



**State of Oregon  
Department of Human Services  
Children, Adults and Families**

**FY 2006 Annual Progress and Service Report  
10/1/05 – 9/30/06**

**Ramona L. Foley, Asst. Director  
Department of Human Services  
500 Summer Street NE, E69  
Salem, OR 97301-1067**

**Submitted 6/30/06**

June 30, 2006

Mr. Stephen Henigson, Regional Administrator  
2201 6<sup>th</sup> Avenue, Room 610-M/S RX-70  
Seattle, Washington 98121

Dear Mr. Henigson,

Enclosed for your review and approval is the Annual Progress and Service Report for FFY 2006. This plan includes an overview of the progress and accomplishments made towards the Child and Family Services Plan for FFY 2005-2009, including the Child Abuse and Treatment Act Plan (CAPTA) and the Chafee Foster Care Independence Program Plan (CFCIP).

Also included is the annual budget request for FFY 2007 for Title IV-B, Subparts 1 and 2, the Chafee Foster Care Independence Program funds and the Child Abuse Prevention and Treatment Act program funds.

Please contact Randy Blackburn of Children, Adults and Families at (503) 945-5972 if there are any questions.

Sincerely,

Ramona L. Foley, MSW  
Assistant Director  
Department of Human Services  
Children, Adults and Families

CC: Candace Kato-Nogaki, Region X

## **CERTIFICATION STATEMENT**

I hereby approve and submit the Title IV-B Child and Family Services Plan Annual Progress and Service Report for FFY 2006, and the budget request for federal funding for FFY 2007.

The **Oregon Department of Human Services** has the authority to prepare the Annual Progress and Services Report, is the only State agency responsible for administering the Title IV-B State Plan, and is responsible for administering the Child and Family Services program within the State.

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**Ramona L. Foley, MSW**  
**Assistant Director**  
**Department of Human Services**

June 30, 2006



**State of Oregon  
Department of Human Services  
Children, Adults and Families**

**CHILD AND FAMILY  
SERVICES PLAN (CFSP)**

**Annual Progress and Service Report (APSR)**

**FFY 2006**

**Contact: Randy Blackburn, Manager  
DHS CAF Federal Planning and Reporting  
500 Summer Street NE, E69  
Salem, OR 97301-1067  
503-945-5972**

**CFS-101, Part I: Annual Budget Request For Title IV-B, Subpart 1 & 2 Funds, CAPTA, Chafee Foster Care Independence Program (CFCIP) and Education and Training Vouchers (ETV): Fiscal Year 2007, October 1, 2006 through September 30, 2007**

1. State or ITO: State of Oregon	2. EIN: 1-93-6001958-A3
3. Address: Department of Human Services 500 Summer St. NE, E69 Salem, Oregon 97301	4. Submission:  <input checked="" type="checkbox"/> New <input type="checkbox"/> Revision
5. Estimated Federal title IV-B, Subpart 1 Funds.	\$ 3,462,298
6. Total Estimated Federal title IV-B, Subpart 2 Funds. (This amount should equal the sum of lines a – f.)	\$ 5,793,575
a) Total Family Preservation Services.	\$ 1,186,283
b) Total Family Support Services.	\$ 1,654,369
c) Total Time-Limited Family Reunification Services.	\$ 1,213,317
d) Total Adoption Promotion and Support Services.	\$ 1,167,366
e) Total for Other Service Related Activities (e.g. planning).	\$
f) Total Administration (not to exceed 10% of estimated allotment).	\$ 572,240
7. Re-allotment of Title IV-B, Subpart 2 funds for State and Indian Tribal Organizations	
a) Indicate the amount of the State's/Tribe's allotment that will not be required to carry out the Promoting Safe and Stable Families program. \$ <u>-0-</u>	
b) If additional funds become available to States and ITOs, specify the amount of additional funds the State or Tribes is requesting. \$ <u>600,000</u>	
8. Child Abuse Prevention and Treatment Act (CAPTA) State Grant (no State match required)	
Estimated Amount \$ <u>349,087</u> , plus additional allocation, as available.	
9. Estimated Chafee Foster Care Independence Program (CFCIP) funds.	\$ 2,597,503
10. Estimated Education and Training Voucher (ETV) funds.	\$ 873,755
11. Re-allotment of CFCIP and ETV Program Funds:	
a) Indicate the amount of the State's allotment that will not be required to carry out CFCIP \$ <u>- 0 -</u> .	
b) Indicate the amount of the State's allotment that will not be required to carry out ETV \$ <u>- 0 -</u> .	
c) If additional funds become available to States, specify the amount of additional funds the State is requesting for CFCIP \$ <u>600,000</u> for ETV program \$ <u>600,000</u> .	
12. Certification by State Agency and/or Indian Tribal Organization. The State agency or Indian Tribe submits the above estimates and request for funds under title IV-B, subpart 1 and/or 2, of the Social Security Act, CAPTA State Grant, CFCIP and ETV programs, and agrees that expenditures will be made in accordance with the Child and Family Services Plan, which has been jointly developed with, and approved by, the ACF Regional Office, for the Fiscal Year ending September 30.	
Signature and Title of State/Tribal Agency Official	Signature and Title of Regional Office Official
Ramona Foley, DHS Asst. Dir., CAF	
Date 6/30/06	Date

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

State or IT OREGON

For FFY OCTOBER, 2006 TO SEPTEMBER 30, 2007

SERVICES/ACTIVITIES	TITLE IV-B		(c) CAPTA*	(d) CFCIP* including ETV	(e) TITLE IV-E	(f) TITLE XX (SSBG)	(g) TITLE IV-A (TANF)	(h) Title XIX (Medicaid)	(i) Other Fed Prog	(j) State Local Donated Funds	(k) NUMBER TO BE SERVED	(l) POP. TO BE SERVED	(m) GEOG. AREA TO BE SERVED
	(a) I-CWS	(b) II-PSSF									[ ] Families	[X] Individuals	
1) PREVENTION & SUPPORT SERVICES (FAMILY SUPPORT)		1,164				7,464	22,685	4,786	1,302	2,435	55,114	Reports of abuse/neglect	Statewide/Reservation
2) PROTECTIVE SERVICES	2179		349			5,663	15,234	19,258	1,302	14,637			
3) CRISIS INTERVENTION (FAMILY PRESERVATION)	654	1,654				4,842	3,435	5,185					
(A) PREPLACEMENT PREVENTION						1,297		1,329			16,027	All children in foster care	Statewide/Reservation
(B) REUNIFICATION SERVICES						1,423		4,813					
4) TIME-LIMITED FAMILY REUNIFICATION SERVICES		1,191											
5.) ADOPTION PROMOTION AND SUPPORT SERVICES		1,145						3,931			2800	All egligible children	Statewide/Reservation
6) FOSTER CARE MAINTENANCE: (A) FOSTER FAMILY & RELATIVE FOSTER CARE					12,728		15,714	9,124		38,410			
(B) GROUP/INST CARE					390		1,171	8,442		19,950	737		Statewide/Reservation
7) ADOPTION SUBSIDY PMTS.					16189					18,652	8,748		
8) INDEPENDENT LIVING SERVICES				2,527									
9) ADMIN & MGMT		572			19585					18,335			
10) STAFF TRAINING					1813								
11) FOSTER PARENT RECRUITMENT & TRAINING	629				245								
12) ADOPTIVE PARENT RECRUITMENT & TRAINING					245								
13) CHILD CARE RELATED TO EMPLOYMENT/TRAINING													
14) TOTAL	3,462	5,728	349	2,527	51,195	20,692	58,422	56,847	2,604	150,323			

\* States Only, Indian Tribes are not required to include information on these programs

**CFS-101, Part I: Annual Budget Request For Title IV-B, Subpart 1 & 2 Funds, CAPTA, Chafee Foster Care Independence Program (CFCIP) and Education and Training Vouchers (ETV):  
Fiscal Year 2006, October 1, 2005 through September 30, 2006**

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Estimated Amount \$ <u>349,087</u> , plus additional allocation, as available.	
9. Estimated Chafee Foster Care Independence Program (CFCIP) funds.	\$ 2,595,316
10. Estimated Education and Training Voucher (ETV) funds.	\$ 886,526
11. Re-allotment of CFCIP and ETV Program Funds:	
a) Indicate the amount of the State's allotment that will not be required to carry out CFCIP \$ <u>- 0 -</u> .	
b) Indicate the amount of the State's allotment that will not be required to carry out ETV \$ <u>- 0 -</u> .	
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Signature and Title of State/Tribal Agency Official	Signature and Title of Regional Office Official
Ramona Foley, DHS Asst. Dir., CAF	
Date 6/30/06	Date

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\* States Only, Indian Tribes are not required to include information on these programs

## ***ACKNOWLEDGEMENTS***

The following persons contributed to the development of data and program content for the Title IV-B Annual Progress and Service Report for FFY 2006.

### **Children, Adults and Families (CAF)**

Ramona L. Foley, Assistant Director, Children, Adults and Families  
Angela Long, Administrator, CAF Program Performance and Reporting  
Randy Blackburn, Manager, CAF Federal Compliance Unit  
Michael Serice, CAF Deputy Assistant Director for Program and Policy  
Karyn Schimmels, CAF Training Manager  
Rosemary Iavenditti, CAF Independent Living Program Coordinator  
Lois Day, CAF Adoption Program Manager  
Kevin George, CAF Foster Care Manager  
Mary McNevins, CAF ICWA Coordinator  
Janvier Slick, Family Based Services Program Manager  
Maria Duryea, CAF Child Welfare Research, Reporting and Quality Assurance Manager

### **Oregon Commission on Children and Families**

Geralyn Brennan

### **Region X, DHHS**

John Henderson, Child Welfare Specialist

### **Members of the Child Welfare Advisory Committee**

Questions regarding this report should be directed to Randy Blackburn,  
(503) 945-5972.

**State of Oregon  
Department of Human Services  
Children, Adults and Families**

**CHILD AND FAMILY  
SERVICES PLAN (CFSP)**

**FFY 2006 Annual Progress  
and Service Report (APSR)**

# Title IV-B Annual Progress and Services Report FFY 2005

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# Title IV-B Annual Progress and Services Report FFY 2005 October 1, 2004 through September 30, 2005

## 1. Annual Report for Title IV-B Subparts 1 & 2

### a) Specific Accomplishments and Progress

*Report on the specific accomplishments and progress achieved in the past fiscal year toward meeting each goal and objective, including approved outcomes for children and families, and a more comprehensive, coordinated, effective child and family services continuum. Explain planned activities, new strategies for improvement, and the method(s) to measure progress in the upcoming fiscal year. Explain any revisions to the goals and objectives. Update the goals and objectives to incorporate areas needing improvement that were identified in a CFSR, Title IV-E or other PIP.*

Oregon's initial on-site Child and Family Services Review (CFSR) was held in 2001. The federal reviewers found 14 (out of a possible 33) areas requiring improvement. Oregon designed a program improvement plan (PIP) to implement program changes. Each Service Delivery Area (SDA) contributed to the PIP by addressing identified statewide issues such as implementing a new Guided Assessment Process (GAP).

Oregon's PIP goals included:

CFSR INDICATOR	SUBJECT	DATE ACHIEVED
1	Timeliness of Investigations	July 2003
4	Risk of Harm to Child	July 2004
5	Foster Care Re-entries	December 2002
7	Permanency Goal for Child	October 2003
8	Independent Living Services	October 2002
9	Adoption	October 2003
10	Independent Living Services	August 2003
10	Permanency Goal OPPLA	May 2003
17	Needs & Services of Child, Parents, & Foster Parents	May 2004
19	Worker Visits with Child	March 2004

<b>CFSR INDICATOR</b>	<b>SUBJECT</b>	<b>DATE ACHIEVED</b>
20	Worker Visits with Parents	July 2004
21	Educational Needs of Child	December 2002
23	Mental Health of Child	May 2004
Sys. 2 Items 25/27	Joint Case Planning and Perm. Hearings	July 2004
Sys. 4 Items 32-34	Staff Development/Training to support the CFSP, On-Going Training, Training for Foster Parents	October 2003

### **Child & Family Service Review - Program Improvement Plan**

Following Oregon's CFSR in 2001, and subsequent Program Improvement Plan development, we began quarterly reports outlining and addressing our progress. In addition, necessary policy changes were begun and the ORBIT system was developed to produce reports to monitor progress. All of Oregon's PIP items are completed.

#### **b) Planned Activities, Strategies for Improvement, Methods of Measurement**

*Planned activities, new strategies for improvement, and methods to measure progress in the upcoming year.*

Oregon will be one of the first few states reviewed in the next round of Child and Family Services Reviews. In preparation for the next Child and Family Services Review, we hope to build off of that earlier process by moving to quarterly 'snapshots' of Statewide performance on the CFSR measures which may then be used to help local branches focus on their role in helping the state meet its performance objectives.

**c) Revisions Made Due to Reviews by ACF, Other Program Improvement Plans or Technical Assistance**

*Any revisions in the statement of goals and objectives, or to the training plan (title IV-B and title IV-E), to reflect changed circumstances.*

**Technical Assistance from the National Resource Center (NRC) for Child Protective Services**

Oregon's Governor called for an independent review in December 2004, following two high-profile cases that initiated Critical Incident Response Teams (CIRT) within eight days of each other. The review was conducted by Wayne Holder and Therese Roe Lund of the National Resource Center for Child Protective Services (NRCCPS). The resulting report identified seven components of Oregon's safety system as comparable to and consistent with practices at the national level. The components were: 1) policy; 2) procedure; 3) staff development; 4) supervision; 5) information systems; 6) program management; 7) quality assurance.

Former DHS Director Gary Weeks appointed Ramona Foley, the Assistant Director for Children, Adults, and Families, to lead the implementation of the recommendations identified in the report and to explore how to expand involvement in strengthening child welfare services across the entire system, involving our partner agencies and the courts.

**Progress**

DHS formed a steering committee that meets on a twice-weekly basis to address the 22 recommendations of the NRCCPS report. Recommendations were sorted into seven categories:

- Legislative Changes
- Budget
- Procedure Manual
- Training
- Quality Assurance
- Human Resource Issues of Workload
- Partners

A work plan was developed for each of these areas and we are moving forward to implement the NRCCPS recommendations.

The following is the latest report on Oregon's progress towards each of the NRCCPS recommendations.

***National Resource Center for Child Protective Services  
Update on Recommendations  
May 2006***

**Recommendations and Status:**

1. **ADOPT A SAFETY FRAMEWORK** - DHS should build upon the Guided Assessment Process to develop a unified model of practice that emphasizes safety throughout the life of a child welfare case.
  - NRCCPS recommends the Safety Intervention Model – DHS is implementing most of the Safety Intervention Model (some resource limits). The Safety Intervention Model builds on the existing Guided Assessment Process.
  
2. **PROCEDURE MANUAL** - DHS should develop a procedures manual with revised policy that is clear, precise, and provides step-by-step direction.
  - The manual is being written.
  - The first chapters will be completed by June 2006; subsequent chapters are targeted for completion this summer/early fall 2006.
  
3. **TRAINING** - Statewide training based on the revised policy should be required for all child welfare staff and should replace the existing core training for new child welfare staff. Emphasis given to developing supervisors as safety intervention experts should receive priority.
  - PSU, in collaboration with DHS, is revising CORE curriculum for caseworkers.
  - PSU is developing a CORE training for all supervisors.
  - National experts coming to Salem to train program staff (May 2006).

- DHS will begin delivering statewide training in fall 2006.
4. **LEGAL REPRESENTATION** - DHS should seek legal representation and paralegal support to remove non-casework tasks from the child welfare worker. Additionally, other non-casework tasks currently assigned to child welfare workers should be identified and removed.
    - DHS developed policy option package during 2003-05 legislative session.
    - Developed criteria to prioritize representation for caseworkers.
    - Special appropriation approved by legislature in October, 2005.
    - 5 additional Assistant Attorneys hired at Department of Justice.
    - In process of hiring 20 paralegal staff for DHS.
  5. **SACWIS** - The existing child welfare information system should be replaced with one that is SACWIS compliant and that provides sufficient guidance and support for safety intervention.
    - In process of replacing current SACWIS with new, compliant SACWIS.
  6. **LEGISLATION** - DHS should reconsider worker authority to and responsibility to make emergency removals of children and the practice of DHS receiving legal custody of children without removal from the home.
    - DHS child welfare has proposed four legislative concepts related to the NRCCPS recommendations.
    - DHS currently working with key stakeholders on the language for these concepts.
  7. **LEGISLATION** - The state should reconsider the statutory term “threat of harm.” The term lacks precision and can be applied too broadly.
    - See above
  8. **FAMILY MEETINGS** - The state should reconsider the requirement of Family Decision Meetings (FDMs). The requirement must be consistent with the primary concern for child safety.
    - DHS is addressing this in the procedure manual

9. **WORKLOAD** - The state must address the critical child welfare system workload. Caseload sizes and supervisor-to-caseworker ratios exceed even outdated national standards and significantly compromise the safety response capacity.

- DHS has asked the National Resource Center for Organizational Improvement to assess the current structure, system capacity issues and staffing standards (first site visit, May 2006).

### Policy Changes

A number of DHS policies were revised as part of Oregon's CFSR and subsequent Program Improvement Plan.

#### CPS Policies:

Policy	Title	Revision Date
I-AB.1	Introduction to CPS Rules	2/1/05
I-AB.2	Screening	2/1/05
I-AB.3	Cross Reporting	2/1/05
I-AB.4	CPS Assessment	11/1/04
I-AB.5	Child Safety Assessment & Child Safety Planning	2/1/05
I-AB.6	Working with Other Entities	7/1/03
I-AB.7	Interviewing	2/1/05
I-AB.8	Photographing and Documenting	7/1/03
I-AB.9	Medical Examinations	7/1/03
I-AB.10	CPS Assessment Dispositions	4/1/05
I-AB.11	Access to LEADS in local Child Welfare Offices	1/28/05

#### Permanency Policies:

Policy	Title	Revision Date
I-E.3	Placement Expectations	3/1/04
I-E.3.6	Concurrent Planning, Achieving Permanency	1/1/04
I-F.2	Determining the Appropriateness of Adoption	1/1/04
I-F.3	Initiating Adoption Planning	10/1/03
I-F.3.2.1	Termination of Parental Rights	1/1/02
I-G.1.1	Current Caretaker for Adoption Planning	1/1/04

<b>Policy</b>	<b>Title</b>	<b>Revision Date</b>
I-G.1.6	Openness and Post Adoption Communication	10/3/03
I-G.1.10	Supervision of Adoption Placement	10/1/03

**Well-Being Policies:**

<b>Policy</b>	<b>Title</b>	<b>Revision Date</b>
I-C.4.1	Medical Services Provided Through the Oregon Health Plan (includes Mental Health, Medical Health and Dental Services)	1/7/03

**Systemic Policies:**

<b>Policy</b>	<b>Title</b>	<b>Revision Date</b>
I-I.2	Narrative Recording	6/22/04
I-B.3.2.1	Substitute Care Placement Reviews	5/22/03
III-E.5.1.1	Staff Training Requirements	1/6/03

**Title IV-E Case Review – September 2005**

An on-site Title IV-E Foster Care Eligibility Review was conducted the week of September 19, 2005. The review team found that Oregon’s Title IV-E Foster Care program was in substantial compliance, with no error cases identified. A number of strengths were noted by the review team, including:

- “Contrary to the welfare to remain in the home” was consistently addressed in a finding in the first removal order. “Reasonable efforts to prevent placement” was almost always addressed as a finding in the first removal order; in a few cases the finding was made in a subsequent order within the same month.
- “Reasonable efforts to finalize the permanent plan” judicial determinations were made at least every 12 months in sampled cases.
- Some cases contained very good individualized case specific judicial determinations.
- Court Improvement Project has worked to improve the timeliness and quality of judicial determinations by developing model court orders and providing judicial training with noted improvements since the previous Title IV-E review.

