information System (SACWIS) that the state is currently developing. However, IDS currently is sufficient to provide reports on a number, but not all, of the outcomes.

a. Addressing Data Integrity Issues

Like all information systems, the accuracy of IDS’ data is function of the accuracy with which data are coded and input into the system. Previous evaluations have noted some significant discrepancies between the information contained in case records and data produced by IDS. These discrepancies appear to be caused by human error. Typically, mistakes in interpretation and coding of the facts contained in the case record or data entry result in erroneous data being entered into the system.

The Accountability Agents have been very selective about which data to rely on for assessing compliance with the Consent Decree's provisions. Most of the data in this report was generated by file and case record reviews conducted specifically for this purpose. In several instances, the case record readers were asked to collect the exact piece of information directly from the sampled case files and from IDS by going "on-line" and looking at the IDS data base. These instances included information about a child's date of entry into foster care, current placement type and date, and permanency goal. Discrepancies were found, but for most analysis, the discrepancies did not make material differences. For example, 30 (16%) of the children in the foster care sample of 180 had different dates of removal in IDS than was found documented in the case files. Nearly 75 percent of these dates were no more than five days apart. However, while IDS always had a removal date, in 16 case files no date of removal was documented. When it was possible or necessary to compare data from IDS or other automated sources to data from the file and case record reviews, it often produced a result that was more accurate and reliable than if any single data source had been relied upon.

2. Document Review and Interviews

During the monitoring period, the Accountability Agents collected written reports and materials regarding foster care and adoption policy, budgets, findings from the Child Advocate, licensing, treatment services, worker training and certification. At the state level, the leadership of the Office of Regulatory Affairs, Treatment Services Unit, Statewide Risk Assessment, Education and Training Services Section, and other administrative offices were interviewed. At the local county level, interviews included supervisors and case managers responsible for investigating reports of maltreatment in care, placement, and foster parent training and support. The Accountability Agents worked directly with State and County Quality Assurance staff to analyze data collected and tracked at the local level such as caseloads, visitation, determinations for children in care 15 of 22 months, and staff certification.

3. Structured Case Record Reviews

A second source of information is systematic case record reviews (CRRs.) Three case record reviews were conducted: 1) investigations of maltreatment in care; 2) foster home approval and capacity; and 3) children in foster care placements. Table B-4 summarizes sample characteristics of each review. The following discussion provides more detail on the sampling approach, the review instruments development, review logistics, reviewer qualifications and quality assurance, and analytical process.

a. Sampling Approach

As indicated in Table B-1, 100 percent of the investigations of maltreatment in care between January 1 and June 30, 2007 were read. Therefore, the margin of statistical error in these results is extremely small, and would reflect case record reviewer differences or errors rather than differences within the universe.

For the two other case record reviews, random samples were drawn from two different universes:

- All foster homes that had a DeKalb or Fulton child placed in the home at anytime between January 1 and June 30, 2007. This included private agency supervised homes as well as DFCS supervised homes.
- All foster care cases (children) active in DeKalb and Fulton counties any time between January 1 and June 30, 2007.

For each of these reviews, samples were drawn such that the findings would have a +/- 7% error rate at a 95% confidence level. This level of precision is for frequencies reported for the sample as a whole. Data provided on subsets of the sample are less precise; where appropriate, separate margins of error for the different subsets have been calculated and noted in the body of the report. As described later in this appendix, a certain number of records included in the original samples could not be read and were rejected based on pre-determined criteria. To achieve the minimum number of records for each review, small additional, random replacement samples were drawn.

Table B-1
Case Record Review Sample Size and Associated Margin of Error

Target of Review	Universe of cases	Desired Maximum Sample Size	Actual Number Reviewed	Margin of Error
Maltreatment in Care Investigations	93	93	63 completed by DeKalb and Fulton 30 completed by other counties involving DeKalb and Fulton children	+/- 0.0 percent
Foster Homes	925	145	159	+/- 7 percent
Children in Foster Care	2,812 children with active cases any time January 1 through June 30, 2007	180	180	+/- 7 percent

b. Instrument Design

Three separate data collection Instruments were developed, one for each sample. They were developed in conjunction with the DFCS Evaluation and Reporting Section (E&R) and consultants from Georgia State University (GSU) schools of public administration and social work. The instruments were field tested and reviewed by Counsel for the Plaintiffs and by the State; many changes recommended by the reviewers were incorporated into the final instruments. As is typical with case record reviews, reviewers encountered some problems with some of the questions. Learning from this third effort will be incorporated into the next case record review.