- Clear forms and good documentation of Aid to Families with Dependent Children (AFDC) income, resources and deprivation were in the eligibility files.
- Re-determinations of eligibility were completed on time.
- Documentation of licensing and criminal check requirements for children placed out-of-state was obtained from receiving states utilizing new procedures developed since the last Title IV-E review.
- Foster homes were continually certified with no lapse in certification at annual renewal.
- Many children are being placed with relatives certified to provide for their care.
- Oregon has dedicated knowledgeable eligibility specialists who make accurate eligibility determinations and work to ensure all eligible children receive Title IV-E.

Some areas of concern were also identified by the review team. Our plan of action is outlined below each concern.

#### Concerns Related to Court Orders:

- “Reasonable efforts to prevent placement” and “reasonable efforts to finalize the permanency plan determinations” were sometimes not as distinct as they should be.
- “Reasonable efforts to finalize the permanent plan” findings were sometimes not addressed at the 12 month permanency hearing resulting in CAF specialists determining such children temporarily ineligible and requiring additional efforts to get the court to issue an order addressing this finding.
- Nunc pro tunc orders continued to be used creating confusion about when Title IV-E can be claimed and requiring staff time to obtain the transcripts.

#### Response:

Oregon’s courts are provided with on-going education, including information about the various types of judicial findings required for the Title IV-E program. Training is being provided by the Juvenile Court Improvement Project (JCIP).

Revisions have been made to the model court orders provided to courts by the JCIP, and we expect to see continuing improvements.

In addition, the Children, Adults and Families Federal Compliance Unit continues to work with the Portland State University Partnership in providing training to new DHS Child Welfare caseworkers on Title IV-E requirements, including judicial findings, as well as continuing our work with existing staff to clarify Title IV-E requirements.

#### Concerns Regarding Criminal Records Checks:

- Criminal records check documentation for foster homes lacked clarity with some files missing forms, missing dates, missing signatures or lacking clear documentation of decisions made.
- Certification files need clearer documentation of decision-making and need to clearly demonstrate that all requirements including criminal records checks are met prior to issuing a certification license.

#### Response:

The process for conducting and documenting criminal background checks for Foster and Adoptive parents will be changed to conform to the rules and procedures the Department currently uses to conduct background checks on the majority of other individuals who are subject to a criminal check by the Department, including Department employees, contractor employees, Department-licensed agency employees and individuals licensed by the Department. Applying this widely used and proven process to foster and adoptive parents will improve the clarity and consistency of criminal check documentation.

#### Concerns Regarding Licensing:

- The monitoring form for facilities which includes the employee criminal records clearance is not a numbered form and does not have written instructions.
- Child placing agencies are not required to certify homes following State standards and procedures.

#### Response:

A meeting was held with the licensing unit to discuss the review team's concerns.

Regarding the facility monitoring form: Plans are to improve the form and have an official form number assigned.

Regarding homes certified by child placing agencies: In most instances, homes certified by child placing agencies exceed Oregon's Safety Standards. Oregon's Safety Standards document contains processes and procedures in addition to safety standards, and the concern is many of those processes and procedures are not applicable to homes certified by child placing agencies. Oregon's Safety Standards are written by the foster care unit, so the licensing unit will work with them directly to address this issue.

Concern:

- CAF information system and case records do not adequately capture the physical location or moves of children placed in child placing agency homes, potentially impacting Oregon's compliance with the requirements of Section 422 (b)(10)(B)(i) and the accuracy of Oregon performance on the placement stability national standard.

Response:

The licensing unit confirmed that child placing agencies are currently required to notify the assigned DHS caseworker when a child moves from one home to another within their program.

On January 3, 2006, a memo was distributed to all DHS Child Welfare field offices reminding them of the requirement to enter the physical location of any child when the provider address shown does not reflect their physical location. This requirement applies to all children. Instructions for documenting the child's physical location in our legacy information system were given in the memo. This address field was not included in the design of our current information system, but will be included in the new SACWIS system, when implemented.

## **Oregon's Plan for Title IV-E Foster Care Program Improvement:**

Recognizing that there is always room for improvement, Oregon has taken the following actions to improve in the areas listed below:

### Improved Documentation of Certain Aspects of the Eligibility Determination

A memo was sent to all Title IV-E Specialists on January 3, 2006, outlining the following new procedures to be implemented immediately:

- Documentation of Deprivation:

When narrating the basis of deprivation at the time of removal or review, include the source of your information. For example, when narrating that the child was removed from a single mother, state "per the CF 147A dated 2/15/05, the child was removed from a single mother"; or, when narrating the child was removed from a two parent unemployed household, state "based on the information provided on the CF 178 form signed 2/15/05, the child was removed from a two parent unemployed household".

- Documentation of Income:

If the child is occasionally receiving small, irregular amounts of child support or other unearned income, be sure to mention that income in your review narrative. For example, over the last 12 months, this child received varying amounts of child support, averaging \$7.00 per month. The child's cost of care is currently \$393 per month. At no time during this 12 month period did the child's income exceed the cost of care.

## **d) Services to be Provided in the Upcoming Year**

*Describe the services to be provided in FY 2007, highlighting any changes or additions in services or program design. For each service, report the population(s) to be served, the geographic areas where the services will be available, and the estimated number of individuals and/or families to be served. Indicate if there are no planned changes to the program.*

### **ADOPTION PROMOTION AND SUPPORT SERVICES**

#### **Oregon Post Adoption Resource Center (ORPARC)**

As cited in prior reports, Oregon has developed and funded a post adoption resource center that provides professional support services to the Oregon adoptive families of children from the public child welfare system. ORPARC has been in place since 1999. The initial one-year contract was awarded to Northwest Resource Associates of Seattle, which also operates the Northwest Adoption Exchange which Oregon uses to help recruit adoptive families. The entire amount of the portion of Oregon's Title IV-B subpart 2 funds earmarked for adoption promotion and support activities (\$486,000/year) was dedicated to the resulting Oregon Post Adoption Resource Center, which officially began serving adoptive families on October 1, 1999, after a six month ramp-up period. At the conclusion of a successful first year, Northwest Resource Associates was subsequently awarded a four year contract extension to operate ORPARC at the original level of funding.

The original objectives of this program are as follows:

- A. To enhance the stability and functioning of adoptive families and their adopted children;
- B. To reduce incidents of crisis and unnecessary out of home placements of children adopted from the public child welfare system;
- C. To provide a support network, which is responsive to the varying needs of families in an individualized way that is consistent with Strengths/Needs Based System of Care values.

From October 1, 1999 through September 30, 2002, the primary activities of ORPARC were as follows:

- A. Information and referral services to adoptive families, adopted child and adoption professional on a statewide toll-free telephone number and on a walk-in basis at their offices in Portland as well as through an Internet web site and e-mail address;
- B. In-depth follow-up consultation services with adoptive families needing assistance beyond Information and Referral to avert or effectively respond to crises;
- C. Trainings offered statewide and free of charge to adoptive families and adoption professionals, on important adoption-related topics.
- D. A library with both materials (books, videos, audio tapes) to lend and non-return packets on specific “hot” adoption topics;
- E. Assistance to adoptive families in establishing or connecting to adoption support groups.

A sixth activity – coordination of the partnership between DHS and the Portland State University’s Graduate School of Social Work and Graduate School of Education for the Post-Graduate Certificate Program in Therapy with Adoptive Families – was added in late 2002 and is described elsewhere in this report.

ORPARC’s services are closely coordinated with DHS’ in-house post adoption services, which consist primarily of Adoption Assistance and assistance to families in crisis (i.e. child protection issues and assistance with temporary placement into residential treatment facilities, when indicated, for adopted children; these services are available to adopted families on the same basis that they are available to all Oregonians, and do not take into consideration whether the child was adopted from the public child welfare system or another source, including internationally). Likewise, the ORPARC services are coordinated with those offered by the State’s Foster/Adopt Parent Trainers who were formerly DHS employees but are now part of the DHS Child Welfare Partnership with Portland State University. Finally, ORPARC’s activities and services are coordinated with those offered by Northwest Adoptive Family Association (NAFA), which is parent-operated.

In the spring of 2004, as the fifth and final year of this contract with Northwest Resource Associates was coming to a close, DHS issued a new RFP for post-adoption services. In addition to requesting proposals for the provision of the six

services described above (including coordination of the post-graduate certificate program), the following program enhancements were required by the RFP:

- A. Expansion of service eligibility to include the pre-adoptive Oregon families of children in DHS custody (service eligibility in the original contract began at adoption finalization);
- B. Expansion of service eligibility to include Oregon families who have established guardianships or are in the process of establishing guardianships of children in DHS custody through Oregon's Title IV-E Waiver Subsidized Guardianship Program.
- C. Expansion of service eligibility to include the adoptive families of children from Oregon DHS who reside in an adjoining state and are within 25 miles of the Oregon border.

This contract was again awarded to Northwest Resource Associates. ORPARC will continue to offer the services under the current contract which extends to 2009. It is estimated the expansion of services to the above listed three cohorts will increase the number of eligible families to 4200 and the number of eligible children to 6300 by the end of the contract in 2009. In addition, the contractor will continue to work with approximately 40 private adoption agencies, which are licensed by DHS to assure post-adoption services are appropriately available to them.

At best, the targeted outcomes for the services provided to adoptive, pre-adoptive and guardian and pre-guardian families are more qualitative than quantitative. In an effort to capture the effectiveness of these services, the following outcome measures are included in the contract:

- A. The number of requests to DHS for post legal dissolutions of DHS adoptions;
- B. The number of requests to terminate guardianships of children placed and subsidized by DHS;
- C. The number of complaints received by DHS and the Oregon Children's Ombudsmen's Office from qualified adoptive and guardian families regarding the lack of availability of services to support their adoptions or guardianships; and
- D. The number of adoptive and guardian families returning to DHS for crisis services.

## **Post-Graduate Certificate Program in Therapy with Adoptive Families**

As described above and in prior reports, Oregon has a Post-graduate Certificate Program in Therapy with Adoptive Families. DHS has continued to commit \$35,000 a year from its Title IV-B subpart 2 adoption promotion and support funds to provide 0.5 FTE position to “convene on a regular basis an Executive Committee which consists of, at a minimum, appropriate representatives from DHS and PSU, and which provides oversight responsibility for the collaboration and to assure the delivery of a program that increases the adoption competence of mental health professionals in their delivery of services that result in:

1. Strengthened family integration;
2. Strengthened attachments between the child and family;
3. Strengthened family functioning;
4. Strengthened parental entitlement and claiming of their adopted children;
5. Strengthened identity formation of family members; and
6. Strengthened community networks.

These are the six outcomes described in the white paper entitled “Promising Practices in Adoption-Competent Mental Health Services,” published by the Casey Family Services Center for Effective Child Welfare Practices in 2004.

The first cohort of twenty-seven mental health practitioners, who were drawn from virtually all geographic areas of the state, began the certificate program in September 2003. All twenty-seven completed the required 100 contact hours and received their certificates on June 12, 2004. The following topic areas are covered in the program:

1. Overview of Oregon’s Adoption System
2. Clinical Practice with Children Adopted from the Child Welfare System
3. Clinical Practice with Diverse Children and Families
4. The Impact of Abuse and Neglect on Child Development
5. Promoting Positive Sexual Development after Abuse and Neglect
6. Assessment, Diagnosis and Intervention: Trauma and Dissociative Disorders
7. Assessment, Diagnosis and Intervention: Attachment and Bonding

8. Assessment, Diagnosis and Intervention: Mental Health and Neurological Disorders
9. Coaching for Advocacy and Successful Parenting Techniques
10. Putting Adoption Therapy into Practice

This curriculum was strengthened in the second year, which began in September 2004, with increased emphasis, in accordance with Oregon legislative requirements, on evidence-based practice. This second cohort completed the program in June, 2005. After revamping the curriculum to a web-based format, the third cohort is scheduled to begin the program in September 2006. DHS is continuing its fiscal contribution for logistical coordination of the program. In 2005, the management of the coordinator shifted from ORPARC to Portland State University Child Welfare Partnership.

### **Child Specific, Targeted and General Recruitment In and Out of State**

Beginning in FFY 2004, DHS committed \$35,000/year of its Title IV-B subpart 2 adoption promotion and support funds to purchase contracted general, targeted and child specific adoption recruitment activities focusing both on in state and out of state families in an effort to increase the pool of prospective adoptive families available to Oregon's children who are freed for adoption, and to meet the ASFA standards for length of time to adoption. These funds have been directed into an established contract with the Boys and Girls Aid Society of Oregon, which already provides many of Oregon's recruitment services. Enhancement of this contract has helped Oregon to meet two goals: overcome geographic barriers to adoption by linking waiting Oregon children with prospective adoptive families from across the country; and increasing the State's diligent recruitment of families who reflect the racial/ethnic composition of the children needing placement services. Boys and Girls Aid is accomplishing this second goal by featuring more waiting children in the *Family Matters* recruitment newsletter and restoring its mailing list of churches and other organizations which may be able to assist in identifying potential resource families for these children. This financial assistance continued in 2005 and, it is anticipated, will continue through the duration of this plan. Oregon increased the finalized adoption of children belonging to ethnic minorities by 25.9 percent in the period between July 1, 2004 and June 30, 2005.

## **Boise Wednesday's Child**

Beginning in FFY 2004, Oregon also committed \$35,000 per year for the purchase of child specific adoption recruitment services from the Boise, Idaho Wednesday's Child program, with the collaboration of the Idaho child welfare agency. This is another activity whose goal is to increase Oregon's number of adoptions and to decrease the amount of time to adoption. These funds help to pay for the expenses incurred with identifying which Oregon waiting children are most appropriate for this recruitment effort, preparing them for participation in it, and offsetting some of the costs involved in connecting the children with the program. This financial support was continued through 2005 and, it is anticipated it will continue through the five years of this plan.

## **FAMILY PRESERVATION AND SUPPORT**

In addition to Child Welfare related Family Support programs provided through the State Commission on Children and Families, the Department of Human Services provides Family Preservation and Reunification services through Family Based Services (FBS) programs. These include: Intensive Family Services, Parent Training, Family Sex Abuse Treatment and Intensive Home-based Services. Family Based Services are designed to increase parental protective capacity related to identified safety threats to children living in their own home, and to also help meet the Permanency and Well-being needs of children in Foster Care.

A brief description of these services is included as an example of how these FBS programs have been directed towards the achievement of the Program Improvement Plan goals developed out of the Child and Family Services Review (CFSR) process. Outcome goals have been articulated for child safety, permanency and well-being. A review of these contracted FBS programs is included with the CFSR process in Oregon.

### **Family Based Services Program Description**

#### **Overview**

Each service area is designed to target problem areas children and their families typically experience when child welfare issues are present. Interventions must directly address a caregiver's functioning in the parental role, as it relates to the child's needs for safety, permanency and well-being, and there must be a logical

and clear relationship between the services provided and the presenting child welfare issues. Services should be based on known effective interventions for changing child abuse and neglect behaviors.

Families referred by the Department are frequently affected by drug and alcohol abuse, domestic violence, sexual abuse, physical abuse and neglect, so these issues must be considered in service planning. In addition, families may need help with the special needs of their children when physical, mental, emotional or developmental issues are present. Foster parent or adoptive parents may also receive services under this program. Children who are sexually reactive may need specialized services to help all children in the home remain free from sexual abuse. The Family Based Services Program is therefore designed to offer a flexible array of the above named services depending upon the identified safety and attachment needs of the children, and the needs of their family.

### **Service Planning Process**

The service planning process helps identify and create services that are tailored to meet the individual needs of children and family members. Family meetings such as the statutory, Oregon Family Decision Meeting, may be used to help identify the safety, permanency and well-being needs of children, and to identify family strengths and outside resources to help meet those needs. Family Decision Meetings are a collaborative process that may include immediate and extended family members, selected family network persons, and community professionals who know the parents and child.

During the provision of Family Based Services, the provider will be asked to focus on increasing the parent's protective capacity related to the identified safety threats. This may include a flexible array of services over time that may for instance begin with support for addiction recovery and later evolve to Parent Training. It is also expected that additional linkages to resources will be developed through this process to help meet the child's needs for safety, permanency and well-being. These may be provided through System of Care Flexible funding, IV-E Waiver contracts, Department of Human Services programs, community, neighbor or family resources.

Family Based Services programs will also be asked to coordinate with mental health programs, alcohol and drug addiction services, sex offender treatment, or batterer intervention programs when appropriate. Coordination is required with

Community Probation and Parole when parents are involved with those programs. Due to the secrecy associated with sex offending behaviors, this coordination of treatment between child welfare authorities, Family Based Service providers, offender therapists and community probation and parole is essential.

The final determinant for services is based upon the identified safety, attachment and well-being needs of the child, regardless of the service category or provider.

### **Outcome Expectations/Program Evaluation**

Family Based Services programs should focus on change. They should identify core child welfare issues; focus on goals to resolve these issues; utilize family strengths to change behaviors; include the family in assessing change over time; and document change to help determine case status with respect to the following areas of concern.

1. Safety: Children will remain safe in their own homes. Re-abuse of children will be reduced due to the effects of Family Based Services programs. Recommendations to reunify or maintain children with their parents should be based upon evidence of substantial improvement of parenting capacity.
2. Permanency: Children will have safer and more stable homes through improvement and stability of their caretaker's parental functioning, whether in the home of their parents or in an alternate placement.
3. Well-being: Families will demonstrate enhanced capacity to provide for their children's educational, physical and mental health needs. Families will receive culturally competent services.

Program evaluation will be based on successful achievement of outcome expectations as evidenced by Department records reflecting:

- Accomplishment of increased parental protective capacity goals related to the identified safety threats to the children.
- Reunification of families served
- Subsequent substitute care placements;
- Founded incidents of abuse and neglect in families served;
- Stability of placements

Measures of success will also include ability of the contractor to engage referred families in the service and maintain their involvement through successful

completion of the program. Both Department and Contractor records will be important sources for documenting client achievements.

### **Services to Be Provided in the Upcoming Federal Fiscal Year (2007)**

The Family Based Services programs listed above, continue as described in the Oregon Child and Family Services Plan (FY 2005-2009); however a related program for Homemaker Services (Family Resource Workers) has been discontinued. This program, provided by para-professional providers, was determined to be a low priority for funding considering the current challenges faced by families receiving child welfare services in Oregon.

Faced with increasing foster care placements in Oregon, Family Based Services programs have shifted to provide services after a child has been removed. The result is that the foster care cases now comprise 66% of the families served, compared to 2001 when 52% of the Family Based Services were provided to families with a child in foster care.

## e) Updated Information

*Updated information in the training plan, technical assistance, research, evaluation, management information systems and quality assurance systems to be updated or implemented in the upcoming fiscal year. Training with IV-E funds must be included.*

## UPDATED STAFF DEVELOPMENT AND TRAINING PLAN

### Staff Training

Staff development and training is an integral part of achieving high quality practices within DHS. The Department has made a commitment to develop training to more effectively meet the high level of training needs within Child Welfare. To create the infrastructure necessary, CAF has made good progress since the start of the new biennium in identifying critical training needs for staff in Child Welfare (CW) and each Service Delivery Area (SDA) has submitted a Training Plan that addresses their local training needs.