c. Data Collection Schedule and Logistics

Planning for the data collection effort began in April 2007 with discussions with E&R and GSU regarding formatting data instruments for efficient data capture and analysis. Based on technology problems encountered during the first and second record review, changes were made in this round to improve the ease of use. Each of the review guides was set up as a SAS-based form for electronic information entry directly into a data base through a GSU secure web site. This eliminated a separate data entry step. However, it did rely on the ability of the reviewers to be consistently linked to the internet. Occasional connectivity problems interfered with some data entry. This required some work to be repeated. As the reviews progressed, portions of guides were revised as necessary to accommodate unforeseen circumstances found

in the records. In addition, the reviewers had the capability to make extensive comments to explain responses and provide more background on the case.

Data collection began in August 2007 with the maltreatment in care investigations. The review of foster care files was also initiated in August. The foster home file review began in October. Records selected from private agencies were reviewed at the respective private agencies. The remaining records for investigations, foster care, and DFCS supervised foster homes were reviewed at the county offices where the active cases are maintained. Closed records were brought to these sites for review.

d. Review Team Qualifications and Training

Twelve E&R staff were the primary case readers. These staff members average 25 years of experience in DFCS and are very familiar with the DFCS's policies and practices. They were selected for this task based on their skills, experience, and knowledge.

There was a brief training before commencing each record review. The training consisted of reviewing and discussing the wording and meaning of each question on the data collection instruments. Additional changes were made to the guides as a result of these discussions. Given the pace of the necessary semi-annual reporting schedule, it has been difficult to extend the training time. On-going training between reviews is taking place.

DFCS reviewers were provided with digital files containing a "Handbook" and a copy of the Consent Decree for reference. In addition, reviewers had personal copies of the instruments in hard copy on which they made notations regarding the discussions about definitions, responses, and where within the case records to locate certain pieces of information.

e. Quality Assurance

Reading accuracy and inter-reader reliability was addressed by an extensive quality assurance process that included constant "calibration" and a "second read" of the records. Two senior E&R reviewers were designated team leaders. They were responsible for responding to reviewer questions regarding clarification or how to interpret information contained in the record. These team leaders shared with one another the questions being asked and the responses they were giving to reviewers so as to assure consistency. In this way, patterns among questions were monitored and instructions were clarified for all reviewers as necessary. Team leaders reviewed each reviewer's work at the completion of each review. The Accountability Agents were also on-site several days during the review and provided another resource for questions and clarification in addition to reviewing some files. Finally, reviewers were encouraged to provide explanatory comments for their responses if they felt the situation they found did not adequately fit the question being asked or additional detail for some critical questions was desired. These comments were invaluable to the Accountability Agents as they reviewed the data collected and made judgments about response recodes when necessary.

An additional level of Quality Assurance was provided by the Georgia State University (GSU) project coordinator and four to five research assistants with masters degrees in social work and backgrounds in child welfare and case record review. They read at least one third to nearly one half of the sampled Foster Care, Foster Home, and CPS investigations files. The records were randomly selected from each reviewer's completed set. Review guides that had different responses from the GSU QA staff and the E&R reviewers were set aside, investigated and resolved as possible by the GSU project coordinator and E&R team leaders, often in consultation with the Accountability Agents, before the protocol was entered into the data base. Time was set aside in the schedule to review the completed review guides in question and do any necessary clean up.

To calculate inter-rater reliability GSU selected variables from all three files (CPS Investigations, Foster Homes, and Foster Care) where both the reviewers and the QA reviewers had access to the same information in the case file. Each response was not tested for inter-rater reliability. Correlations between the reviewer results and the QA reviewer results were calculated using the Statistical Package for Social Sciences (SPSS), and a Cronbach's Alpha statistic was calculated for each. Cronbach's Alpha measures how well a set of items, in this case the reviewer responses and the QA reviewer responses, correlate or match. Cronbach's Alpha is not a statistical test - it is a coefficient of reliability (or consistency). Note: when a Cronbach's Alpha is used in a Social Science research situation, like the *Kenny A.* case review, a reliability coefficient of .70 or higher indicates that there is an almost zero probability that the reviewer and QA reviewer would achieve these results by chance.

The Cronbach's Alpha coefficients for each of the data sets are provided in Table B-2, below. All measures are above the threshold of .70.