Two training committees have been formed and are meeting monthly to discuss training needs and make decisions. One committee will focus on CW training and will articulate the training needs for CW. A second committee will focus on Self-sufficiency (SS) training and will articulate the training needs for SS. The goals of both committees will be to provide guidance and direction to the training needs of our staff in each program area; oversee the provision of training through a set of clearly defined and agreed upon skill-sets and competencies for staff and caregivers and set annual training goals that go beyond the CORE foundation training for new workers that address federal and state guidelines, and Department best-practice goals.

### Training Delivery Methods

The majority of training that occurs within CAF is classroom training. We have been working hard developing a variety of ways to deliver training and also saving our resources by reducing in travel costs related to meeting the training needs of our staff.

**Video Conferencing** has been used extensively in Child Welfare, and data has shown significant cost savings in state travel through the use of Video Conferencing technology. This is a great opportunity for training as well as for meetings, case staffing and collaborations. The CAF Training Manager is the lead manager on this technology for the Department.

**NetLink:** The Department has invested in computer-based technology, Net Link, to allow for interactive training to be held via the internet. Child Welfare has started to use this delivery method for Foster Parent Training as well and CW Staff training. In this last quarter, several NetLink trainings were held and Net Link served over 200 CW staff and foster parents. We are now expanding net link classes to a larger audience of CW staff and foster parents to assist our foster families in meeting their required training needs each year.

**E Learning:** Work is also being done to develop web-based training. CAF is one of the first clusters to develop, produce, and launch computer based training. There are several projects currently being developed to add to the list of options for mandatory training for our staff. This type of training is conducted at their desktop in their own offices.

CAF Training Services will be providing instruction and training on how to use blended learning to increase training efficiency while reducing training costs. Since these technologies are relatively new to DHS training services, management and training staff need a better understanding of how and when to use different types of distance learning methods.

**DHS Learning Center:** The DHS Learning Center is well on its way to the final stages of planning before implementation. It is a new approach to training and career development for DHS employees, our partners and service providers.

The Learning Center will be a Web-based system that will provide easy access to DHS course catalogs and registration, as well as functionality that will significantly enhance our workforce-development practices.

It will include information about all aspects of training for department issues -- from program-specific topics such as CORE CW classes, to cultural-competency instruction, new-employee orientation and management training.

The Learning Center will replace all other training registration and tracking systems throughout the department. Agency-wide implementation will begin in the fall of 2006, with training for all staff on how to access and use the Learning Center.

## **Current Challenges impacting Child Welfare**

**Methamphetamine:** The impact of the use and manufacture of methamphetamine on child safety in Oregon is significant. Laws and administrative rules need to be drafted to address intervention. Currently there is no national standard for this work.

**Wayne Holder Study:** Recommendations from Wayne Holder's study need to be implemented regarding safety throughout the life of the case. Since June of 2006, intensive work has gone into the development of a new CW Procedural Manual. The purpose of this manual is: To document processes to be used as reference for workers to clarify tasks they need to accomplish.

A decision was made in January of 2006, to adopt the National Safety Intervention Model, which focus's on safety reviews throughout the life of a case and creates a practice change that will require training to all staff. It is intended to:

- A. Improve Child Safety
- B. Improve parental capacity
- C. Improve worker capacity
- D. Strengthen the system administration

## **Training for Child Welfare (CWP)**

### **Child Welfare Partnership**

The Partnership is the primary provider of child welfare core training. The Partnership and the Department continue to develop and deliver training for specific staff groups, as well as for foster and adoptive resource families and partners. Additional components of the Partnership include research and graduate education. This allows DHS to link university-based research on child welfare programs and populations with best practice and to provide advanced degree training through the Masters of Social Work program.

Classroom training continues to be the primary method of training delivery, with most trainings taking place in Salem at the Chemeketa Community College Campus. The Partnership, in conjunction with the Department is developing training to be delivered via distance delivery technologies. Examples of such technologies include video conferencing and Net Link.

The CWP Training program served a total of 1,318 individuals, empowering them with the knowledge and skill necessary to better meet the needs of Oregon's child welfare client children and families. Staff continued to refine existing programs and engaged in design work. A significant revision to Core Training (to be implemented in August) is underway in collaboration with agency staff. More and more trainings have been developed for Distance Delivery to assure that rural staff have access to training even when travel is a challenge.

### **CWP Core Training**

- The Core training for all entering child welfare workers has undergone significant development this year. A multi-level statewide training committee and the CWP Training Unit conducted a needs assessment, a literature review of child welfare competencies and a year of intensive development work designed to increase the effectiveness of training.
- As a result, new workers entering child welfare will begin a Year-Long Training Plan that articulates and supports learning over the first year of employment. The new training will be offered starting in August, 2006. It will provide a core of knowledge and skill practice in safety, permanency, and well-being. Training will include practical, hands-on, experiential activities that are specific to the “how to’s” of Child Welfare practice.

### **Elements of the Year-Long Training Plan include**

- Integrated Basic Core: Separate classes for safety and permanency planning have been merged into one integrated six-week curriculum for all entering workers.
- Increased use of Distance Delivery: Providing additional content by web-based methods increases information that can be taught while minimizing travel cost and lost productivity for the field and providing learning opportunities pre and post classroom training.
- Field Activities Guide: A workbook and on-the-job training guide has been developed identifying specific learning activities for the first year on the job.

This takes advantage of and recognizes the many content experts in the field and reinforces classroom knowledge through structured transfer of learning activities.

## **Introduction of the Procedures Manual**

The Child Welfare Partnership will be incorporating new procedures outlined in the manual into training offered to workers as follows:

- As the Department creates and releases the Procedure Manual, the Child Welfare Partnership Trainers will be learning the material, incorporating practice shifts into the New Worker's Core Curriculum, and reinforcing the practice and use of the Procedure Manual.
- The Partnership has been providing a presentation on the changes being made in new worker training to support the practice shifts as part of DHS training for supervisors and managers on the Procedure Manual.
- Upon completion of the Procedure Manual and its availability on-line, the Partnership will create a computer based tutorial new workers may take to orient them to the manual and how to use it to add precision to their practice.

## **Other CORE Child Welfare Classes**

### Social Service Assistants Training

This four-day training is designed for Social Services Assistants (SSAs) who have a significant amount of client contact. The curriculum utilizes a case study approach and opportunities to apply and practice new learning on the following topics:

- Child Development
- Managing Behavior in Visitation
- Communication and Teamwork
- Documentation
- Boundaries and Working with Difficult People
- Personal Values
- Preparing for Court
- Substance Abuse

## **Specialized/Advanced Training**

### Certifier and Adoption Worker Training

- This training is the blending of foster and adoption issues and both certifiers and adoption workers are being cross-trained throughout the state. In light of ASFA and the outcome goals of the Child and Family Services Review (CFSR), the need to streamline processes has pushed Oregon to practice a more blended approach to foster certification and adoption and thus the training has been designed with this in mind.

### Supervising for Excellence

This training is currently being re-designed, in collaboration with DHS to incorporate the current safety supervision training needed as well as the need for training on clinical supervision. The curriculum builds on the original and effective Supervising for Excellence, a training that is highly regarded and desired by our management staff. Funding resources have been set aside to work with PSU CWP to get this on their calendar of regularly scheduled training for supervisors.

This training for child welfare supervisors includes content on knowing one's own leadership style and preferences and working with external constituents requiring teamwork, planning and leadership. This training is part of the identified goals of supervisors receiving adequate training, which includes clinical supervision, management, and using data as a supervisory and management tool.

### **Planning**

- The Department is planning to support this training through the Child Welfare Partnership. This will become part of the Agreement with the Partnership.
- Work will be done in conjunction with the Partnership to ensure the curriculum meets the needs of the agency.
- Continue supervisory training in clinical supervision as a follow-up to Supervising for Excellence.

## Eligibility Training for Title IV-E Eligibility Staff

In order to meet some of the case plan and case review requirements under ASFA and ensure eligibility of children to receive Title IV-E funding, the 40 federal revenue specialists, case management clerks and the Title IV-E eligibility staff receive a training several times per year and attend an annual Title IV-E training conference.

The Partnership continues to provide coordination of training to Title IV-E Eligibility workers in collaboration with and at the direction of the CAF Title IV-E Federal Compliance Manager and staff. The Partnership provides resource consultation to DHS, including but not limited to identification of trainers and associated contracts for provision of training at meetings.

## Integrated Skill Enhancement

### DHS Alcohol and Drug Field Training: Assessment, Referral and Intervention

Research studies and front-line staff identify alcohol and drug-related issues as one of the foremost barriers to addressing safety and permanency for children. Child Welfare staff participate in this training to learn to recognize symptoms of substance abuse, understand intervention techniques, and provide referrals when necessary to stabilize families and assure the safety of the child. Training on Methamphetamine Abuse and its effects on families we serve continues to be a very popular offering.

## Domestic Violence

Domestic violence is addressed in Casework Practice. Research and front-line staff identify domestic violence as a critical barrier to addressing safety and permanency for children. Training for all DHS staff and community partners continues to happen in a variety of venues. In addition, child welfare has developed guidelines on working with families impacted by domestic violence. Training is offered on these guidelines by Department staff.

- Recommended for all child welfare classifications.

## Mandatory Reporter Training

All DHS employees are mandatory reporters. This video, along with the question and answer session, will assist employees in understanding their responsibility. The reporting of alleged or suspected child abuse, including physical abuse, sexual abuse and neglect is paramount as the first step in our response to child abuse in Oregon. Mandatory reporters play a vital role in the safety and protection of children.

## Diversity

Since 1996, the Department and child welfare have co-sponsored an annual conference to enhance staff knowledge and skills in serving a diverse client population. This conference helps increase staff awareness and acceptance of diversity and to identify strategies and resources for serving diverse communities. In addition, the Department hosts an annual Indian Child Welfare Act (ICWA) conference.

## Health and Safety

Training for social service staff includes first aid/CPR, transporting children safely and prevention of communicable diseases. The purpose is to promote client and staff safety. In addition, staff who transport children as a part of their job attend a safe driving course.

## **Graduate Education Program**

Through the Partnership, DHS and Portland State University offer educational opportunities to interested child welfare staff that wish to obtain a Master in Social Work (M.S.W.) degree. Students accepted in the Graduate Education Program (GEP) receive a stipend of up to \$6,000 per year for up to three years in the form of tuition assistance. The stipend, funded by federal Title IV-E dollars, is applied directly to tuition costs. Students do not receive cash or credit. As part of this program, M.S.W. graduates who have participated in the GEP agree to work for child welfare within DHS for an equivalent number of years following graduation. Eligibility is dependent upon being admitted into the Graduate School of Social Work and meeting the admission standards for Portland State University.

## **The New Undergraduate Education Program**

Through the Partnership, DHS and Portland State University are in the planning stages of offering educational opportunities to interested child welfare staff that wish to obtain a bachelor's degree in Social Work (BSW). Students accepted in the under-Graduate Education Program (GEP) will receive a stipend (to be determined) per academic year for up to three years in the form of tuition assistance. The stipend, funded by federal Title IV-E and state dollars, is applied directly to tuition costs. Students will not receive cash or credit. As part of this program, B.S.W. graduates who have participated in the UGEP agree to work for child welfare within DHS for an equivalent number of years following graduation. Eligibility is dependent upon being admitted into the Under-Graduate School of Social Work and meeting the admission standards for Portland State University.

### Foundations in Adoption Practice

This training is designed for adoption workers and staff who complete adoption homes studies. It includes the most up-to-date information on policy and practice with ample time for group interaction. This week-long training includes modules on:

- Assessment
- Developmental Challenges of the Adoptive Family
- Advanced Assessment Training
- Adopting Sexually Reactive Children
- Disruption
- Adoption Assistance
- Presenting at Committee
- Transition
- Mediation and openness

The Department's Permanency and Adoption Consultants provide technical assistance and training for staff, adoptive parents and others. The training continues to be provided on an as-needed basis and addresses the following: involving parents and other relatives in planning for children, maintaining contact, if possible, with the birth family after legal adoption, child adoption assessment, IEPA and MEPA and related policies, and other training on adoption assistance policy and procedures.

## **Freeing and Placing Children for Adoption**

Freeing and Placing is a training offered to field staff in Children, Adults and Families by the Adoption Services Unit in Conjunction with the CWP. It is an eight-day training provided two times a year, in the Spring and Fall. During these two sessions an average of 80 caseworkers, Consultation, Education and Training (CET) staff and supervisors are trained in the area of freeing and placing children for adoption. The training includes many outside speakers who give best practice approaches to the assessment of parents and children, relevant services, measuring parental capacity for change, preparing a court case for termination of parental rights and preparing a child for an adoptive placement. It provides a blend of highly technical information to ensure legal sufficiency in cases identified for pursuit of termination of parental rights and good social work practice regarding sibling placement, determining the appropriateness of adoption for a child and planning transitions for children placed adoptively.

## **Foster/Relative/Adoptive Parent Training**

Oregon Administrative Rules require a minimum of 10 hours post certification training per year for licensed foster parents. This in-service training is the focus of CWP training initiatives. Four Partnership field-based training positions support this work. Work continues to be done to develop standardized Core classes for the first two years of service as a foster parent in Oregon.

In association with a work group comprised of staff, foster parents and Partnership trainers, a new active training, Foster Care City, was developed based on a case study approach that explicates family to family principles and practice. This continues to be a successful training.

The Foster Adopt Parent Trainers produce an on-line catalog for all training offered in the state. They also provide printed catalogs in SDA 2, and a second catalog for all remaining SDAs in the state. The trainers continue to work with local offices and foster parents to identify the training needs of staff and parents. In addition, the trainers have access to material that may be loaned out to foster parents and staff.

## **Current Activities**

- The Foster Adopt Parent Trainers continue to work within their own geographic areas to assist staff and foster parents identify and meet training needs.

## **Planning**

- The CAF Training Manager met with the State Foster Parent Advisory Committee to elicit feedback on training for foster parents. One major systemic factor that came out was having consistent training plans for foster parents. Work will be done with the Training Unit, Foster Care Unit and the Partnership to explore how this can become a systemic part of training and professional development for foster parents and staff.
- Continue to explore more ways in which training can be attended by both staff and foster parents.

## **TECHNICAL ASSISTANCE**

Oregon is continuing to work with the NRCCPS on broad system issues including safety throughout the life of the case in procedure, training and quality assurance. Staff are providing consultation and review on procedure and development of training. We anticipate requesting continued technical assistance for FFY 2007.

Technical Assistance with the National Resource Center for Organizational Improvement (NRCOI) started with the first site visit occurring May 24, 2006, and is linking with the work done by NRCCPS to address the service delivery system, including standards for supervision and staffing structure. System capacity and the impact of state statutes are also being examined. NRCOI is taking the lead for the two centers on Quality Assurance. Oregon anticipates requesting continued technical assistance for FFY 2007.

## **RESEARCH AND EVALUATION**

In 2004, Oregon completed all the requirements for its Program Improvement Plan (PIP) from the first Federal Child and Family Services Review (CFSR). The quality assurance program for the plan included replicating the CFSR process in local branches across the state, providing detailed feedback about local strengths and areas needing improvement. In preparation for the next Child and Family Services review, we hope to build off of that earlier process by moving to quarterly

‘snapshots’ of Statewide performance on the CFSR measures which can then be used to help local branches focus on helping the state meet its performance objectives.

The proposed snapshots would be generated by conducting quarterly case reviews on a statewide sample. The results of the statewide quarterly reviews will contribute to Oregon’s continuing program and practice improvement process by providing a profile of the state’s performance at that point in time. With the quarterly statewide performance profile in hand, we may work with each branch based on their localized results on key process and performance measures and the results from their earlier localized branch reviews to develop and prioritize local strategies for sustaining and improving state performance.

## MANAGEMENT INFORMATION SYSTEM UPDATE

<b>Project Name:</b> Statewide Automated Child Welfare Information System		
<b>Project Name Abbreviation:</b> SACWIS	<b>Agency Name:</b> Department of Human Services	
<b>*Project Description: (Please use fewer than 255 characters.)</b> Replace FACIS, IIS and multiple stand-alone child welfare systems with a single, comprehensive Statewide Automated Child Welfare Information System (SACWIS) meeting federal and state requirements.		
<b>Project Sponsors:</b> Ramona Foley; Bill Crowell	<b>Start Date:</b> January 2005	<b>QA Contractor:</b> RFP Posted proposals due 5/15/06
<b>Project Manager:</b> Debra Herli	<b>Original End Date:</b> 2008	<b>Last QA Report Date:</b> N/A
<b>Program Manager:</b> TBD	<b>Current End Date:</b> 2008 <b>Date Revised/End Date:</b>	<b>Development Contractor:</b> N/A

### PROJECT FINANCIALS

<b>Fund Sources</b>	<b>Approved Amount</b>	<b>FEDERAL SHARE Approved Amount</b>	<b>STATE SHARE Approved Amount</b>
Project Development Costs	\$ 10,840,708	\$ 5,420,354	\$ 5,420,354
Software/Hardware costs	\$ 10,020,000	\$ 5,010,000	\$ 5,010,000
*Agency Staff Costs (including S&S)	\$ 7,599,246	\$ 3,799,623	\$ 3,799,623
*Other Costs	\$ 866,619	\$ 0	\$ 866,619
<b>Total Budget:<sup>1</sup></b>	<b>\$ 29,326,573</b>	<b>\$ 14,229,977</b>	<b>\$ 15,096,596</b>
<b>Current Budget Funds Expended:</b>	\$ 2,018,750	\$ 1,009,375	\$ 1,009,375
<b>Expenditures Previous Releases:</b>	\$ 0	\$ 0	\$ 0
<b>Project Spending Totals:</b>	\$ 2,018,750	\$ 1,009,375	\$ 1,009,375

<sup>1</sup> The 2005 LAB \$28,585,070 of 2005-07 funding for the SACWIS project. In addition \$741,503 of 2003-05 funding was allocated to the project for total funding of \$29,326,573.

## **Project Information**

### **Background**

Department of Human Services (DHS) uses the Integrated Information System (IIS), the Family and Children Information System (FACIS), and various ancillary applications to manage Oregon child welfare programs. IIS, FACIS, and associated systems track clients, providers and services statewide, provide fiscal functions, and produce management and federal reports.

IIS was developed in phases from 1979 to 1984 and FACIS was developed and interfaced with IIS from 1994 to 2000. Although IIS and FACIS together are considered to be Oregon's primary SACWIS, they meet only about 25 percent of the federal requirements and Oregon child welfare needs. While multiple functional areas were originally planned for FACIS, only the intake and assessment modules were completed, leaving Oregon workers with a partial solution to meet their day-to-day business and case management needs. Additional work has been done in other areas, such as eligibility, court reporting, and adoptions, but has not been completed.

Furthermore, a 2002 technical assessment of the FACIS project by the federal Administration for Children and Families (ACF) found that Oregon's system did not meet the primary federal requirement for single statewide child welfare system and met only 22 of the 72 mandatory SACWIS requirements.

ACF agreed with DHS conclusions in a November 2004 Advanced Planning Document Update (APDU) that additional development of the current system as it exists today would not be cost effective or provide for a viable SACWIS.

### **Purpose of the Project**

A single system for recording child and family information, and set of functions organized to fit with the events of service delivery, will reduce redundant data entry and ensure all data related to a case is available to support critical decisions. On-line help and policy coupled with built-in best practices will improve the accuracy and timeliness of service delivery. A calendaring system and ticklers available in modern comprehensive SACWIS systems will assist social workers in the effective management of child welfare caseloads.

In summary, a comprehensive SACWIS system will better support the management of the client and case data providing more time for staff to engage and deliver the ‘quality’ and ‘timely’ human services needed by their clients.