Table B-2
Cronbach's Alpha Measure of Inter-Rater Reliability
for Each Case Record Review

Sample	Cronbach's Alpha Measure
CPS Investigations	0.96795
Foster Homes	0.90849
Foster Care	0.96408

A final check on quality came during the analysis. When the analysis identified a discrepancy that could not be explained by the reviewer comments, the Accountability Agents requested a reviewer to go back to the file in question and collect more specific information on which to make a judgment. During the analysis, it became clear to the Accountability Agents that the majority of reviewer errors resulted from the 1) poorly worded questions that still caused confusion among some reviewers and 2) in the case for the foster care review, the length and complexity of the review guide. Both these errors will be monitored more closely in the fourth

period data collection effort.

f. Data analysis

The Statistical Package for Social Sciences (SPSS) and Microsoft Excel were used for analyzing the collected data and calculating inter-rater reliability. GSU staff assisted in creating descriptive statistics for the Accountability Agents.

g. Records in Sample that Were not Read

Not all records included in the original samples were reviewed. Before the reviews began, we established a set of reasons for why a case record may not be read. Table B-3 provides a summary distribution of the cases that were not read with the reasons for not reading them. Files that could not be located for the review were reported to county leadership.

Table B-3
Case Records Drawn for Original Sample, Not Reviewed

Target of Review	Number of cases sampled but not read as part of the review and reason why they were not read	
Maltreatment in Care Investigations	Coding error in IDS, this is not a maltreatment in care referral/report	3
	No child in the legal custody of Fulton or DeKalb Counties was involved in the report	6
	Child was not in the legal custody of DeKalb or Fulton Counties at the time of the report	2
	Other	1
	Total	15
Foster Homes	No children were in the home during the 6 months of the review	1
	No children in the legal custody of DeKalb or Fulton Counties DFCS were placed in this home between January 1 and June 30, 2007	4
	Sampling error, home was incorrectly selected from wrong population	1
	Homes were ICPC homes located out of state	2
	Other	4
	Total	12
Children in Foster Care	Incomplete case file provided	5
	Case timeframe too short (child in care less than 8 days)	3
	Case record could not be located within the timeframe of the review	3
	Child placed out of state through ICPC the entire review period	3
	Caser record provided too late in the review to be included	2
	Child not in the legal custody of Fulton or Dekalb Counties between January 1 and June 30, 2007	1
	Child was age 18 before the review period	1
	Total	18

4. Biweekly meetings with the management teams of Fulton and DeKalb County DFCS (G2)

The Accountability Agents met twice each month with Fulton and DeKalb directors, senior management, supervisors and case managers, and senior central office staff. These meetings allowed for hands-on monitoring and data verification. Specifically, the purpose of the **G2** has been fourfold:

- Engage Fulton and DeKalb County senior management teams in tracking their own progress in achieving the Consent Degree outcomes;
- Have “real-time” communication about successes and areas of concern regarding the progress of reform;
- Establish a clear understanding of the relationship between practice, process, and infrastructure enhancements and outcome achievements; and,

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- o Integrate the settlement outcomes and required practice and process into other initiatives the Counties are engaged in, such as the Program Improvement Plan (PIP) to help develop and articulate the “big picture” of reform.

The process during the G2 starts with using administrative data to prompt the group to develop hypotheses about underlying problems that threaten the achievement of critical outcomes, and about potential solutions. Fresh data that shed light on the validity of those hypotheses are then brought back to a subsequent meeting. Based on the group’s examination and discussion of the fresh data, a given hypothesis may then be rejected, accepted, or refined and retested. For hypotheses that are accepted, in-depth “So What?” conversations take place during which best practices among field staff may be highlighted, operational strategies that leverage the learning that has transpired are devised, resource allocation decisions may be made by DFCS leadership, and parties responsible for implementation identified.

B. Previous Reporting Period Interpretation and Measurement Issues

The following discussion highlights the interpretation and measurement issues that arose during the previous reporting periods that were accepted by the parties and also apply to period three.

Outcomes 1, 2, and 3 use the same “*By the end of the first reporting period...*” language used in Outcome 5, but the standard remains fixed at the period 1 level for all subsequent reporting periods. These outcomes, therefore, do not raise the same point-in-time vs. cumulative measurement issue raised by Outcome 5.