**Benefits**

The new system will:

- Meet Federal and State regulatory and reporting requirements,
- Eliminate duplication of effort and redundant systems,
- Enable direct service staff to spend more time with children and families,
- Promote partnerships with other organizations and the community in serving families,
- Adequately measure program effectiveness,
- Improve manual processes by supporting them with information technology,
- Develop information management standards and policies, and
- Improve accuracy and timeliness of service delivery.

**Major Accomplishments**

**Brief Narrative**

DHS has obtained federal approval for the planning phase of the project to implement a new Oregon SACWIS system, resulting in the retirement of the FACIS, IIS, and ancillary applications. Work is underway to complete the planning phase of the project, obtain federal approval for implementation phase funding, and receive federal approval for issuance of the implementation RFP.

Scheduled Completion Date	Major Milestones	Status
January 2005	Project Charter approved by Executive Steering Committee	Complete
March 2005	PAPD approved by ACF	Complete
June 2005	Inventory of Federal and State laws, regulations, rules and policies that drive child welfare business	Complete
August 2005	Methodologies required by ACF (budget, resource and schedule plans)	Complete

Scheduled Completion Date	Major Milestones	Status
September 2005	Posted Planning and Quality Control RFP	Complete
November 2005	Posted RFI for SACWIS Solutions	Complete
November 2005	Project Deliverables: (Data Migration: Identified existing databases, documented batch jobs and interfaces. Completed technical analysis of current IIS fiscal system)	Complete
February 2006	ACF approval of APDU	Complete
February 2006	Evaluation and Selection of Planning and QC vendor	Complete
March 2006	SACWIS Solutions Demos Scheduled	Complete
April 2006	QA RFP Posted	Complete
June 2006	Analysis of Current Child Welfare Reports	In progress
July 2006	High-Level Requirements	In progress
July 2006	Submit IAPD to ACF	Planned
August 2006	Submit implementation RFP to ACF	Planned
September 2006	Post Implementation RFP	Planned

### **Significant Delays or Project Changes (Since last reporting period)**

No significant delays have occurred since last reporting period. The team from Walter R. McDonald and Assoc., the Planning and QC contractor, joined the project beginning on April 3<sup>rd</sup> and work has begun on the contract-associated deliverables.

### **Project Risks and Mitigation**

**Risk 1 – Cultural and User Readiness:** Awareness of how project will affect business change is low. Planning, scheduling and implementation of necessary organizational changes may not keep pace with technology component of project.

**Mitigation** – Engage DHS Organizational Change Management resources early at all levels throughout all phases of the project. Develop and implement comprehensive Organizational Change Management Plan.

**Status** – DHS Organizational Change Manager to oversee this effort is being recruited.

**Risk 2 – Resource Availability:** Sufficient child welfare and other subject matter expert resources may not be available to meet the scheduled deadlines.

**Mitigation** – Seek Steering Committee Member's assistance to identify and plan for resources throughout the project.

**Status** – Steering Committees are actively involved in mitigating this risk.

**Risk 3 – Project Schedule:** The current project schedule has little slack time with risks that may cause schedule delays.

**Mitigation** – Seek Steering Committee and Counsel support to identify and plan for risks that may impact the schedule.

**Status** – The Project Manager and Steering Committees are closely monitoring schedule risks.

## **QUALITY ASSURANCE SYSTEMS**

In 2004, Oregon completed all the requirements for its Program Improvement Plan (PIP) from the first Federal Child and Family Services Review (CFSR). The quality assurance program for that plan included replicating the CFSR process in local branches across the state, providing them with detailed feedback about local strengths and areas needing improvement. In preparation for the next Child and Family Services review, we hope to build off of that earlier process by moving to quarterly ‘snapshots’ of Statewide performance on the CFSR measures which may be used to help local branches focus on their role in helping the state meet its performance objectives.

The proposed snapshots will be generated by conducting quarterly case reviews on a statewide sample. The results of the statewide quarterly reviews will contribute to Oregon’s continuing program and practice improvement process by providing a

profile of the state's performance at that point in time. With the quarterly statewide performance profile in hand, we may work with each branch based on their localized results on key process and performance measures and the results from their earlier localized branch reviews to develop and prioritize local strategies for sustaining or improving overall state performance.

**f) Additions or Changes in Services or Program Design  
That The State Has Found Particularly Effective or Ineffective**

Each program area has reflected this information within their program section.

**g) Indicate If There Are No Planned Changes to the Program**

Each program area has reflected this information within their program section.

## h) Financial Information

*States must report:*

- *The percentage of IV-B 2 funds to be expended on service delivery for FY07*
- *Provide a rationale if the percentage is below 20% for any one of the four service categories*
- *The amount to be allocated to planning and service coordination for each category (Please refer to CFS 101)*
- *The amount of IV-B 2 expenditures in FY04 for each of the four categories, and for those costs identified as administrative*
- *Compare FY04 State and local share spending for IV-B 2 against 1992 base year amount*
- *Compare FY04 State expenditures for foster care maintenance, adoption assistance and child day care related to employment or training against expenditures under IV-B 1 in 1979.*

### **Funds to be expended on service delivery for FY07:**

<b>Category</b>	<b>Amount</b>	<b>Percentage</b>
a. Total Family Preservation Services	1,186,283	20.4%
b. Total Family Support Services	1,654,369	28.5%
c. Total Time-Limited Family Reunification Services	1,213,317	20.9%
d. Total Adoption Promotion and Support Services	1,167,366	20.1%
e. Administration	572,240	9.8%
Total	5,793,575	

### **Funds expended on service delivery in FY04:**

<b>Category</b>	<b>Amount</b>	<b>Percentage</b>
a. Total Family Preservation Services	1,176,515	22.5%
b. Total Family Support Services	1,176,515	22.5%
c. Total Time-Limited Family Reunification Services	1,176,515	22.5%
d. Total Adoption Promotion and Support Services	1,176,515	22.5%
e. Administration	522,892	9.9%
Total	5,228,952	

**The amount to be allocated to planning and service coordination for each category.**

Please refer to CFS 101.

**Compare FY04 State and local share spending for IV-B 2 against 1992 base year amount.**

The Oregon biennial budget for 1991-93 included \$118 million in State General Fund (GF) dollars and a Total Fund (TF) budget of \$225 million. This included \$7,193,756 from IV-B-CWS. The IM ACF-IM-92-16 lists the available IV-B funds available for Oregon for 1992 as \$3,283,022.

State Budget FFY 1992

\$59,196,600 GF

\$112,531,846 TF

\$3,283,022 IV-B

At that time IV-B funds made up 2.8% of the Child Welfare Total Fund budget.

In 2003-2005, the Oregon biennial budget included \$156.8 million GF with a TF budget of \$492.8 million. Half of these amounts, approximating the federal fiscal period of FFY 2004, would be:

State Budget FFY 2004

\$89,959,658 GF

\$246,407,014 TF

The allotment of IV-B for 2003 is as follows:

Part II: \$5,228,896

The IV-B amount for 2004 is 2.1% of the Child Welfare Program budget versus 2.8% of the budget in 1992. This demonstrates that IV-B funds have not supplanted other program costs in the 2004 federal period.

**Compare FY04 State expenditures for foster care maintenance, adoption assistance and child day care related to employment or training against expenditures under IV-B 1 in 1979.**

The 1979 base amount for foster care maintenance was \$629,284. The FFY 2004 expenditure amount for foster care maintenance was \$629,284. There were no expenditures charged to IV-B in FFY 2004 for Adoption Assistance or Child Care Related to Employment, because they were not funded in 1979.

## 2. Tribal Consultation

### a) ICWA Compliance

*An update, after consultation with Tribal organizations, of the specific measures taken by the State to comply with each of the five major components of ICWA. States must also provide an update to the goals and activities that have been undertaken to improve or maintain compliance with ICWA. Include laws, policies and/or trainings implemented to increase compliance with ICWA.*

## TRIBAL CONSULTATION

### Focus

The Child Welfare Services program provides funding to States under Title IV-B Subpart 2, of the Social Security Act. Services are available to children and their families without regard to income. To be eligible for its funds, the State and Tribes must provide assurances that it will implement the following protections for all children in foster care:

- conduct an inventory of all children in foster care for at least six months on a regular basis;
- establish an information system that includes all children in foster care;
- conduct periodic case reviews for all foster children;
- provide due process protections for families;
- conduct in-home and permanent placement service programs, including prevention and reunification services.

In addition, States are required to prepare a five year state plan (the Child and Family Services Plan – CFSP) that focuses on child welfare services and includes goals and objectives. States are to prepare an annual update of that five-year state plan known as the Annual Progress and Services Report (APSR) and conduct an interim review of the progress made in the previous year toward accomplishing the goals and objectives.

Participation of tribal representatives is an important part of the IV-B plans development. Tribal consultation is considered an on-going process with statutory and agency policy. Numerous opportunities are in effect that provide for the

Oregon Tribes consultation and collaboration. Some of the structured involvement is through IV-B child welfare plan development, SB770, Health Cluster Quarterly meetings, ICWA Quarterly Advisory Committee meetings, Quarterly ICWA Regional Liaison meetings, and tribal representation on statewide Child Welfare Advisory Committee, ICWA conference planning committee, Native American ILP conference planning committee, and other special initiatives. These are addressed in more detail throughout the report.

As demonstrated in the following pages, the Oregon Tribes representatives have recommended measurable goals and objectives for components of the plan. Outcome measures were identified and data produced and distributed for discussion at the quarterly Tribal Advisory Committee meetings.

Relevant sources of data have been identified with work being completed on the state SACWIS system. Additional sources have been provided as they become available.

The Department of Human Services (DHS), through Children, Adults and Families (CAF) continues to provide collaboration and consultation with the nine federally recognized Indian tribes in Oregon. Tribes determine who speaks for them and the nature of the State/Tribal relationship should be reflected in appropriate persons of authority (high level leaders, officials or managers) from both the State and Tribes participating in consultations/meetings. A face-to-face contact with Tribes, providing an opportunity for everyone to speak, is seen as an optimal format. DHS, CAF and the Oregon Tribes have collaborated on numerous events in 2005, which have strengthened relationships, safety, well-being and permanency for Indian children and families in state or tribal custody.

### **Quarterly ICWA Advisory Committee**

The Oregon Tribal/State ICWA Advisory Committee was established over 13 years ago and continues to serve two main functions: (1) to identify barriers in department policy and rules in providing services to Indian children, in both state and tribal custody; and, (2) to work on direct communications between DHS and the Tribes. The CAF ICWA Advisory Committee continues to work on outstanding issues and develop stronger consultation and collaboration between the State of Oregon and the Oregon Tribes. Tribal representation on CAF program work groups is critical to policy development that may affect Indian children, families and the Oregon tribes.

## **Senate Bill 770 Health Services Cluster Meetings**

The SB 770 meetings allow both administrators from DHS and Tribal Representatives to meet quarterly and work on issues together to maintain a cooperative relationship with the tribes. This meeting is an outcome of Executive Order from the Governor and legislative action, with the expectation that departments within State government form and strengthen relationships with tribes.

## **Title IV-E Training**

The State and IV-E Tribes have on-going training, both on-site with individual tribes as well as group training. Non-Title IV-E tribes are also encouraged to participate, if they choose. The trainings are primarily focused on providing technical assistance to tribes with Title IV-E agreements, but can be expanded to all tribes, depending on the topic. The trainings are intended to shorten the response time for questions from the tribes and allow more frequent discussion between the State and the tribes, while providing an opportunity to follow-up on training related to federal funds. In 2006, the Federal Compliance Manager, who has primary responsibility for the Title IV-E agreements, and staff, provided numerous training sessions with the Tribes. The department is developing a desk reference manual which will include all the federal and state funding that the Tribes receive. This manual will provide information as to policy, compliance, funding and financial process for the Tribes and State. Technical assistance and training is essential to the current Title IV-E tribes and is an on-going process utilizing DHS staff expertise.

## **Service Delivery Area (SDA) Manager Collaboration with Tribes**

SDA Managers continue to establish and strengthen contacts with tribal social service and child welfare departments. Monthly contact between SDA Managers, Tribal Managers and respective staff has been strongly encouraged to strengthen relationships. DHS also encourages SDA Managers to involve the tribes in local planning. DHS offices are holding monthly Tribal meetings. A TANF satellite office staffed by DHS was opened in 2005 on the Warm Springs Reservation.

## **Consultation and Collaboration with Central Office DHS**

The DHS Assistant Administrator of Children, Adults and Families (CAF) implemented methods to improve communication within the organization, which improved communication with the tribes. The co-chair of the ICWA Tribal/State advisory committee was appointed to the statewide Child Welfare Advisory, which is a statutory committee. Administration and program managers attend the Quarterly ICWA Tribal/State advisory meetings. Administrators have also recruited tribal participation on DHS committees which effect policy. There are Tribal liaisons in most of the DHS departments who are the designated staff as the first point of contact who communicate with the Oregon Tribes in their respective areas of expertise.

### **Field Office ICWA Liaisons**

In all of the local DHS offices ICWA liaisons are assigned as a resource for staff and regarding ICWA requirements, compliance and tribal issues. The ICWA liaison is an initial contact for local tribal child welfare staff and local DHS staff to consult on cases and resolve issues. In addition, SDA 2 (Multnomah County) has an ICWA unit responsible for on-going services for Native American families. There are currently 65 ICWA liaisons ranging from SDA Managers, Child Welfare Program Managers, Caseworkers and CET's. The ICWA Manager has the overall responsibility regarding statewide policy and compliance. The best and most appropriate uses of ICWA liaisons statewide were evaluated and identified training needs were assessed. A work group comprised of ICWA liaisons and tribal staff contributed to a roles and responsibilities job description. Statewide ICWA training was held throughout the year.

### **Formal Government-to-Government Agreements**

Tribes have clearly stated the development of policies affecting the tribe or tribal members, access to programs and funding and the development of government-to-government agreements should all begin with a meeting between high-level state officials and tribal representatives. This meeting would serve as the initial step for state agencies to make in honoring the government relationships of tribes with the State of Oregon.

The process for the development of agreements has been outlined and adopted in principal between the State of Oregon and Tribes. The development of

government-to-government agreements needs to be consistent between departments and agencies in state government and Tribes. While the scope of the agreement will vary, this process will ensure that the general language in the agreements does not differ from one department or agency to another.

## **Tribal Agreements**

DHS Children, Adults and Families (CAF) currently has six intergovernmental Title IV-E Agreements. These agreements include the opportunity for the tribes to receive Title IV-E administration, training and foster care maintenance resources. The administrative and training resources require implementation of a time study for two weeks out of each quarter. Access to other state and federal resources are also in place to all of the Oregon Tribes: System of Care, Title IV-B, Title XX and ILP. In 2005, one Tribe signed a Title IV-E agreement, totaling six Title IV-E agreements and another Tribe beginning negotiations. Technical assistance and training is essential to the current Title IV-E tribes and is an on-going process utilizing DHS staff expertise.

## Policy

ACYF-CB-PI-02-05, Program Instruction for Title IV-B, reads: "...States are expected to consult with any Tribe within the State's boundary, regardless if the Tribe is Federally-recognized or not..."

## Potential Outcomes

- Increased communication and collaboration between the State and the Tribes.
- The Tribes are better informed about significant policy, program and staff changes in CAF.
- Tribes benefit from increased federal funding, with the State providing general fund match.
- Better services and outcomes for Indian children and families.

## Method of Measurement

- State and Tribal participation in CAF ICWA Advisory Committee and statewide Child Welfare Advisory Meetings
- State and Tribal participation in SB770 Meetings

- Status reports and feedback from the tribes on their perception of improvements in consultation with CAF.
- Tribes participate in DHS work groups which effect state policy.
- Appointment of the Co-chair ICWA tribal/state advisory to the legislative statewide child welfare advisory committee.

## **ICWA COMPLIANCE**

Listed below are the five major components in ICWA that the State must address in discussions with Tribes and in the APSR:

1. Identification of Indian children by the State Child Welfare services agency;
2. Notification of Indian parents and Tribes of State proceedings involving Indian children and their right to intervene;
3. Special placement preferences for Indian children;
4. Active efforts to prevent the breakup of the Indian family; and
5. Use of Tribal courts in child welfare matters; Tribal right to intervene in State proceedings or transfer proceedings to the jurisdiction of the Tribe.

Outlined below is a summary of DHS and Oregon tribe's efforts to comply with ICWA.

### **1. Identification of Indian Children by the State Child Welfare Services Agency**

Focus

Oregon law, rules and policy require an inquiry for Indian ancestry of every parent or custodian and child at the beginning of DHS Child Welfare intervention or assessment. This applies to voluntary or involuntary cases, regardless of whether a child is taken into protective custody. CAF Form 1270 is the instrument used for gathering and documenting DHS efforts to obtain required information, and when applicable, to initiate a diligent search process to determine ICWA eligibility. ICWA search clerks were implemented at local offices to assist caseworkers in identifying Indian children more timely. A desk reference manual is being developed for the search clerks for consistency and compliance with ICWA identification and process. Search clerks in the Metro area are meeting quarterly

for training on case practice guidelines. HB2611 established that a suspected ICWA case be treated as an ICWA case until and unless it is determined that a child is not ICWA eligible.

Timely notification to the child's tribe regarding DHS intervention is mandated. DHS workers are also required to identify an expert witness, preferably from the child's tribe or in consultation with the tribe, to testify at the initial jurisdictional hearing. Tribal staff are invited and encouraged to attend initial Team Decision Meetings, (TDM's) and legislatively mandated Oregon Family Decision Meetings (OFDM's).

Training is provided to DHS staff regarding the policies, procedures and practices for this process. ICWA training is also incorporated into new worker training/orientation and provided to field Service Delivery Area (SDA) staff, judicial officers, Court appointed Special Advocates (CASA) and the Citizen Review Board (CRB) staff and volunteers.

Resource material, including updated tribal listings, tribal contact persons, DHS field ICWA liaisons and management staff, and other ICWA related resources is posted on the DHS Policy Website, allowing more immediate access to information for workers and supervisors. In addition, an annual ICWA conference, a DHS and Tribal co-sponsored event, is held every fall to promote collaboration, relationship building, provide additional training, and to increase awareness of ICWA compliance procedures. The ICWA Manager provides on-going consultation on ICWA issues and consultation on complex ICWA cases, CAF policy and procedures. The ICWA Manager also provides consultation with the Attorney General's office. The ICWA Manager is the tribal liaison in Children, Adults and Families (CAF) for all tribal issues and communication between the state office and the Oregon tribes.

## Policy

OAR 413-070-0170 ICWA Procedures at Initial Contact

## Potential Outcomes

Our goal is to enhance access to culturally specific resources for Indian children and their families.

## Method of Measurement

- Activities/training by the ICWA Manager
- Child and Family Services Review (CFSR- ICWA- related data)
- Other Data Sources

## **2. Notification of Indian Parents and Tribes of State Proceedings Involving Indian Children and Their Right to Intervene**

### Focus

DHS Policy identifies a process to assure notification to tribes of a potential tribal child in custody. ICWA agreements address the need to increase the efficiency and speed of notification.

### Policy

OAR 413-070-0210 Administrative rule outlines the process for notification of Parent or Indian Custodian, the tribe and Bureau of Indian Affairs (BIA).

### Potential Outcomes

DHS continues to work toward an expedited process for identifying ICWA cases and identifying culturally appropriate services and resources. Within the context of “a child’s safety is the paramount concern,” the initial and desired goal is to prevent the removal of Indian children whenever possible. For Indian children who come into care, the goal is to provide active efforts to reunify Indian families. If these active efforts and services do not result in reunification, other permanency goals are established, in consultation with the child’s tribe to the extent possible, to identify an alternative permanency plan within the federal Adoption and Safe Family ACT (ASFA) and ICWA laws and guidelines.

## **3. Special Placement Preferences for Indian Children**

### Focus

DHS/CAF recognizes the need to improve the availability of Indian foster homes throughout the state. A Native American agency in Portland contracted with DHS in the development of strategies to improve the agency’s recruitment and retention

of Indian foster homes in the Portland Metro area. Oregon honors tribally licensed certified or designated foster homes. Children, Adults and Families' (CAF) more recent foster home licensing standards were developed with tribal representation and input as part of the process. Two tribal Directors are participating on the Residential licensing work group. One tribal representative is participating in the Adoption Process Improvement work group. The ICWA Manager is on a work group with the Child Welfare League of America (CWLA) and the National Resource Center on Foster Care and Permanency Planning for the Recruitment and Retention of Native American Foster/Adopt Providers tool kit developed for states, tribes and private child placing agencies.

## Policy

OAR 413-070-0220 Placements of Indian Children

## Potential Outcomes

Tribal consultation to help identify other specific measures for improving compliance.

## Method of Measurement

- Number of Indian children in Indian Foster Homes
- Number of Available Indian Foster Homes
- Number of Indian children in Relative Homes

## **4. Active Efforts to Prevent the Breakup of the Indian Family**

### Focus

ICWA requires that “Any party seeking to effect a foster care placement of, or termination of parental rights to, an Indian child under State law shall satisfy the court that active efforts have been made to provide remedial services and rehabilitative programs designed to prevent the breakup of the Indian family and that these efforts have proved unsuccessful.” This means DHS must make active efforts to provide appropriate services subsequent to a Child Protective Services (CPS) assessment and before a decision is made to place an Indian child out-of-home. This does not preclude the need for emergency removal to prevent imminent physical damage or harm to a child. Active efforts must also be made

when a child is taken into custody throughout the life of the case. Case records should document the active efforts which have been made, as well as court and CRB active efforts findings.

An “Active Efforts Guiding Principles and Expectations” document was developed in a cooperative effort between the federally recognized Tribes of Oregon, DHS, and the Citizen Review Board (CRB). Training for the use of this document and guidelines continues to be provided through out the state. The ICWA manager provided training on the document at the Alaska ICWA conference in December of 2005.

## Policy

OAR 413-070-0160 Remedial Services

## Potential Outcomes

Provision of “active efforts” helps to focus attention on preventing placement, reuniting Indian families and/or helping to achieve permanency for Indian children.

## Method of Measurement

- Permanency data for Indian Children.
- Statewide training
- Quality assurance of ICWA compliance

## **5. Use of Tribal Courts in Child Welfare Matters; Tribal Right to Intervene in State Proceedings or Transfer Proceedings to the Jurisdiction of the Tribe**

Transfer of jurisdiction, or establishing jurisdiction in tribal court, is the preferred course of action and is in the child and tribe’s best interest. For tribes that have a tribal court, a barrier has been lack of funding and resources to effectively serve children in foster or other out-of-home care.

When an Indian child is identified by DHS, the agency contacts the child’s Tribe. DHS policy and practice require consultation with the Tribe as to what is in the best interest of the child. The Tribe and Tribal Court make the decision to transfer jurisdiction or leave the child in the state’s custody. DHS utilizes the appropriate

State or Federal funds to facilitate sending the child home as part of the transfer of jurisdiction process.

DHS notification to a tribe about a child being taken into care includes the information about the tribe's right to intervene. Subsequent notices also include information about the right to intervene and transfer of jurisdiction.

Oregon has addressed some of the issues regarding lack of funding and resources for the Oregon tribes with agreements in the areas of: IV-E Foster Care, System of Care and Social Services Block Grant (Title XX).

## **ADDITIONAL INFORMATION**

### **Access to Services/Resources**

CAF continues to work with tribes to improve compliance with the Indian Child Welfare Act of 1978. While significant progress has been made in many areas, barriers remain in tribes' ability to serve their own children in foster care and other out-of-home care. For example, in some situations, transfer of jurisdiction, or establishing jurisdiction in tribal court, is the preferred course of action and in the child and tribe's best interest. For tribes that have tribal courts, a barrier has been lack of funding and resources to effectively serve children in foster or other out-of-home care. The State and Tribes have identified the recruitment and retention of Native American foster homes as a challenge. In the past Oregon contracted with a native non-profit to work on this issue and provide recommendations. DHS and the Oregon tribes are working on this issue and will implement changes in order to better serve Indian children in state or tribal custody.

Statewide issues of ICWA training and liaison roles remains a challenge due to staff turnover.

### **ICWA Case Review**

ICWA notification and case consultation by the State is strong but continued improvement may always be made. The Oregon tribes have identified "non-active efforts findings" as an issue that concerns them. While some of the assumptions are subjective, the data is being compiled on all ICWA cases and notification to SDA managers is now required within 24 hours of all findings. A monthly voluntary case review team and tool has been implemented to assure ICWA

compliance and recommendations of culturally competent resources for caseworkers and supervisors. The case reviews have been successfully implemented in the Metro area, with time slots filled each month. Supervisors have also found the case reviews to be helpful since the review team is made up of experienced and knowledgeable ICWA liaisons.

In May 2006, a modified Child and Family Services Review instrument was piloted in the ICWA unit at Midtown Branch in Multnomah County. The modified instrument, which was adapted from instruments being used in Idaho and Minnesota, includes all of the same components from the standard CFSR instrument, but has additional questions relevant to ICWA.

### **Access to Information**

Processes and accessibility to information is an identified issue for the Oregon tribes. Many of the programs in CAF have added the tribal directors to list serves that provides extensive information regarding policy, resources, training and meetings.

### **FACIS Access**

Tribal access to the state Family and Child Information System (FACIS) was implemented in 2005. Group and on-site training is on-going for the Tribes. Access to the SACWIS system provides the Tribes with information and screens that will meet their needs and reduce the need to develop a system that is a stand-alone. Access to SACWIS had been identified as high priority for DHS and meeting this goal has been a major accomplishment for DHS and the Tribes. As the State develops and implements its SACWIS system, the Oregon Tribes will be consulted.

A review of data, which is available in the automated systems, has been identified and reports are distributed at quarterly meetings. While the data is limited in scope in regards to compliance with ICWA it does provide a limited statewide picture. Additional assessment and development of data is being addressed to assure ICWA compliance.

## **Child Safety & Risk Assessment Curriculum Train the Trainers**

The resource center on Child Maltreatment “Action for Children” has developed a tribal training curriculum and provided a consultant to DHS, PSU and the Oregon tribes to further develop the curriculum and provide a “Train the Trainers” in 2006. DHS and Tribal staff will be partnered as trainers. They will commit to one regional training a year for local DHS and tribal staff. The PSU Partnership is also represented on the curriculum committee which has completed a crosswalk of the state Guided Assessment Process (GAP) system and the tribal training curriculum to identify areas that may differ. The overall child safety and risk assessment curriculum is similar with some language differences. The enhancement of the curriculum is to fit within the Oregon Tribal communities with an emphasis on the culture, traditions and resources of the Oregon tribes. The national resource center has also completed a statewide evaluation and recommendations of Oregon CAF.

## **Native American Youth Independent Living (NAILP)**

The Native American Youth Independent Living conference will be held in August 2006, in collaboration with DHS, Oregon Tribes and the Oregon Tribes prevention programs. An opportunity arose to open the conference to any native youth through the Tribes prevention programs to address the challenges all native youth face. DHS and the Tribes see this as a way of being inclusive instead of targeting only the NAILP participants. This also provides an opportunity to enhance the conference with national native youth consultants and facilitators.

Access to ILP resources is available to the Oregon Tribes; one Tribe has an active ILP program.

## **Policy**

ACYF-CB-PI-02-05 Program Instruction for Title IV-B includes a requirement that the plan contain “. . . an update on the specific measures taken by the State to comply with the Indian Child Welfare Act" (ICWA). (See section 422(b) (11) of the Act.) OAR 413-070-0130 Placements of Indian Children.

## **Oregon Tribal Child Safety and Risk Assessment Training**

The Oregon tribal/state Indian Child Welfare advisory committee co-hosted the Oregon Tribal Child Safety & Risk Assessment Training on April 12-13, 2005, at

the Spirit Mountain Casino & Hotel in Grand Ronde, Oregon. The focus was on child protection and safety of at risk children and families.

The training was in collaboration with the Oregon Department of Human Services and the Grand Ronde Tribe, Portland State University Rural Training Grant, and Action for Child Protection, Inc., for the National Resource Center for Child Protective Services (NRCCPS). A nationally-known resource center consultant facilitated the training.

Upon completion of the training, a planning committee was established for the “Train the Trainers” to provide our own native trainers and to enhance the curriculum to fit within the Oregon Tribal communities, with an emphasis on the culture and traditions of the Oregon tribes.

### **ICWA Procedures Manual**

The ICWA Manager is responsible for writing the ICWA procedures manual that will be implemented in 2006 as part of the CAF procedures manual. A four person work group representative of the state is working on the manual, which will be reviewed by the Oregon tribal/state advisory committee. Upon finalizing the ICWA procedures, training will be held with practice consistency and compliance throughout the state as an outcome.

### **b) Coordination with Tribes Regarding Section 422 Protections**

*A description of the understanding, gathered from State consultation with Tribes, as to who is responsible for providing the protections for Tribal children delineated at section 422(b)(10) of the Act, whether they are in State or Tribal custody.*

The federal Indian Child Welfare Act (ICWA) and Oregon statutes, administrative rules and polies establish the requirements for provision of services to eligible Native American children and families. ICWA applies to all eligible Indian children from the point of initial involvement with DHS. When children who are being assessed and/or served by tribal welfare services, the federal Indian Child Protection and Family Violence Prevention Act (PL 1-1-630) applies. Outlined below is a summary of DHS and Oregon tribe's efforts to comply with ICWA.

In addition, consultation with the Oregon Tribes about coordination with Tribes regarding the Section 422 Protections for Indian Children, whether in State or Tribal custody, has been addressed through a number of processes. The "Guiding Principles of Active Efforts Expectations" document, quarterly ICWA liaison tribal/state meetings, pilot Quality Assurance for ICWA compliance, local Tribe and SDA protocol and process of cross reporting, case consultation of children in state or tribal custody. The Tribal/State Advisory committee is responsible for identifying the protocol and process through ICWA and Title IV-E government to government agreements. Consultation with the Oregon Tribes occurred in a number of forums throughout 2005, including Quarterly Advisory meetings, SDA/Tribal monthly meetings, ICWA liaison tribal/state quarterly meetings, the Title IV-B plan is reviewed and identified goals updated at the Tribal/State Quarterly Advisory meetings and teleconference consultation meetings.

The value of consultation with the Oregon Tribes is not a one time occurrence but a process of on-going consultation throughout the year which is inclusive of Tribal representation through numerous forums.

The Tribal child welfare agency takes responsibility for care and placement of children in the custody of the Tribe; the State child welfare agency takes responsibility for placement and care of Tribal children in the custody of the State.

The State maintains an information system with all of these capabilities for all children in the custody of the State, including Tribal children. When a child in the custody of a Tribe with an approved Title IV-E agreement is determined Title IV-E eligible, that child is also entered into the State's information system. Tribal children in the custody of a Tribe with an approved Title IV-E agreement who are found ineligible for Title IV-E are tracked in the Tribe's own information system.

The State maintains a case review system for all children in the custody of the State, including Tribal children. Title IV-E eligible children in the custody of a Tribe with an approved Title IV-E agreement are also tracked through the State's case review system, however, the administrative reviews and permanency hearings are conducted through a Tribal Court.

The State child welfare program provides a full range of services designed to reunite children with their families, when it is possible to do so. When reunification is not possible, services are geared towards locating and implementing an alternate permanent placement plan for the child. For Tribal

children in the custody of the State, the State takes responsibility, in full consultation with the Tribe, for providing these services, developing and implementing a permanency plan for the child. When the child is in the custody of a Tribe, the Tribe is responsible for providing these services.

The Tribal child welfare agency is responsible for providing pre-placement preventive services to Tribal members. The state agency is responsible in providing “active efforts” to prevent the removal of Indian children and reunification with family if possible. Volunteer services are also provided by the State and Tribes.

### **3. Collaboration**

#### **a) Coordination and Collaboration Efforts**

*Describe activities in the ongoing process of coordination and collaboration efforts conducted across the entire spectrum of the child and family service delivery system. This should include shareholder or partner involvement in the review of progress made and updates for the coming year.*

CAF Child Welfare coordination and collaboration efforts begin with peers and supervisors at a branch or central office level and continue throughout the organization and at all levels. These efforts include, but are not limited to:

- Community Partners
- Oregon Tribes
- Department Clusters (i.e., Self sufficiency (SS), Seniors and People with Disabilities (SPD), and Mental Health)
- The State Courts
- The Foster Parent Association
- The Juvenile Rights Project
- ACF Region X staff
- Program Staff from other Region X states (and other neighboring states)
- National Resource Centers
- Numerous Advisory Committees

Each writer involved in the preparation of this report has documented coordination and collaboration efforts specific to their program area throughout this report.

## **b) Collaboration between the State Agency and the State Courts**

*Provide a description and evidence of collaboration between the State agency and the State courts in developing and/or implementing State plans or ACF-approved PIPs, as well as a plan for future activities between the State agency and State courts.*

The CAF Administrator of Safety and Permanency is a member of the Juvenile Court Improvement Project Advisory Committee. In this capacity, the member provides input, recommendations and action review regarding the Oregon Judicial Department (OJD), Juvenile Court Improvement Project (JCIP) Strategic Plan.

Board members are currently participating in federal conference calls related to increased federal grants for JCIP. These grants will focus on training and data collection for evaluation.

Distribution of these funds will be done through the recommendation of the board.

### **Other Collaborations**

Funding is provided through a Children's Justice Act (CJA) grant for the Annual Judges Conference on Permanency. The Child Welfare Assistant Director provides training and information each year.

Child welfare staff participate in a workgroup initiated by the Chief Judge of the Court of Appeals to look at options to reduce the length of time to a finding on a Termination of Parental Rights appeal.

Local Service Delivery Area (SDA) Managers meet regularly with local judges to identify and discuss issues of concerns, such as systems.

#### **4. Annual Progress Report for CAPTA**

**CHILD ABUSE PREVENTION  
AND TREATMENT ACT**

# CAPTA FUNDED PROJECT PERFORMANCE REPORTS

## COMPLETED PROJECTS

### “Reunited”- A Video for Child Welfare Families

Section 106(b)(2)(C)(i), (ii)	CPS Areas 3, 12, 14	CFSR Items 4, 18	Rural/Community Initiatives
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### Project Description

This project focused on parents entering the DHS child welfare system who have been identified as needing addiction treatment or recovery support services. This project created a videotape/DVD that speaks directly to addicted parents entering the child welfare system. It is designed to enhance the working relationship between the individual caseworker and family with the ultimate goal of assisting families in making the life changes necessary to keep children safe.

### Overview

There is often a critical lag time between a child’s removal from their home and the time it takes for a parent to “engage” with child welfare, treatment programs, and the court system. Due to burgeoning caseloads in courts, DHS, and treatment programs, parents often don’t get truly oriented and engaged in services for months. In many cases drug effected parents do not have the cognitive capacity to understand the complexity of all the systems they must navigate. They also do not fully understand the process or what is expected of them. Additionally, they often are in denial about their situation.

The video highlights recommendations from child welfare staff, attorneys, judges, and treatment staff. The video contains comments from parents who initially lost custody of their children but eventually were reunited and able to leave the DHS system. In addition there are comments from children who were victims of abuse and neglect due to parental alcohol and drug abuse. A survey was produced to measure the response of clients, caseworkers, and treatment professionals who view the video or work with clients who view the video. This survey will record the response of clients to different portions of the video, and their overall rating of the usefulness of the video for enhancing the working relationship between the

client and DHS.

The contractor established a focus group composed of representatives from treatment programs, DHS child welfare staff, alcohol and drug trainers, and the recovering community; especially parents who have been involved in the child welfare system and lost custody of their children due to their substance abuse. This group has been involved with the development and editing of the video since the project's inception.

### **Outcomes**

The 8-minute video was compressed on a CD. The video covered issues such as myths about the child welfare and court systems, importance of setting goals, feeling overwhelmed, how to stop being a victim, the importance of honesty, and how to work with foster parents. The video was distributed to all of the child welfare offices and alcohol and drug treatment providers in Oregon.

#### **Migrant/Seasonal Head Start: Training Curriculum Development for Recognizing and Reporting Child Abuse and Neglect**

Section 106(b)(2)(C)(i), (iii)	CPS Area 1, 8, 11, 12	CFSR Items 14, 17, 18	Rural/Community Initiatives
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### **Project Description**

The focus of this project was the recognition and reporting of child abuse and neglect by child care providers and Head Start program staff. The project modified the existing state Recognizing and Reporting Child Abuse and Neglect (RRCAN) curriculum and reproduced an enhanced training document that included culturally specific scenarios and a focused look at statistics and data for the migrant and seasonal population. The enhanced curriculum was disseminated through a “train the trainers” approach utilizing staff that is currently delivering this training to child care workers. In addition the enhanced training curriculum was made available to members of the training structure for the childcare provider system including Portland State University, Center for Childhood Care and Education, the Oregon Child Care Resource and Referral Network, Oregon Child Development Coalition, and other Head Start programs throughout the state.

## **Overview**

Currently throughout Oregon there are two-hour Recognizing and Reporting Child Abuse and Neglect (RRCAN) training workshops being conducted for current and potential child care providers. This training outlines the nature and content of Oregon laws in child abuse reporting. The training is developed to follow the content of the DHS-Child Welfare publication, "What You Can Do About Child Abuse". Many childcare workers and Head Start staff who provide services to children from Latino families, especially those with parents who are migrant and seasonal workers, found that the RRCAN training curriculum did not address all of the issues encountered in working with these families. Migrant and seasonal families are highly mobile and experience both linguistic and cultural barriers in areas such as discipline, child supervision, and other general child welfare concerns. Major efforts were needed to develop more linguistic and culturally relevant information in dealing with these cultural differences.

A multi-agency planning committee has been meeting on a regular basis since October 2004 to guide the development of the curriculum and the training of trainers. The committee includes representatives from the Oregon Child Care Division, Oregon Child Development Coalition, DHS child welfare, county health departments, and Portland State University. The group has selected a contractor to develop a revised curriculum that present information on the duties and responsibilities of child care providers to make reports on suspected child abuse and neglect in a manner which will recognize and address the differences in the cultural needs and barriers of the Latino community.

The curriculum was developed using the "popular education model" which includes opportunities for group work, specific activities, handouts, demonstrations, discussion and questions.

## **Outcomes**

This project was presented at the National Latino Head Start Conference. Feedback was taken from Latino Head Start programs from all over the United States and was incorporated in the curriculum design. There have been several presentations of the curriculum to obtain feedback before finalization. On April 4, 2005, eleven parents on the Oregon Child Development Coalition were given three hours of training on the RRCAN curriculum. It was also presented at an outside agency in California on April 12, 2005, for soundness and cultural content.

**Curriculum for Parent-Child Interaction and  
Development in a Residential Treatment Facility**

Section 106(b)(2)(C)(i), (ii)	CPS Areas 3, 7, 12, 14	CFSR Items 17, 21, 23	Positive Youth Development
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**Project Description**

The Salvation Army White Shield Program designed a program to serve severely emotionally disturbed, pregnant girls/mothers and their children.