Section 12.A. of the Consent Decree requires that maltreatment in care investigations be conducted by trained child protective services staff.¹³¹ As indicated above, DFCS policy regards the commencement of an investigation to be the point at which an alleged victim child is seen by the investigator. For measurement purposes Outcome 1 was operationalized as the percentage of cases in which any alleged victim had face-to-face contact with a CPS investigator or police within 24 hours. Outcome 3 was operationalized as the percentage of alleged victims that had face-to-face contact with a CPS investigator within 24 hours.

Outcome 5 was operationally defined as the percentage of children in care during the reporting period that experience maltreatment in care during the reporting period. Performance was measured by a cumulative look across the entire reporting period, not just at one point in time during the reporting period. The interpretation and measurement issues considered are described below.

¹³¹ See p. 28 of the Consent Decree

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- The interpretation issue centers on the meaning attributed to the words “...*shall be the victim of substantiated maltreatment while in foster care.*” This could be interpreted to mean that any child who had *ever* experienced maltreatment while in foster care (even if it was years ago) should be counted in this percentage. Although this is perhaps the most obvious and literal interpretation of these words, such an interpretation would be unhelpful to the cause of improving Georgia’s child welfare system.

A central precept of the Consent Decree is that it will bring about improvements in Georgia’s child welfare system. Interpreting this measure in a way that places it beyond the influence of the State’s *current and future* efforts to improve would be incongruous with this precept.

- The measurement issue inherent in Outcome 5 derives from the words “*By the end of the [number] reporting period...*” Taken literally, these words seem to suggest that this is a point-in-time measure to be taken on the last day of the first reporting period. In other words, what percentage of the children in care on June 30, 2007 had experienced maltreatment while in care? In the child welfare field, such a point-in-time approach is a common method of obtaining a census of children in care. The use of the word “By” could be construed to grant the state the entire length of the reporting period to produce improvements in this outcome.

However, operationalizing this as a point-in-time measure might create perverse incentives (i.e., schedule children who had experienced maltreatment in care for discharge before the end of the month). Although it is not believed the State would actually use this approach, the Accountability Agents believe that when the Consent Decree language is less than definitive, it should be construed to avoid establishing incentives that are inconsistent with spirit of improving Georgia’s child welfare system.

C. Methodology for Verifying Caseload Data

The state information system is able to produce reports on individual case manager caseloads and the Accountability Agents used these reports as the starting point for assessing State progress in meeting the caseload requirement of the Consent Decree as reported on in Section VI. However, several steps were taken to assure the accuracy and completeness of these reports.

First, the Accountability Agents determined that there are several data sources, each with its potential for inaccuracies or incompleteness. The data sources include IDS as well as county personnel systems. Historically, IDS may have had incomplete caseload information for Fulton County because Fulton was using its own case management system referred to as “CDOT.” The Accountability Agents confirmed with Fulton County that they had discontinued using this system in June 2006.

Within IDS, data could be inaccurate or incomplete because:

- *Case assignments are not timely re-assigned to active staff.*

Case managers must have a unique, county generated “Case Worker ID” (CWID) to have a case assigned to him/or her in the information system. Cases remain assigned in the information system to case workers who are no longer employed by DFCS as long as cases are not reassigned to different case worker IDs. Counties are responsible for entering each case manager’s unique “ID” and deactivating the ID when the worker resigns, transfers, or is terminated. Counties are also responsible for promptly reassigning cases when a case manager vacancy occurs.

- *Worker type is not entered by counties*

Counties are also supposed to enter the worker type for each case manager, but omission of this information does not prevent case assignment or any other reporting. Thus, caseload reports may be incomplete because the worker type may be missing.

- *Worker leave status is not included*

County personnel systems track extended leave periods authorized by disability policies, Family Medical Leave Act, or some other circumstances. This information, however, is not linked to the state information system, making it challenging to obtain an accurate picture of the effective caseloads of other case managers who may be sharing the workload of their absent colleagues.

- *Worker certification status is not included*

Worker certification is tracked separately for different cohorts of staff by county training coordinators and the Education and Training Services section. These systems do not presently link to the State information system. Uncertified workers are not to be assigned any cases. Provisionally certified workers are to be assigned no more than “7 low risk” cases. The lack of this link complicates tracking the number of cases assigned to individuals who are in these categories.

- *Data entry lag time*

Data entry into IDS of case opening and closing actions may lag behind when workers and supervisors consider the cases open or closed and have submitted the appropriate data entry requirements. As noted earlier, discrepancies between the case records and IDS regarding removal dates indicated a range of 1 to 5 days for the majority of cases where there was a difference. However, there was always a removal date in IDS. Similar discrepancies affect discharge dates. This lag time, therefore, can have the effect of both deflating and inflating the actual case load size.

Given the identified potential sources of inaccurate and incomplete caseload reporting, the Accountability Agents worked closely with the counties and the State as the June 2007 report

was generated. After the second reporting period, the Accountability Agents received monthly caseload reports for January through May 2007 before sending the final June report. The Counties were asked to update the worker type and provide the resignation dates and leave dates for the designated workers.

Separately, the State and counties were asked to supply information about worker and supervisor certification status. The Accountability Agents used this information to compare with the workers and supervisors identified on the June 2007 caseload report. A reconciliation process was applied to identify discrepancies between the case manager lists and the counties were asked to provide additional information to resolve the discrepancies.

Finally, the Accountability Agents requested a separate data report from the State that identified the case managers with children who were in custody 18 months or more on June 30, 2007. This information was compared to the worker type associated with each case manager. As a result, the Accountability Agents identified regular caseloads that appeared to still have children assigned to them instead of being transferred to the caseloads of specialized case managers.

D. Methodology for Verifying State Data on Repeat Maltreatment and Maltreatment Subsequent to Diversion

Section 20 G of the Consent Decree requires DHR to provide the Accountability Agents data and information sufficient to enable the verification of data reported by the State on the number of children in DeKalb and Fulton counties during the reporting period (other than those in foster care) that experience repeat maltreatment or substantiated maltreatment within 11-365 days after being referred to DHR's diversion program. Due to the 11-365 day follow up period for the diversion statistics, this third period report is the first time diversion data could be reported. The DHR data on repeat maltreatment and substantiated maltreatment subsequent to diversion in DeKalb and Fulton Counties are presented in Section VII. Following is a discussion of the approach the Accountability Agents used.

The validity of the State statistics on repeat maltreatment and substantiated maltreatment subsequent to diversion rest on the accuracy of the data coding and data input associated with maltreatment investigations and diversion cases, and the validity and rigor of the file matching algorithm. These are considered separately below.

1. Data Coding and Input

Data fields that are quantitative or less complex (e.g., whether or not an allegation was substantiated) are less prone to coding errors and produce data with a higher degree of reliability. Data fields that are more complex, qualitative, or ambiguous are more error prone and demonstrate greater problems of reliability. Data on the results of maltreatment investigations and on whether or not a CPS report is "diverted" fall into the former category.

When a report of maltreatment is received, it is reviewed by CPS intake staff, logged into the County's tracking system, and if it meets the criteria to be investigated, an investigation is initiated. Pertinent data about the report and subsequent investigation, including whether or not the investigation substantiated the allegation, are entered on Form 453. A casework supervisor reviews the completed form 453 and when they are satisfied as to its quality, they sign off in it. The completed form is then input into IDS.

If the report does not meet the criteria for a CPS investigation and it manifests issues that are primarily economic in nature, it may be considered for diversion. Diversion cases are not opened as CPS investigations, but the family is usually connected with community-based resources that can help meet the family's economic or other needs with the intent of helping the family keep their children safely in their own home. For each diversion case, a form 590 (which captures demographic information about the family, a case opening date, and a service code that distinguishes diversion from CPS cases) is completed and entered into IDS. Casework supervisors review the completed form 590s for accuracy and completeness.

Based on interviews with county investigations staff and the experience of reviewing 100 percent of the investigations of maltreatment in care, the Accountability Agents have confidence that IDS captures virtually 100 percent of the investigations that are conducted. Every investigation of maltreatment in care that the file review indicated was undertaken was properly reflected in IDS. No instances in which substantiated cases were miscoded as unsubstantiated, or vice versa, were identified. For the third reporting period, no substantive disagreement between the file review and IDS on the status, alleged victims, or disposition of maltreatment in care reports was detected.

With respect to diversion cases, the Accountability Agents are satisfied that effective safeguards are in place to ensure that diversion cases are not miscoded as CPS investigations or screen-outs, and vice versa. Each county maintains an intake log that captures pertinent information about each report received, and its disposition as: accepted for CPS investigation, diverted, or screened-out. The Kenny A. file review staff begins each maltreatment in foster care file review by reviewing the county's intake log against the data contained in IDS to ensure that all CPS investigations and diversions are accurately reflected in IDS. Any miscoding issues are identified, brought to the attention of county management staff, and rectified. Changes in IDS to the dispositional coding of reports received can only be made by the designated data specialists for each county. If those specialists detect a pattern of common coding errors they conduct training for the county intake staff.