Part One of the project focused on infant and toddler development. Approximately 99% of the infants and toddlers attending White Shield’s on-site Early Intervention Center exhibit significant developmental delays. The goal is to provide skill development across all developmental areas (cognitive, motor, adaptive, language, and social-emotional) in toddlers to increase the chance that these children will continue with normal development. One of the approaches is an integrated mother-child curriculum that promotes both child and parent development in the crucial inter-related areas of social-emotional, language and communication skills. This type of interaction will increase mother/child attachment and decrease the risk of child abuse and neglect.

Part Two focused on parenting skill development in teen mothers with the goal of promoting healthy mother-child attachment and interaction.

**Project Overview**

The Salvation Army White Shield Program has contracted with the State of Oregon since the mid 1970’s to provide a wide range of services for emotionally disturbed, or behaviorally acting out, female adolescents who are under the age of 18 at the time of admission, are pregnant or parenting a child under the age of three, and have been determined to be eligible for Behavioral Rehabilitative Services.

Girls stay in the program for up to two years with an average stay of one and a half years. Services include, but are not limited to, individual and group skill building, individual and group counseling and parent education. Aftercare services are provided to each client for one year following discharge to prevent relapse, achieve independent living and ensure the continued health and safety of their child.

## Outcomes

The goal of interrupting the cycle of abuse and neglect through specific activities to enhance attachment and bonding has been the focus of the following programs which have been implemented during this project:

1. **Parenting Class:** During parenting class the mother is given instruction on how to do descriptive talking, how to be at the level of the child and to play at the child's pace. The class starts with a period of emotional regulation to teach the mothers how to calm themselves before interacting with their children. A total of 15 mothers and 17 children actively participate in this program component. Some of the changes observed in the mothers who have participated are a calmer approach and moderated voice tone when playing with their children. Four of the young mothers have actively sought to have the father of the child attend parenting classes to receive the same information. This has never happened before in this program. Another new reaction by the mothers is a request to observe their parenting by being video taped.
2. **Activity Bins:** The bins were developed to enhance fantasy play and encourage development of fine motor skill in the young children in the program, The children are encouraged to self-select an activity from a designed bin. Bins are rotated to stimulate interest and for novelty.
3. **Music Groups:** Weekly attendance has averaged 11 mothers and 12 children participating. The goal is 100% participation for the entire 50 minutes. Mothers' attendance has increased to about 80% since the program began.
4. **Book Babies:** This is a 30-minute event provided by the Youth Librarian from the neighborhood branch of Multnomah County. It is a participatory event, led by the Librarian, between mother and child. The expectation is for the mother to supervise her child during the event and to encourage her child's participation. There has been a significant overall increase in attentiveness by the mothers to the child during the activity. This past month mothers and children were sitting and waiting expectantly as the librarian prepared to begin. During the event mothers supervised appropriately and encouraged participation of their child or children.

5. **Photography:** As part of a larger project, mothers are being asked to photograph their children randomly at play and in posed shots. Mothers were also photographed with their child. Mothers have been delighted with and anxious to participate. They continue to ask to work on this activity. One of the goals of this project is to help the mothers learn to recognize, identify and respond to their child's cues and communication styles.
6. **Infant massage:** Infant massage is offered weekly. Mothers' who have completed their mandatory requirements are choosing to continue to come to group and model for the newest members.

**Resource and Assessment Specialist Position**

Section 106(b)(2)(C)(i), (ii)	CPS Areas 1, 3, 7, 12, 14	CFSR Items 17, 18	Rural/Community Initiatives
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**Project Description**

There was a delay in the implementation of this project due to several changes that needed to be made to original project proposal. Originally the Resource and Assessment Specialist (RAS) was going to be stationed at the juvenile court to aid in eliciting referrals from the District Attorney's office. The focus of this position was to assess referrals received from the Court and Child Welfare on high risk families, develop recommendations and help the families access needed services.

**Project Overview**

The RAS focused on serving families who are involved with the child welfare system because the parent's alcohol and/or drug use endangered their child(ren). Since a significant number of families are in the child welfare system due to alcohol and/or drug use, there was a particular focus on families with young babies, young mothers, or young families with multiple siblings. The RAS contacted families early in their involvement with child welfare and provided health, social and developmental assessment of caregivers and children, most often in their home. The RAS visited families one to four times and remained in close contact with families and their caseworkers throughout this process. Appropriate community referrals were made and the RSA monitored families to ensure follow-up. The focus of the referrals was to locate long-term sources of information and

support that will remain with families after their involvement with child welfare ends. At the end of the assessment period, all assessments and referral records, including a summary of visits, areas of strength and concerns, and suggestions for next steps was given to DHS and the family. The RAS also provided information to or attended family meetings initiated by child welfare. The position did not provide ongoing case management services as originally envisioned in order to allow more families to be reached by this project. Also the amount of time allocated for this position was changed from .625 FTE to .50 FTE. This was done to allow an hourly reimbursement more in line with the skills and abilities required by this position. Following an extensive recruitment, an experienced Registered Nurse was selected to fill this position. She had extensive public health nursing experience and was a member of the Family Support Team in Clackamas County providing services to child welfare families with alcohol and other drug issues.

The contract with the Resource and Assessment Specialist began on March 26, 2005. During the time period from the contract initiation date and May 1, 2005, referrals were received by the RAS for nine families composed of 25 family members. Eleven visits were made to members of four families. Contact was made with an additional four families with appointments scheduled. One family was not located. The RAS attended meetings with DHS staff, drug court staff and members of the Addiction Recovery Team to increase awareness of the new program. She also developed a flyer describing the role of the RAS and how to make referrals.

## **Outcomes**

This flyer has been distributed to all DHS caseworkers. The RAS made and followed up on referrals to drug court, low-income housing, Oregon Health Plan, DHS Self-Sufficiency, Lifespan Respite, medical care, Early Intervention, Metro Childcare, Healthy Start, and Clackamas County Health Department. The Resource and Assessment Specialist continuously researched new resources and will be attending the Clackamas County Social Services Information and Referral monthly meetings.

## Grant County Wraparound for Community Supports

Section 106(b)(2)(C)(i), (ii)	CPS Areas 1, 3, 7, 12, 14	CFSR Items 4, 14, 16, 17, 18, 21, 22, 23	Rural/Community Initiatives
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### Approach

Human service agencies and community partners throughout Grant County, a remote and isolated region of eastern Oregon, identified the need to change their countywide system for providing intervention and treatment services for high-risk families. The consensus is the overall approach had been one of crisis management, treating symptoms and rotating people through one program after another without any cohesive plan for supported, measurable and positive outcomes. Following a review of various models and best practices for working effectively with families, wraparound was identified as the most effective service model for meeting the community needs in Grant County. Wraparound is a treatment approach that identifies the community services and supports a family's needs and provides them as long as they are needed.

It is a practice shift in working with troubled children and families from an agency-based approach to a community wide process that develops long-term supports which may lead to healthy families making healthy choices.

Using the Families First facility (a house) as a non-stigmatizing venue for families and Families First as the lead organization, the project was designed to expand the Family Decision Meeting process into a true wraparound model of community based treatment plans that identify all of a family's needs and issues. Together with the family, a total program of community supports will be designed to support the family for an extended time period in their efforts at wellness. Families First, upon receiving a referral from DHS involving removal of children, referral for Community Safety Net, or an unfounded case of neglect or abuse where high concern remains, will contact the family and offer them the opportunity on a voluntary basis to receive wraparound services. If the family accepts this program, a meeting will be held with the family and appropriate community partners to develop a family plan. The plan will identify measurable outcomes. Involved community partners will meet on a monthly basis to assess the progress of the family and refine the delivery of services to meet emerging needs. The family will be involved in any discussion and decision to make changes to the plan. The family may also request a meeting with the partners to request changes to their plan. The partners will stay with families from three to five years providing the identified

services and supports. Wraparound services will be considered successful when the partners have engaged families in the process and kept them engaged through completion of the family plan. It is expected that the project will serve up to six families of varying size during the first year of the program. Funding will be used to provide a .75 FTE Wraparound Resource Facilitator, training in the wraparound model for all community partners, and assessments on all family members enrolled in the program.

## **Accomplishments**

One of the first goals of the project was to provide intensive training on the wraparound model to professionals and volunteers throughout the county who work with high-risk families. The initial funding of \$3900 from the CAPTA grant was increased to \$7,400 through a grant from the Grant County Department of Human Development (Mental Health). In addition the trainers reduced their usual fee by \$7,500. Vroon VanDenBerg, LLP, national trainers from Parker, Colorado, provided the training for this project on October 11-12 and 25-26, 2005. They provided a series of three trainings: the first day, which was attended by 45 community partners and volunteers, was a Community Wraparound Day to help the larger group understand the history, principles, research, and steps of the wraparound process. A two day session to provide an intensive "101" training to a smaller group of implementation staff was attended by 18 community professionals each day. Twenty-nine managers attended a third one-day session focused on upper management and supervisors on funding, policy, and coaching processes. Following the community wide training, an advisory board of community partners was established, project staff hired and volunteers recruited. The project developed a referral process and did outreach to community partners with a special focus on the schools. There are currently two families enrolled in wraparound services with family support teams in place.

## **Outcome**

The mental health agency in Grant County has now adopted the wraparound approach in providing services to all families enrolled in their program. This serves to expand wraparound services to additional families throughout the county.

Through this CAPTA grant a remote, isolated community in eastern Oregon has been able to develop and implement a comprehensive service model for working with high risk children and their families which prevents child abuse and neglect

and provides the long term support necessary for these families to be successful. Grant County is focusing its efforts on families at the highest risk. Services may be provided to families on a voluntary basis, referred directly by the court and by referral from Child Welfare.

**Baby Link**

Section 106(b)(2)(C)(i), (ii)	CPS Areas 3, 12, 14	CFSR Item 4, 17, 21, 22, 23	Rural/Community Initiatives, Responsible Fatherhood
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**Approach**

This project funded a Family Advocate position to provide intensive home visitation and case management of 40 final trimester or delivering women identified as high risk due to a past history with child welfare. The infant and other children ages 0-4 in her care were to be enrolled. Teaching and education were also available to the father of the baby or significant other, if he chose to participate. The current child welfare referrals for high-risk pregnant women are case managed by a maternal and child health nurse. However, state law will not allow child welfare involvement during a pregnancy, even with custodial involvement with a sibling, until the event of a viable birth. Baby Link closes the dangerous gap for high-risk environments, improving parent capacity for the unborn.

According to 1999 research from the University of Rochester, home visitation has proven to increase a mother’s connection to the community and to remain in medical services long after a case is closed. It also reduces founded cases of child abuse and neglect, decreases foster care placement, and decreases maternal substance abuse and criminal involvement.

**Accomplishments**

This project began by meeting with community partners to build a collaborative working relationship. Relationships among the key community agencies were formed especially among Jackson County’s Family Drug Court project, Child Welfare/Safety Net, Self-Sufficiency and Alcohol and Drug (A&D) treatment providers in order to facilitate success for families. The family advocate has received a total of 42 referrals for services since the inception of the project. The family advocate has a current, active caseload of sixteen families who are receiving intensive case management services. This includes a family assessment by a nurse in the Maternal/Child Health Program, development of individual case plans to

provide a team approach to the multifaceted issues faced by each family, and implementation of the family plan by the Family Advocate, utilizing the nurse as needed. Of the families served by this program, all had significant risk factors that included primarily mental health issues or drug and/or alcohol abuse. Many were involved with child welfare or Family Drug Court. The challenges faced by these families remain constant: poverty, significant parenting deficits and involvement with the legal and social services system. The most significant barrier during the project has been working with pregnant women who had previous terminations of parental rights. This presented obstacles in preparing women for post-partum with their babies when, in all likelihood, the child they were pregnant with would be removed by child welfare. When the original proposal for this project was designed, it wasn't anticipated how integral involvement with the Family Drug Court would be. As women are involved in family court and become pregnant with a subsequent child, a referral is automatically made directly to Baby Link.

**Outcome**

Baby Link has provided a valued service to women who have other children in substitute care through the child welfare system, are pregnant and trying to re-integrate their children back into their care. The Family Advocate has provided the much needed support, intensive visitation, and parenting skills to families being reunited. Child welfare in Jackson County is key to referring to Baby Link and relies on the Family Advocate for input for case plan development.

**Improving Tribal Child Welfare Training through  
Implementation of the Tribal Training Consortium**

Section 106(b)(2)(C)(i), (ii), (iii)	CPS Areas 1, 3, 6, 7, 12, 14	CFSR Items 14, 17	Rural/Community Initiatives
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**Approach**

In 2004 the Oregon Tribal Training Institute was established to plan, develop and provide tribal social workers, supervisors, and court staff with specific hands-on child welfare training in the following areas:

- Case management, case monitoring and delivery of services and treatment.
- Research-based strategies to promote collaboration with families.
- Legal duties and personal safety for caseworkers.

- Intake, assessment, screening, and investigation of reports of child abuse and neglect.
- Tangible activities to promote safety, permanency and well being of children.

Establishment of the Oregon Tribal Training Institute was the first step in addressing the challenges of systems change through an approach of teamwork, training and strategic thinking. One of the strategies of the Institute was to familiarize and encourage the tribes to take advantage of training and technical assistance opportunities through the National Resource Centers.

The first Tribal Training Institute was held in May 24-25, 2004 and was supported in part through Children's Justice Act (CJA) funding. The training was very successful with 40 tribal members in attendance from the 9 federally recognized tribes in Oregon. CAPTA funding was requested to continue the efforts of the Institute by providing funding for two training events in 2005 based on the format of the successful May 2004 training. Plans included again utilizing the resources of the National Child Welfare Resource Centers to provide training workshops on their relevant topic areas. The CAPTA grant funds were to be used to hire training consultants who are Native experts with national recognition for their expertise in child welfare training, as well as providing funding for travel and per diem expenses for tribal members to attend the training.

### **Accomplishments**

CJA funding was used to co-sponsor the Oregon Tribal Training Institute conference held May 24-25, 2004. Other sponsors of this event included Oregon Department of Human Services and four of the National Resource Centers: Family Centered Practice (lead resource center), Foster Care Permanency Planning, Child Maltreatment and Legal and Judicial Issues. The focus of the institute was to provide a 3-day training institute and follow up technical assistance for tribal child welfare staff, child protection teams, court staff and tribal judges.

Some of the workshops offered at the institute included:

- 1) Overview of Indian Child Welfare Safety Decision-Making Curriculum
- 2) The Role of Tribal courts in the Safety, Permanency and Well-Being of Indian Children.

- 3) Protecting Indian Children-Strengthening Indian Communities. Indian Child Welfare Safety Decision Making: Safety Assessment, Analysis and Planning.
- 4) Strengthening Tribal Courts for the Protection of Tribal Children.
- 5) Applying Federal Child Welfare Law in Tribal Child Welfare Systems.

The training received excellent evaluation. There were unexpected cost savings with this conference because tribes were able to pay for their travel and per diem expenses, and the presenters and facilitators were provided at no cost. This savings was used to fund a second follow-up training institute conference on April 12 through April 13, 2005, called the Oregon Tribal Child Safety and Risk Assessment Training. The training was a collaboration of the Oregon Department of Human Services, Grand Ronde Tribe, Portland State University Rural Training Grant, and Action for Child Protection, Inc. from the National Resource Center for Child Protective Services. The consultant providing the training, Pam Bennett from South Dakota, is nationally known for her expertise in Indian Child Welfare issues. There were 33 tribal and community partners in attendance at this training representing each of the nine federally recognized tribes in Oregon. The focus of this training was to provide assistance to the tribes to improve their capacity to implement safety and risk assessments.

## **Outcomes**

CAPTA funding was not utilized during 2004 due to the cost savings from the first two conferences sponsored by the Oregon Tribal Training Institute. The funding was utilized for additional training opportunities for tribal child welfare staff throughout Oregon that support the goals and mission of the Oregon Tribal Training Institute. CAPTA funding was used for:

- Family Group Conferencing Training on June 10, 2005. Dr. Harry Walker, Manager, Maorie Services Department of Children Youth and Family Services in Wellington, New Zealand will present this training.
- Provided specialized workshops at the annual Oregon Indian Child Welfare Conference, September 28-29, 2005.

## ONGOING PROJECTS

### Safety Intervention System Review

Section	CPS Areas	CFSR Items	Rural/Community Initiatives
106(b)(2)(C)(i), (ii),	1, 3, 4, 7	1, 2, 3, 4	

### Objectives

- Define currently recognized national best practices in safety intervention systems for child abuse and neglect and compare with current Oregon practice.
- Provide expert review and assessment of the current safety intervention system in Oregon:
  - ✓ Evaluate the extent to which components of the safety intervention system provide sufficient guidance and support for staff to perform competently.
  - ✓ Conduct an expert comparative assessment of system components related to staff self-assessment.
  - ✓ Identify the extent to which the design of the safety intervention system can be considered to be ahead of, consistent with or behind the state of the art.
- Prepare a position paper on findings and make recommendations for actions to improve Oregon's safety intervention system.
- Present findings and recommendations to child welfare administrative staff and the Oregon Legislature.

### Approach

Over the past year in response to a request from the Governor, Children, Adults, and Families (CAF) developed a Critical Incident Response Team (CIRT) Protocol to guide the Department of Human Services' response to fatality or serious injury cases or other highly concerning events where child abuse or neglect is suspected and there is emerging media or public interest. Almost immediately after the CIRT protocol was developed, it was tested by two high profile cases. Following a review of the findings and recommendations of the CIRT, the Governor requested

the DHS director seek a nationally recognized expert consultant to review and assess the adequacy of the safety intervention approach in Oregon and identify any systemic issues or needed improvement.

The study and expert review was designed and conducted primarily through the resources of the National Resource Center for Child Protective Services (NRCCPS). The contractor providing the services was Wayne Holder, Executive Director for Action for Child Protection. The NRCCPS covered the costs associated with the initial 25 days of the review, while CAPTA funding covered the expenses for an additional 16 days plus related travel and per diem expenses.

### **Accomplishments**

Information was gathered from guided discussions with DHS Administration, the Governor's Office, Child Welfare Advisory Committee, CAF Program staff, Critical Incident Response Team (CIRT) reviewers, field program managers, and staff focus groups. A review was also conducted of the staff self-assessment surveys and child welfare policy, procedures, and training curriculum. The review focused on seven components of a safety intervention system: policy, procedure, staff development, supervision, information system, program management, and quality assurance. Oregon's current practice in each of these areas was compared to national best practice. The review resulted in nine recommended safety intervention system improvement action steps. Overall comments included the fact the study found Oregon's safety intervention system is comparable to the state of the art as it is applied. The approach to safety intervention in Oregon is more similar to what is occurring nationally than different. The work that has occurred to date is a good foundation for further development, and Oregon should enhance what exists.

### **Outcomes**

Oregon is committed to making the changes necessary to improve its' safety intervention system. In his first agency wide communication, Bryan Johnston, Interim Director of the Department of Human Services, listed the following as one of his six primary goals:

“Emphasize our efforts to protect kids and implement the national review done by the National Resource Center for Child Protective Services (NRCCPS) of Oregon's child safety intervention practices and operations.”

Child Welfare management level staff is currently in the process of completing one of the action steps from the review. They are developing a procedures manual which is more specific and provides step-by-step direction as well as direction on safety throughout the life of the case.

CAF may continue to utilize CAPTA funding during the upcoming year to contract with Action for Child Protection or other consultants if technical assistance and support is required to implement the nine recommended safety intervention system improvement action steps.