2. File Matching Algorithms

To produce the data on repeat maltreatment required by the Consent Decree, E&R used the following algorithm:

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- Data for DeKalb and Fulton counties were extracted from the state Protective Services Data System (PSDS), a component of IDS;
 - Children with substantiated maltreated were selected from two timeframes -- the reporting period and the preceding 12 months;
 - Foster children were deleted from the files;
 - Children from the reporting period were matched with children from the preceding 12 months; and
 - Resulting matches were deemed to be children that experienced repeat maltreatment.

Similarly, to produce the data on substantiated maltreatment subsequent to diversion, E&R used the following algorithm:

- Data for DeKalb and Fulton counties were extracted from the State Protective Services Data System (PSDS) and the diverted cases file provided monthly by Systems & Methods, Inc. (SMI);
- Cases diverted during the first reporting period (October 27, 2005 – June 30, 2006) were selected;
- Diverted cases from the first reporting period were matched with substantiated cases of maltreatment from the period November 7, 2005 – June 30, 2007 to reflect the specified 11-365 day follow-up period after the diversion referral; and,
- Resulting matches were reviewed to ensure they fell within the 11-365 day follow-up window of the diversion referral. Matches within this window of time were deemed to be maltreatment substantiations within 11 - 365 days of the diversion referral.

The record matching algorithms used by E&R are based on the way the federal Department of Health and Human Services (DHHS) historically recommended states conduct such matches. That is, a computer is programmed to match two case record listings on a set of consistently available demographic descriptors. In Georgia's case, the fields are first name, last name, date of birth, and gender. A significant limitation of this approach is that only exact matches are counted. In other words a child who had experienced repeat maltreatment or substantiated maltreatment subsequent to diversion might be missed by the match if the first referral listed him as John O'Connor, and the second listed him as John O'Conner; or if his birth date on either referral was transposed as the 13th instead of the 31st.

However, the DFCS Evaluation and Reporting Section continues to work with a computer services vendor to implement a unique child identifier to enable it to produce and send to the federal Department of Health and Human Services an NCANDS Child File. Such an identifier will enhance the accuracy of such computer matches as those required to calculate the incidence of repeat maltreatment. The new Georgia Shines system will also include a new unique child identifier. A beta test of Georgia's unique identifier by DHHS showed that it increased the "hit" rate on Georgia's statewide repeat maltreatment match by about 0.4 percentage points.¹³² As

¹³² Georgia Child and Family services Review Data Profile: August 24, 2006.

indicated in Section VII, the repeat maltreatment rates reported there for DeKalb and Fulton Counties likely understate the true incidence of repeat maltreatment by a similar margin of error.

The project to completely populate IDS with unique child identifiers covering fiscal years 2004 – 2007 is scheduled to be completed by March 2008. The Accountability Agents encourage the State to use this new capability to generate the repeat maltreatment data to be reported for future reporting periods. However, data on substantiated maltreatment subsequent to diversion will, until Georgia Shines is available, continue to be produced by the matching algorithm described above as these data are not included in the federal NCANDS data set and were therefore not part of the federal unique identifier project.

E: Methodology for Outcome 7 (Diligent Search) and Outcome 16 (Sibling Placement.

The performance measurement for Outcomes 7 and 16 relied on a separate case record review. This case record review followed the same basic process as previously described for the case record reviews that produced data for other portions of this third period report. A data collection instrument was designed, reviewed with the State and the Plaintiffs, and implemented with training and continuous quality review by team leaders and GSU staff. The review was conducted in April 2007. The data was compiled into a SPSS data base for analysis.

To ensure statistically valid results for the two populations of interest, the case record review used a random, stratified sample of 208 children who had entered the custody of DeKalb or Fulton counties sometime between July 1 and December 31, 2006. The first population of interest, related to Outcome 7, was the universe of children who entered care during the second reporting period. The second population of interest, related to Outcome 16, was the universe of children who had entered care on the same day with one or more siblings during the second reporting period. The first sample stratum consisted of 156 children drawn randomly from the 760 children entering care between July 1 and December 31, 2006. A number of these children were also in the universe of children entering the same day with one or more siblings. To assure a sufficient sample of the children entering care with siblings, another stratum of 52 children were randomly selected from the subpopulation of children entering foster care with one or more siblings on the same day. The sample was designed to achieve a 95 percent confidence level with a ± 7 percent margin of error. Over the course of the record review, four records were removed from the analysis because they did not meet the criteria for review. For example, one child did not enter care during the period, but, in fact, had a disrupted placement causing a new placement in an existing foster care episode. The Cronbach's Alpha Measure of inter-rater reliability for this review was .965887.

Appendix C
Foster Care Needs Assessment
prepared by Hornby Zeller Associates, Inc., August 2007

Executive Summary

Early in 2006, the Division of Family and Children Services (DFCS) within the Georgia Department of Human Resources (DHR), released a request for proposals for a foster care needs assessment in Fulton and DeKalb Counties. Conduct of a foster care needs assessment was one of the stipulations of the Consent Decree in the *Kenny A.* case, and the procurement was designed to ensure compliance with that component of the decree. The foster care needs assessment contract was awarded to Hornby Zeller Associates, Inc. (HZA) and began approximately one year after the initial request for proposals had been released.

NEEDS

Over 90 percent of the children in care are African American, nearly half are 12 years of age or older and roughly one-third are under the age of six. Children with the goal of adoption comprise less than 10 percent of the total, but children with siblings in care represent about one-third of the population in DeKalb and 40 percent in Fulton. For those under six years of age, children with siblings in care represent nearly half of the population. In broad stroke the largest needs are for homes for African American children, and specifically for African American teenagers and African American children with siblings under the age of six.

Between the end of 2006 and June of 2009, DFCS should anticipate a relatively small increase, less than three percent, in the Fulton County population and a somewhat larger one in the DeKalb County population, nearly 12 percent. Moreover, those changes will affect different portions of the counties in different ways, with some areas showing a declining a population, even while the total population in each county grows. The changes are, however, relatively gradual and do not reflect any major shift in the overall composition of the population.

RESOURCES

Over 40 percent of the homes identified as serving children from Fulton or DeKalb Counties were located *beyond the borders* of either county. This represents a serious need for restructuring of the system.

The first thing to note about the available foster home resources is that DeKalb County has nearly twice as many available foster homes as Fulton County, although it has only about half the foster care population. In fact, DeKalb has more resources than Fulton for every demographic category.

A second important point is that the group for whom the smallest number of homes is available is also the group representing the largest proportion of children, i.e., those 12 and older. Within DeKalb County the smallest age grouping, children six to 11, has the largest number of available beds, while in Fulton the largest number of beds are available for children under six.

In terms of the ability and willingness of foster homes to handle children's special needs, in one sense DeKalb is again more richly resourced than Fulton County. Although DeKalb has nearly double the number of foster home beds as Fulton, it has roughly equal numbers of homes that do not handle any special needs. On the other hand, the only special needs category in which DeKalb has more available beds than does Fulton is developmental needs – with the exception of developmental needs, 60 percent of homes in DeKalb County are unavailable to children with any given special need, compared to roughly 30 to 35 percent of homes in Fulton County. Children with physical, developmental or emotional/behavioral needs are more likely to find an appropriate foster home in Fulton County.

Not all children can or should be cared for in foster homes. Some require more structured settings with professional staff who can provide closer supervision than generally occurs in home-like settings. Thus, a second component of the resource analysis involved a survey of child-caring institutions (CCIs) serving children from Fulton and DeKalb Counties. Like the foster care case reviews, CCIs were surveyed to determine their total capacity, as well as the types of populations they serve by age, race, ethnicity and special needs.

The vast majority of the CCI beds available for children from Fulton and DeKalb are for older youth. Developmental needs are those most commonly served by CCIs, with 62 percent of all CCI beds available to children with developmental needs, while beds are least frequently available for children with emotional/behavioral needs – only 25 percent of the beds are available to children with those needs.

One significant finding was the disparity between the types of needs served by CCIs in each county. Within DeKalb County, only 28 percent of the 194 CCI beds are available to children with a physical disability, while in Fulton County, 48 percent of the 319 CCI beds are available to physically disabled children. Equally disproportionate ratios are evidenced for children with emotional/behavioral disabilities– while 41 percent of beds in DeKalb County are available to children with emotional/behavioral disabilities, only 14 percent of beds in Fulton County are available to children with such needs.

RESOURCE GAPS

There is a relatively serious problem with foster home resources in Fulton County, because there is less than one bed per child in foster care. In contrast there are 2.4 beds per child in DeKalb. This latter figure should not be taken as a standard and may well not be sufficient to provide every child an opportunity at an appropriate placement setting, but it stands in sharp contrast to the situation in Fulton.