**Position 1 -- Child Protective Service Coordinator:**

Section 106(b)(2)(C) (ii), (iii)	CPS Areas 1, 2, 3, 4, 6, 7, 8, 11, 13, 14	CFSR Items 1, 2, 3, 4	Rural/Community Initiatives
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**Objectives**

- Provide statewide technical assistance and direction to Service Delivery Area managers, child welfare managers, supervisors and workers as well as community partners on the implementation, management and evaluation of CPS program and practice.
- Evaluate the effectiveness of CPS policy, performance, service delivery and outcomes.
- Develop and establish goals and objectives for policy and training as a part of the CAF CPS program staff and in collaboration with other state agencies.
- Improve communication between the state program office and local service delivery offices.
- Participate in the leadership of the state child welfare founded disposition review process.
- Conduct quality review of CPS/Child Welfare practice, procedure and performance.

- Provide technical advice to child welfare staff, other DHS staff, community partners and the general public on sensitive, high profile and high-risk family abuse situations.
- Provide technical assistance to the state CPS program manager in research, policy and protocol development and legislative tracking.

**Approach**

This project will fund a second 1.0 FTE Child Protective Services Program Coordinator position to ensure the quality and consistency of child protective services practice and policy on a statewide basis. The staff will work in coordination with the current CPS Program Coordinator in CAF administration under the direction of the CPS Program Manager. One of the roles of this position will be to develop and implement strategies for more effective communication between the state program office and child welfare field on child welfare policy and practice issues. This is in line with Wayne Holder’s recent study where he identified Oregon practice of “localizing” policy and practice interpretation as resulting in inconsistency in the delivery of child welfare services. Another key role for this position will be their involvement in the development of goals and objectives for policy and training in collaboration with other state agencies. The position will also allow for increased opportunities to provide quality reviews of CPS/Child Welfare practice, procedure and performance.

**Position 2 -- Child Protective Services Program Coordinator**

Section 106(b)(2)(C)(ii)(iii)	CPS Areas 1, 2, 3, 4, 6, 7, 8, 11, 13, 14	CFSR Items 1, 2, 3, 4	Rural/Community Initiatives
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**Approach**

A permanent, full time position was created in 2001 to ensure the quality and consistency of child protective service practice statewide. The CPS Program Coordinator is located in the central administrative offices of Children, Adults and Families and works closely with the Child Welfare Program Manger.

## **Accomplishments**

Recently the person in this position received the Director's Excellence Award for their work in the development of the Critical Incident Response Team (CIRT) Protocol to guide the Department of Human Services' response to fatality or serious injury cases or other highly concerning events where child abuse or neglect is suspected and there is emerging media or public interest. This position has been very successful in providing more consistency statewide in child welfare practice through extensive development of new or revised child welfare policy, administrative rules and protocols including the following:

- CPS Rules for screening, assessment, DHS/LEA cross reporting, child safety assessment and safety planning, interviewing, child abuse assessment dispositions, and introduction to CPS.
- Protocols for child fatality review and critical incident response.
- Revision of child welfare forms.
- Development of mandatory reporting curriculum and statewide tracking system.

In addition this position works closely with other agencies and community partners representing child welfare on a variety of work groups and committees such as:

- Governor's Council on Domestic Violence
- Juvenile Code Revision Workgroup
- Medical Polices Workgroup
- Mental Health Workgroup
- Methamphetamine Workgroup
- DHS Privacy Workgroup

## ONGOING TRAINING

### 1. Training To Be Provided Under The Grant To Support Direct Line And Supervisory Personnel

Section 106 (b)(2)(c)(ii)(iii)	CPS Areas 6, 7, 11, 12	CFSR Items 1-23	Rural/Community faith based Initiatives
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Oregon is committed to providing information on child abuse and neglect to child protective services staff and community partners through the provision of training on “state of the art” practices; opportunities for networking with other child welfare professionals and experts at a state and national level; and opportunities for child welfare leadership to learn about promising practices and alternate service delivery models, as well as representing Oregon at national conferences and other workshops. Two approaches are used to provide this training.

The first is to train child welfare managers and supervisors who in turn train direct line staff. CPS program managers, supervisors, and consultants are selected to attend various major national and state conferences on child welfare planning and practice issues where training is provided by national experts. Staff who will receive this training are required to share the information with other child welfare workers, DHS staff and community partners at a local and regional level. During the past year CAPTA funding was used for child welfare staff to attend the yearly statewide Focus on the Child Symposium and the annual Child Abuse Summit. The CPS Consultant covering Eastern Oregon was able to attend the statewide 2005 child abuse conference in Idaho utilizing CAPTA funding. The CPS Program Manager attended the 15th National Conference on Child Abuse and Neglect held April 18 to 23, 2005 in Boston, MA.

The second approach to training CPS personnel is to provide training to line level staff at a local or regional level by national or state child welfare experts. An important component of this training is to include community partners in these training opportunities whenever possible to assure continuity and quality of services to children and families. Some examples of this approach include training on:

- The Wraparound service model in eastern Oregon.

- Impact of Neglect on Children by Dr. Bruce Perry. (Nearly 1,000 people trained).
- Ongoing GAP training on intake and screening of child abuse and neglect cases.
- Assessing child safety when someone with a history of child sexual abuse has access to the child.
- Assessing child safety when domestic violence issues are present.
- Revised Child Interviewing Guidelines.
- Parental alcohol and drug issues in child welfare cases with an emphasis on methamphetamine abuse. (500 child welfare staff and community partners have received training since May 2004 to date)

**2. Training To Be Provided Under The Grant To Individuals Who Are Required To Report Suspected Cases Of Child Abuse And Neglect**

Section 106 (b)(2)(c)(ii)(iii)	CPS Areas 8, 9, 11	CF SR Item 4	Rural/Community Initiatives
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Mandatory reporters play a vital role in the safety and protection of children. In FFY 2004 mandatory reporters were responsible for 74.4% of the reports to DHS for child abuse and neglect, with 40.1% of this number coming from schools and law enforcement. The Oregon Revised Statutes require child welfare to develop and make available training material to mandatory reporters. A multi-year project began in 1999 and continues in 2005 to improve the appropriate referral of suspected child abuse and neglect by mandatory reporters. The overall goal of the project has been to work with mandatory reporters by increasing their understanding of the legal mandate to report, providing information regarding the mechanics of reporting, and by sharing how the failure to report affects the child victim, the family, the reporter, and ultimately the community. A secondary goal of this project has been improvement in the number of timely, appropriate abuse reports with accurate information reaching child protective services. The approach used in this project began with the revision of outdated material on mandated reporting,

development of a new video training tool, development of a training plan, and dissemination of information to organizations with employees identified as mandatory reporters. The following steps have been accomplished since the implementation of this plan:

- Revision and updating the booklet: “Recognizing and Reporting Child Abuse and Neglect” in 2003. Printing and distribution of 25,000 copies.
- Rewriting of the booklet in December 2004 under the new title: What You Can Do About Child Abuse and Neglect”. Printing and distribution of 10,000 copies. We are now in the process of reprinting the booklet again. Approximately 4,000 copies of the booklet are requested by agencies and businesses throughout Oregon each month.
- Development of the video: “The Role of Mandatory Reporters in Child Abuse Cases”. This project resulted in the production and distribution of nearly 900 videos to mandatory reporters throughout the state. A cover letter signed by the Oregon State Attorney General, Oregon State Fire Marshall, the Director of the Department of Public Safety Standards and Training and the Assistant Director of Children, Adults and Families and a “What You Can Do About Child Abuse and Neglect booklet accompanied each video. Agencies and organizations were instructed to contact their local child welfare office for a CPS worker to show the video, present materials and to be available to answer any questions.
- Development of a statewide mandatory reporter training curriculum and training registration requirements in April 2005 to provide consistency in mandatory reporter training and to increase awareness of training needs.

A benefit of the training registration requirements will be the ability of DHS to track the number of trainings provided and the type of mandatory reporter receiving the training.

The CJA Task Force awarded a grant to develop and implement specialized training for mandatory reporters of child abuse and neglect. The target audience will be medical professionals.

# **CAPTA PANEL REPORTS**

## **ANNUAL REPORT Multnomah County, Oregon CAPTA Panel May 1, 2005 to April 30, 2006**

### **Panel Members:**

Vivian Ashworth, Multnomah ESD, Department of School Health Services  
Susie Barrios, Intensive Family Services  
Judy Brandel, Multnomah County Health Department  
Kirsten Brown, DHS, CPS Consultant  
Miriam Green, DHS, Multnomah County Child Abuse Hotline  
Maggy Khilnani, Bradley-Angle House/Safe Choice  
Steve Lindeman, Citizen's Review Board  
Suzie Rush, Cascadia  
Ron Schwartz, Portland Police Bureau  
Helen Smith, Multnomah County District Attorney's Office  
Christine Stolebarger, Parents Anonymous  
Ruth Taylor, Morrison Center  
Charlene Woods, Multnomah County District Attorney's Office  
**Panel Facilitator:** Kevin Dowling, CARES Northwest  
**Panel Coordinator:** Shelley O'Brian, CARES Northwest

### **Summary of Multnomah County CAPTA Panel Meetings and activities During 2005-2006:**

#### **August 5, 2005**

On August 5, 2005, the Panel reviewed the past year's meetings via the Annual Report as well as the June 13, 2005, letter to Sharon Bolen outlining ideas generated from the May 19, 2005, practice discussion (Sex Offenders and Children: Assessing Threat of Harm). One suggestion was to develop a reference notebook for caseworkers that included the "top ten" research articles relating to sex offenders and children. Miriam said that she would follow up with Cory Jewell Jensen and Katie Gotch for their suggestions. Sharon said that CAPTA may be able to fund copying costs for the notebook to be distributed to other counties in the state.

Sharon distributed the Executive Summary of Wayne Holder's, "Expert Review of the Safety Intervention System" and the "DHS Safety System Improvement Plan". Miriam explained DHS contracted with Mr. Holder to review DHS policies and procedures and make recommendations for improvement. These recommendations focused primarily on relieving the workload of caseworkers by redistributing non-casework tasks to others, revising the procedures manual so it is clear and precise, and emphasizing the development of supervisors as safety intervention experts.

The group brainstormed topic ideas for the upcoming year. They reviewed the "Findings" and "Next Steps" from the Holder report. Several suggestions for topics were made: continuing the focus on sex offenders having contact with children, domestic violence, staff retention issues, safety planning through the life of a case, threat of harm, and mandatory reporting. The group discussed the idea of focusing on cases that went well to learn from those involved. A suggestion was made to hold CAPTA meetings at different DHS branches, inviting caseworkers, clients and other professionals to present. At the end of the year, our annual report would contain examples of strengths and successes to replicate and build on.

Since a substantial number of Panel members were not present to vote on the topic for this year, the group decided that Kevin and Shelley would draft an email with the ideas/suggestions for next year's topics, send it to the Panel, and request their feedback.

### **October 28, 2005**

Based on feedback from the Panel, on October 28, 2006, Jan Slick was invited to the meeting to review the new DHS Safety Planning Policy (I-AB.5). Jan explained the new policy required the implementation of several new steps upon the establishment of a "safety threat". The policy created the expectation that at "critical junctures" DHS staff are required to contact other community partners who are providing services to the family. A "critical juncture" is defined by the policy as a time when substantial change is occurring within the family. The policy also created a time frame the safety plan should be established and reviewed.

The Panel expressed concern heavy caseloads and lack of supervision for caseworkers could make it difficult to meet the time frames outlined in the policy. One Panel member suggested the large number of policy changes/revisions might impact a caseworker's ability to feel confident about making decisions in regard to

safety. This is particularly concerning for new workers whose lack of experience may not lend itself to intuitive decision-making.

The Panel decided to invite two caseworkers from two different DHS branches to come to a CAPTA meeting to present a case from start to finish. The focus would be on cases that went well, applying the policy to the case and looking at key decision points along the way. One goal of the process was to give caseworkers an opportunity to highlight how the policy works in day to day practice. The group also discussed inviting community partners and possibly parents involved in the cases presented to attend the meeting.

### **December 9, 2005**

Case presentations by Katie Sangster and Deborah Martin were the focus of the December 9, 2005, meeting. The Panel developed a list of questions to help focus the discussion. These included:

1. At which places in case planning did you find yourself at critical decision points?
2. How did you gather and process information to determine the “right” course of action at these junctures?
3. In your review of the new Safety Planning Policy, how might this be additionally helpful to you when making safety decisions?
4. What do you see as potential challenges in the implementation of this policy?

Katie Sangster presented the first case about a 3-year-old boy who had ingested methamphetamine (“meth”). He was placed temporarily with his grandmother while DHS worked with the mother, a recovering meth addict. Safety issues centered around the mother and her addiction. The mother was petitioning to regain custody of the child, but the grandmother expressed concerns to DHS that her daughter was still using drugs. The Panel learned the importance of requesting a person be observed while producing a urine sample for drug testing. In this case, DHS had learned the mother was not being observed while providing her sample. DHS requested she be observed, and the mother tested positive for methamphetamine use.

Deborah Martin presented a case of two children in foster care. The children were removed from the family because of the father’s addiction to alcohol. The father

completed treatment and wanted to regain custody of the children, however, several reports from law enforcement suggested he was still drinking. Due to those reports and a history of domestic violence, DHS recommended the children not return to the home. In addition, the mother was not cooperating with DHS, and DHS was not able to locate other family members.

After the case presentations, the Panel discussed the cases in relation to the new safety planning policy. They agreed the policy seemed to represent “best practice.” There were several questions about the difficulty identifying and monitoring “critical junctures”, especially when they were occurring with regard to the child and his/her temporary environment, as well as the environment where the child may be returned.

One caseworker reported it would be difficult to follow the timelines outlined in the policy due to the above-average caseload of most workers. The Panel thought it would be helpful to assign legal advocates and/or drug and alcohol consultants to cases where necessary. The Panel also discussed the possibility of having administrative assistants on site to help with copying and mailing responsibilities. There were concerns there would not be enough managerial staff to supervise additional office staff. A Panel member suggested interagency forms be standardized to alleviate duplicative paperwork.

### **February 17, 2006**

Case presentations continued at the February 17, 2006, meeting, with caseworker Sarah Fredericks presenting a case about a Russian-Romanian family. DHS first became involved with the case because of concerns of neglect of three children (ages 2, 3, and 4) after their mother left them with a homeless man while she went to work. The children returned home with a safety plan after this initial incident, but eventually were placed in foster care after suspicions of domestic violence, and the mother testing positive for methamphetamines. After two years in foster care, the case was accepted for termination of parental rights. Toward the end of this period, the father began showing progress, the case was transferred to a new caseworker, and that caseworker began engaging the father in services aimed at returning the children to his care.

The group discussed numerous critical junctures in the case and the caseworker’s choice to utilize Team Decision Meetings (TDMs) and meetings with family service providers to determine the course of action. The panel reviewed the Safety

Planning Policy and asked the DHS caseworkers to comment about whether the new policy is helpful in the decision-making process. DHS and the Panel agreed that the specific timeframes in the policy (e.g., “return child and have face to face home visit within 3 days”) in regard to TDMs, return home visits, and consultation with probation/parole were not realistic. In addition to workload impacting the ability to meet required timelines, there may be other reasons to wait. For example, the worker may already be in close contact with those involved in the case, or the family may be in a “honeymoon period” and not at a point to begin identifying or working on current challenges and goals.

After the case presentation and discussion about the Safety Planning Policy, the Panel talked about options for the format of the April 21<sup>st</sup> meeting. It was agreed that a small workgroup would meet to review the discussion and suggestions generated by the past two meetings. The workgroup would draft a list of questions and recommendations with regard to the new Safety Planning Policy and circulate the list via email to other CAPTA Panel members for their comments.

### **April 21, 2006**

Kevin explained the annual CAPTA report deadline was approaching and suggested the discussion questions outlined on the agenda be used as the basis for the report. The Panel members agreed the questions were representative of the discussions generated from the past year’s case reviews.

The group was provided an overview of the action safety intervention model that DHS is working toward. According to Ted Keys of DHS, the new model is based on “precision” and the standardization of risk assessment criteria. The model will assist DHS staff in focusing on safety through the life of a case and will impact current policy.

Kevin asked the group if they wanted to continue the focus on safety planning throughout the life of a case in the next CAPTA grant year, or if they would like to move on to a different topic. The Panel discussed continuing to review DHS safety planning. One idea was for the CAPTA Panel year to focus on the life of a case and the safety planning issues involved. Ten cases could be chosen prior to the next meeting. At the July 28<sup>th</sup> meeting, cases would be presented and safety issues discussed. At each subsequent meeting, the progress of the cases would be updated and safety issues reassessed based on the current safety planning policies. There

was also discussion of coordinating the focus of CAPTA with another child abuse related workgroup in the state (e.g. CJA Task Force). Given the majority of Panel members were not in attendance, a final decision on a topic for next year will be deferred until we are able to have more input.

### **Multnomah County Panel Recommendations for 2005-2006:**

The following recommendations are based on the five CAPTA Panel meetings summarized above. The focus of the meetings was on the new DHS Safety Planning Policy (I-AB.5), with particular attention to activities required at “critical junctures”. We understand that many of these areas were also addressed in the report by Wayne Holder, and that DHS is in the process of working to address and implement policies and procedures as a response to that report.

1. Caseload – We recommend DHS consider how caseloads are defined. Is the number of cases a good measure of workload? Should we also count or report on the number of children on the caseload? Is there a way to capture the complexity of each case, or each child within a case? As we've seen from our case presentations, the number of critical junctures on a case can increase significantly depending on the number of children involved, and the needs of each child.
2. Supervision – We recommend DHS examine the level of supervision available for caseworkers. Is it sufficient? If the supervisor is not available, who does the caseworker consult with for review and supervision (as required in the safety planning policy)?
3. Relationships -- We recommend DHS pay special attention to fostering positive relationships between caseworkers, children, families, and other people involved in cases. The case presentations highlighted the fact that the relationship between the caseworker and those involved on the case (particularly the children and adults in the parenting role) can have a significant impact on case outcomes. What is needed to foster those relationships?
4. Timelines – We recommend DHS examine the timelines in the safety planning policy. Are they realistic or best practice for all cases?

5. Courts – We recommend DHS continue to work with judges and the court system to recognize and support, per the safety planning policy, the caseworker's key role as the decision maker on issues involving the child's safety.

6. Training – We recommend DHS review the process for educating caseworkers about the new policy, based on concerns that staff in DHS branches were unaware of the current policy and the particular timelines associated with it.

The Multnomah County CAPTA Panel values the opportunity to work collaboratively with DHS on keeping children safe in our communities. We would particularly like to thank the DHS caseworkers presenting cases for their time, expertise, and willingness to share the successes and challenges associated with child protection work.

Sincerely,

Kevin Dowling  
Program Manager  
CARES Northwest

**MALHEUR CAPTA PANEL YEAR END REPORT**  
**3/1/05-4/30/06**

Melody Smit, Project DOVE Executive Director

CAPTA Panel Members:

Melody Smit, Project DOVE Executive Director  
Angela Sutton, STAR Center  
Keely Ponce, SART Advocate, STAR Center  
Marivel Jimenez, Project DOVE  
Jerrimi Helmic  
Myrna Anderson, CASA  
Wendy Hill, DHS  
Wendy Bristol, DHS  
Steve Brown, DHS  
Lavelle Cornwell, Ontario School District

This year the CAPTA panel experienced many changes in leadership with the new Executive Director for Project DOVE, Melody Smit, as well as the new STAR Center Coordinator Angela Sutton providing the leadership role for this committee. Later in 2005, Keely Ponce was placed as the new STAR Center Sexual Assault Advocate.