Nor is the situation in Fulton helped substantially by available beds in CCIs. Within the county, there are one-third as many CCI beds as there are foster home beds, not enough to ensure a bed for every child in care, even if those beds could meet all the needs the children present.

The real issue, however, lies not so much with the total number of beds but with disparities in available resources among sub-groups within the population. For most sub-groups there are far more beds nominally available, even if currently occupied by someone from another sub-group, than are needed to meet the children's needs. This is not the case, however, for African American children, for older youth and for siblings needing placement together.

The picture is much better in relation to special needs children in foster care may present. Comparing the number of children with each type of need with the resources available to meet those needs, there are very few categories where resources do not exceed need by some

margin. However, in both counties, children six and older with a combination of emotional/behavioral and educational needs are not likely to be served appropriately within the county. In particular, DeKalb County youth 12 and older who show emotional/behavioral needs face a dearth of placement resources. While broadly speaking, resource providers in Fulton County are more willing than those in DeKalb County to accept children with special needs, the lack of overall systemic capacity in Fulton County leads to large gaps when it comes to serving children with special needs within the county.

RECOMMENDATIONS

RECOMMENDATION 1: DFCS should begin a major effort to expand the number of foster homes in Fulton County, until there exists for each child at least two appropriate potential beds.

There is nothing magical about a 2:1 ratio, but it serves as an ambitious but realistic goal for Fulton County and would mean a major improvement in the chances that every child would have an opportunity for an appropriate placement. At present Fulton County would have to recruit 1,500 additional beds to achieve this overall standard. Assuming 3 beds per home, that would be 500 homes. DeKalb is already at the standard.

RECOMMENDATION 2: DFCS should increase the number of homes available for adolescents, especially adolescents with emotional/behavioral issues.

At present DFCS would have to recruit 941 new beds in Fulton and 324 new beds in DeKalb to meet the need for adolescent placements assuming the 2:1 ratio. The majority of the new homes which are recruited under the first recommendation should be targeted at the disturbed adolescent population.

RECOMMENDATION 3: DFCS needs to find a strategy to increase the number of beds available for siblings who need to be placed together.

This is perhaps the most difficult area to address because it requires finding new homes that can handle not only children with special needs but also multiple children from the same family, all of whom may have special needs, possibly of varying type and severity. The size of the

recruitment effort that would be needed cannot easily be estimated because some of the homes with empty beds which were assumed here to be available for siblings are probably not actually available for siblings. What can be said with some certainty is that a successful effort to address this issue will be a large undertaking.

RECOMMENDATION 4: Development efforts should be focused on specific neighborhoods, specifically those in which there is currently a disparity between needs and resources.

The disparity of need is currently so great that in Fulton County one of the areas¹³³ with the largest number of foster children shows only four foster home beds available within the entire area. Many foster care recruitment efforts are done through broad media campaigns, but that is unlikely to generate homes in the specific areas where the homes are most needed. A different strategy or set of strategies is needed. Programs which target particular churches, schools and organizations in the selected communities are also needed. When an identified child requires a home, child specific recruitment in the given community may help as well.

RECOMMENDATION 5: Aside from expanding resources to meet the current need, DFCS should attempt to reduce the current level of need by expanding and enhancing its placement prevention efforts.

Georgia uses placement more frequently than do most of its neighboring states. Given that it currently does not have sufficient resources to meet the needs of all those children adequately, it is likely to be beneficial to many of those children to remain with their families. This will require, however, the services necessary to ensure the safety of those children, as well as the services needed to address any of the special needs they may exhibit.

RECOMMENDATION 6: DFCS should implement an automated placement matching system which would both ensure that each child is provided the most appropriate available placement and that also provides a measure of the progress the agency is making in making appropriate placements for all children.

¹³³ The “Fulton Central” cluster involves zip codes 30303, 30308 and 30313.

As part of its work on this project, HZA is delivering to the agency a tool which will provide a quantified score for each potential placement for each child. In addition, its results can be aggregated to determine whether the placements being made at the present time are more appropriate than the placements made last month or six months ago or even a year ago. No development efforts will be useful unless they impact the individual children needing placement. Whether DFCS uses this tool or something equivalent, it needs to connect its resource development efforts to individual placements to ensure that the requirements of *Kenny A.* are met.