Goals of the CAPTA panel this year included focusing on recruiting new members, building an action plan centered on the community survey which measured child abuse knowledge, conducting outreach and education in our community and input on how to further the prevention of child abuse in Malheur County.

This year we successfully recruited three new members to the CAPTA panel team: Marivel Jimenez, Keely Ponce and Steve Brown.

We also engaged in a widespread outreach and education campaign that included the following:

1 PSA in English and Spanish on the local radio station that aired 180 times, educating the community at large about what constitutes child abuse.

1 billboard in English displayed for 12 months aimed again at the different forms child abuse takes.

A media campaign in the local theater informing the public of Child Abuse Awareness Month and how to contact the proper authorities if they witness child abuse; this ad runs each time a movie is shown in each of the local 8 theaters for 4 consecutive weeks.

In April, Child Abuse Awareness Month, Project DOVE set up outreach tables at the local libraries with Child Abuse Information, Mint Green Ribbons and bookmarks with “101 ways to Praise your Child” on them to hand out.

Project DOVE’s Executive Director, the STAR Center Coordinator and the Children’s Program Manager also attend the Family Violence and Child Abuse Prevention Multi-Disciplinary Team Meetings on a weekly basis.

Based on the findings of the survey conducted last year, the panel is currently discussing an action plan that will address the following recommendations compiled from the survey results.

The recommendations of the CAPTA in order of importance are as follows:

1. Make strong changes in DHS Child Welfare policy and procedure that would allow for earlier intervention and removal of the child from the home when there is findings of child abuse. Also to work on modifying the assumption that the biological parent is naturally the “best” parent for the child, especially when the child is thriving in a foster care home that wishes to adopt the child, and the parent has a repeated history of child abuse, drug and alcohol abuse or abandonment, yet policy states that the child must be reunited with the parent if at all possible within the 18 month time frame.
2. Do outreach and education about child abuse prevention, support groups, and referrals for parental support at Parent Teacher Association meetings.
3. Start a parent mentoring group to provide new or inexperienced parents with a home visitor to allow for parenting skills to be taught in the home, and respite care, as well as a safe place for their children.
4. Trainings with the faith community on child abuse recognition, screening and making appropriate referrals.
5. Utilizing play therapy in the mental health community when parents are ordered to go to counseling so they get hands on skills and mentoring on

how to interact with and enjoy their children in a therapeutic supervised setting where they are using real skills that can be transferred to the home environment with the help of therapist and para-professionals.

6. Better quality screening of potential foster care parents including bringing the name and background histories of potential foster care parents before the Child Abuse Prevention Multi-Disciplinary Team for screening and a team decision on appropriateness for licensure.
7. More parenting classes that are not just preaching to the choir but are required for offenders.
8. More outreach and education efforts to engage the community as a whole, as based on the community survey results, it is apparent that the community still is unaware of the significant problem of child abuse and child sexual abuse in our community, and what referral and protective systems are in place.
9. More funding and resources devoted to prevention and intervention of child abuse service agencies. Staff are consistently overworked, have extremely high caseloads, burn out and this is when children start falling through the cracks.

The finalized action plan will be forwarded as it is completed.

Respectfully submitted,  
Melody A. Smit, Executive Director  
Project DOVE

**Child Abuse Prevention & Treatment Act (CAPTA)  
Jackson County Citizen's Review Panel  
SEVENTH ANNUAL REPORT  
April 1, 2005 through March 31, 2006**

**Meeting Activities:**

This year the Jackson County CAPTA Citizen Review Panel continued their focus on foster care recruitment and understanding the needs of the foster families; reviewing cases that were problematic to the Multidisciplinary Child Abuse Team; supporting Dr Oddo's legislative reform efforts; and promoting child abuse prevention through the "Lifesaver" Newsletter and the Community Sexual Abuse Awareness Trainings.

**Case Reviews:**

In June, Karla Carlson, DHS Intake Supervisor, presented a case for review where a child had been removed and conditionally returned several times to the mother, who was a methamphetamine addict. Although the state recommended the child stay in care, the child was returned to the mother and immediately came back into care. It is the panel's opinion that caseworkers are well trained in doing child abuse assessments and presenting those cases to the court, but sometimes the court lacks sufficient information to make informed decisions. The question was raised about drug testing parents prior to court and a child's return, but it is difficult to get UA results in a short amount of time and some of the tests are very expensive.

What information does a judge need to make better conclusions?

Conclusive drug test results would be helpful. It was recommended that DHS have a Legal Representative at all of the shelter hearings, to present the case in the most effective manner for the judges to make their rulings. DHS does not want judges to rubber-stamp their decisions but it would be helpful if judges had more specific training before doing juvenile case work. Currently, Judges meet with DHS on a monthly basis to discuss concerns.

In September the panel reviewed a controversial case from the Multidisciplinary Team where an offender had disclosed to his attorney and wanted to make a plea agreement. The controversy arose since the District Attorney's Office agreed to a plea prior to contacting the victim/ interviewing the child. The DAs office felt it

was the only way to ensure a conviction, since the offender's attorney would not disclose the name of the victim to the DA's office.

A second case reviewed was of a 19 month old with a spiral fracture who developed blisters due to not changing the bandages but it was difficult to prove medical neglect. It was suggested that DHS caseworkers need more legal support to more effectively argue in court.

In December Thomas Price presented a matrix to help identify the key findings of the Wayne Holder Report. The discussions transitioned into concerns about how child welfare workers are pulled in many directions and the coming cut in specialty positions. Jackson County currently has these positions and the system is a model of success statewide. The summary of the report is very black and white and there needs to be flexibility for the needs of the counties. The panel was concerned with the staff retention and the investment of getting caseworkers up to speed. It was suggested new trainees get paired up with a worker to prevent burnout and feelings of besiegement by the caseloads. It was recommended that one of the suggestions for the annual summary be that DHS caseworkers get heard more frequently. In the past, workers have been afraid to give honest feedback. It was mentioned that Bruce Goldberg, M.D., new DHS Director, responds to emails on Friday's and is a good recourse.

In March a summary draft of Dr Oddo's legislation efforts on preventing pornography exposure to children was distributed to the panel. The CAPTA Panel supported Dr Oddo's trip to testify to the Oregon Law Commission in Salem regarding this proposed legislation. This proposed legislation would make it a crime to knowingly expose children to adult pornography. The bill was drafted with the assistance of Bill Taylor, who does juvenile law drafting and was assigned by Senator Kate Brown. This bill is currently set to go to vote at the next legislative session. A copy of it has been sent to several committees for review, including the American Civil Liberties Union (ACLU). The bill does have full support by many, including Senators Bates and Kate Brown. Dr. Oddo plans on going to Salem to defend the bill when it comes up for vote. If passed, a violation of this law would be a Class A misdemeanor.

In summary, 15% of all sex offenders use grooming techniques which include showing children adult pornographic material. The literature on the harmful effects of showing children adult pornography is limited. One of the correlated harmful effects is later developing a sexual addiction in adulthood. One of the main

questions is does it lead to sexually reactive behaviors in children. The literature has shown that in general viewing adult pornography does not lead to becoming a sex offender as an adult. Karla Carlson noted DHS is seeing more and more younger children, being caught touching other children including attempting sexual intercourse. Obviously these children are acting out what they have seen somewhere.

### **Community Activities:**

1. The “Lifesaver” bi-annual newsletter was distributed to over 15,000 children within the Medford, Central Point, Rogue River and Eagle Point School Districts, and various Daycare facilities. This was the third edition of the newsletter. This is produced in collaboration with the Jackson County Fatality Review Team and the CAPTA Panel. Included in this issue were statistics on the child fatalities in the county, prevention tips and information on child safety seat distribution clinics.

2. Foster Parent Recruitment:

The CAPTA Panel partnered with DHS in producing a street banner, bookmarks, t-shirts and business cards to help get the word out for the need for more foster homes. The banner was displayed over the street in downtown Medford, reflecting the theme “Neighborhoods Count”. The business cards were distributed by foster parents, staff and the community at large to give exposure about the foster parent program. Many were left in the Jackson County schools along with posters on bulletin boards. The bookmarks were distributed to all the libraries in Jackson County. In addition, they were used in response cards handed out to people at the “Back to School” nights at over 15 local schools. The T-shirts were given out to newly-certified foster parents for them to wear as a visual “advertisement” for fostering. Penny Esser, Foster Parent Recruitment and Retention Specialist for DHS; expressed their gratitude to the CAPTA Panel for helping with these recruitment materials for their effort to solve the critical shortage of foster homes in Jackson County. She expressed in a thank you letter that they felt very privileged to have been chosen as recipient of the CAPTA program’s mission to improve the foster parent situation and she felt that this use of funds to help with recruitment has had an ongoing impact on the community.

### 3. Jackson County Community Sexual Abuse Awareness Training:

Michael Fansler (retired Jackson County Sex Offender Parole and Probation Officer) and Ann Wright (Jackson County Sex Offender Treatment Provider) developed an ongoing presentation that informs the community about sexual abuse prevention and offenders. Other child abuse professionals (therapists, probation officers and victim service workers) have presented the program in conjunction with Michael and Ann to over 10 audiences. This year the target audience was the religious community with presentations in five churches.

### **Recommendations:**

Jackson County CAPTA panel strongly recommends:

1. Legislative Reform, making knowingly exposing children to adult pornography a crime.
2. That judges have a solid training base for doing juvenile case work.
3. It would be helpful if DHS had legal representation on all cases.
4. Shortening the turn around time on urine drug testing of parents would be helpful in decreasing the number of times a worker would have to go to court.
5. DHS workers need an easy forum where they feel they can voice their concerns and someone will take action.

### **Future Plans:**

1. Continue to aid Foster Parent recruitment and retention.
2. Continue to distribute "Life Saver" bi-annual newsletters
3. Continue to promote community awareness of child sexual abuse by presenting the Jackson County Community Sexual Abuse Awareness Training. Conduct a survey of the churches and religious community

regarding their awareness of mandatory reporting laws and the need for prevention policies. The survey will be a springboard into trainings in the churches in the community during the coming year.

4. Work toward Legislative reform of child abuse prosecution laws.
5. Review problematic cases from MDT and DHS

### **Jackson County CAPTA Membership for 2005/2006**

According to Federal guidelines: “CAPTA Panels are to be made up of people who are broadly representative of the community in which they are established, including those who have expertise in the prevention and treatment of child abuse and neglect.”

<i>Facilitator:</i> Dr. Curtis Oddo	Medical Director, CAC
<i>Coordinator:</i> Tracy Thompson	Administrative Secretary, CAC
Mary May	Grants Coordinator, CAPTA at DHS
Karla Carlson	Supervisor, DHS
Karen Doolen	Community Volunteer, CAC Board Member
Mary Curtis Gramley	Early Childhood Partnership
Jane Hamilton	Executive Director, CAC
Diana Hills	Director Victim/Witness Services
Roxann Jones	Community Safety Net Program Coordinator
Doug Mares	Jackson County Branch Manager, DHS
Michelle Pauly	Deputy District Attorney
Rainy Olsen	Child Welfare Manager
Penny Esser	Foster Parent Recruitment & Retention Spec.
Thomas Price, Ph.d	Family Based Services Consultant, DHS
Carl Sieg	CAC Interviewer/LEA Consultant/Trainer
Linda Vanbuskirk	Medical Coordinator, CAC
Carl Sieg	CAC Interviewer/LEA Consultant/Trainer
Linda Vanbuskirk	Medical Coordinator, CAC

#### *Other Attendants:*

Phil Niemeyer	DHS Intake Supervisor
Sharon Bolen	State CAPTA Coordinator

## **List of Meeting Dates**

Monday, June 27<sup>th</sup>, 2005 – 3:30 – 5:00 pm

Monday, September 26<sup>th</sup>, 2005 - 3:30-5:00 pm

Monday, December 19<sup>th</sup>, 2005 – 3:30-5:00 pm

Monday, March 27<sup>th</sup>, 2006 –3:30-5:00 pm

# **DHS RESPONSE TO 2005/06 CAPTA PANEL RECOMMENDATIONS**

## **CAPTA Panel Overview**

### **Purpose**

The Child Abuse Prevention and Treatment Act (CAPTA) was originally enacted in 1974 to provide annual federal grants to states, based on the population of children under the age of eighteen, in order to improve their child protective services system. The act has been amended, on average, every four to six years. The amendment in 1996 added a new eligibility requirement for states to establish citizen review panels. The panel members are to be volunteers who were broadly representative of the community in which the panels were established. The mandate of the citizen review panels was to “evaluate the extent to which the agencies (state and local) are effectively discharging their child protection responsibilities.” The panels were required to examine policies, procedures, and where appropriate, specific cases handled by the state and local agencies providing child protective services. The panels were also mandated to “prepare and make available to the public, on an annual basis, a report containing a summary of the activities of the panel”.

The act was most recently amended in June 2003 when “Keeping Children and Families Safe Act,” Public Law 108-36, was signed by the President. The law reauthorized CAPTA through federal fiscal year 2008. Public Law 108-36 revised the citizen review panel duties to include: 1) requiring each panel to examine the practices (in addition to policies and procedures) of the state and local child welfare agencies, 2) providing for public outreach and comment in order to assess the impact of current procedures and practices upon children and families in the community, and 3) requiring each panel to make recommendations to the state and public on improving the child protective services system. In addition, the appropriate state agency is required to respond in writing no later than six months after the panel recommendations are submitted. The state agency’s response must include a description of whether or how the state will incorporate the recommendations of the panel (where appropriate) to make measurable progress in improving the state child protective services system.

## **Background/History**

Citizen Review Panels were established in three counties in Oregon: Multnomah, Jackson, and Malheur. The counties were selected to reflect the demographic, economic, social and political conditions found in different areas of Oregon. Together the panels provide a significant depiction of the varied conditions of child protective services in Oregon. Technical assistance, guidance and coordination are available to the panels through the Grants Coordinator for CPS, Children, Adults and Families (CAF). CAF has contracted with the child abuse intervention (assessment and advocacy) centers in each of the selected communities to provide facilitation and staff support for the panels.

## **CAPTA Panel Recommendations and DHS Responses**

### **Multnomah County Panel Recommendations:**

The following recommendations are based on five CAPTA Panel meetings in 2005 and 2006. Focus of the meetings was on the new DHS Safety Planning Policy (I-AB.5), with particular attention to activities required at “critical junctures”. Panel members understand that many of these areas are also addressed in the report by national consultant Wayne Holder, and that DHS is in the process of working to address and implement policies and procedures as a response to that report.

1. *Caseload – We recommend that DHS consider how caseloads are defined. Is the number of cases per caseworker an appropriate method of measure of workload? Should the agency also count or report on the number of children on the caseload? Is there a way to capture the complexity of each case, or each child within a case? As we've seen from case presentations at our meetings, the number of critical junctures on a case increases significantly depending on the number of children involved, and the needs of each child.*

### **DHS Response**

The issue of overworked staff and high caseloads are of ongoing concern for DHS as well and were one of the findings of concern in Wayne Holder’s report “Expert Review of the Safety Intervention System”.

DHS is working with national experts to examine issues of child welfare caseload and has developed several strategies to reduce child welfare workload

requirements. The first step to address workload was done by obtaining additional legal assistance in juvenile dependency cases. Additional attorneys at the Oregon Department of Justice and 30 new paralegal positions were added in the last legislative session. This will reduce the time caseworkers spend in writing petitions and other legal documents and appearing in court.

DHS received 30 additional casework positions during the Legislative interim session and is currently filling these positions.

Further a work group on caseworker workload is considering the utilization of non-case carrying staff to assist case workers with some duties and the use of electronic devices to aid workers in paperwork tasks.

*2. Supervision – We recommend DHS examine the level of supervision available for caseworkers. Is it sufficient? If the supervisor is not available, who does the caseworker consult with for review and supervision (as required in the safety planning policy)?*

### **DHS Response**

DHS recognizes that adequate and appropriate supervision for casework staff is an issue and is developing strategies to address it.

DHS is receiving technical assistance from a National Resource Center to reevaluate supervisory roles and responsibilities, improve the caseworker/supervisor ratio and provide suitable training for supervisors on clinical as well as management skills.

*3. Relationships -- We recommend DHS pay special attention to fostering positive relationships between caseworkers, children, families, and other people involved in cases. The case presentations highlighted the fact that the relationship between the caseworker and those involved on the case (particularly the children and adults in the parenting role) can have a significant impact on case outcomes. What is needed to foster those relationships?*

### **DHS Response**

A DHS administrative rule was adopted in October 2005 requiring that caseworkers have face to face contact with children and parents on their

caseloads every 30 days. This rule is intended to address this concern. Research in child welfare indicates that caseworker relationships with parents and children does have a significant impact on case outcomes and that face to face contact on a regular basis is an effective method of building those relationships.

The Safety Intervention Model DHS will implement later this year emphasizes development of caseworker relationships with children and their families especially in the Protective Capacity Assessment process.

*4. Timelines – We recommend DHS examine the timelines in the safety planning policy. Are they realistic or best practice for all cases?*

### **DHS Response**

DHS is revising timelines and work requirements involved in assessing child safety and developing child safety plans. With implementation of the Safety Intervention Model, current requirements will be modified so that safety planning occurs in a more timely fashion.

Further administrative rule now has and will continue to have exceptions to the timeline so workers may take additional time with their supervisor's approval, if they feel it is necessary to ensure child safety.

*5. Courts – We recommend DHS continue to work with judges and the court system to recognize and support, per the safety planning policy, the caseworker's key role as the decision maker on issues involving the child's safety.*

### **DHS Response**

One of the findings of the National Resource Center's report is that child welfare caseworkers have primary responsibility for making decisions regarding child safety when DHS becomes involved in a case.

Ramona Foley, DHS Administrator for Children, Adults and Families, meets with juvenile court judges at their annual conference. She presents information to the judges on current issues related to child abuse and child safety. At the last conference in August, 2005, she spoke specifically about the caseworker's role as the primary safety decision maker.

As DHS implements other recommendations from the National Resource Center report, Child Welfare Managers and supervisors in each county are working with juvenile court judges to clarify and support this practice.

*6. Training – We recommend DHS review the process for educating caseworkers about the new policy, based on concerns that staff in DHS branches are unaware of the current policy and the particular timelines associated with it.*

### **DHS Response**

In the last year CAF implemented a Child Welfare Training Committee to review training proposals for all child welfare and determine whether they were adequate and appropriate for the intended purpose and target audience. Part of the goal of this committee is to address the concern raised.

Further, DHS is in the process with its training partner Portland State University's Child Welfare Partnership of revising the curriculum for training new and current casework staff. These changes are intended to give new workers a firmer foundation in practice issues. It is intended that training to implement new policies will be better understood by casework staff, and they will be better able to implement practice changes with this practice foundation.

### **Jackson County Panel Recommendations:**

*1. Legislative Reform- makes knowingly exposing children to pornography a crime.*

### **DHS Response**

The CAPTA panel may want to work with the Children's Justice Act Task Force and the Oregon District Attorney's Association on this recommendation.

One of the Children's Justice Act Task Force mandates is the reform of State laws to provide comprehensive protection for children from abuse, particularly sexual abuse and exploitation.

The District Attorney's Association will have responsibility for prosecuting any violations if this passes so it will be important they understand and are supportive of this legislation.

*2. That judges have a solid training base for doing juvenile case work.*

## **DHS Response**

This also has been a concern of the CJA Task Force. One of the projects they are currently funding is to provide training to juvenile court judges about the issues of teens who have been abused.

The Juvenile Court Improvement Project (JCIP) sponsors a three day Juvenile Judge's Conference annually. The CJA Task Force provides funding for this conference. Ramona Foley, the CAF Administrator is a regular presenter at the conference on current child welfare issues.

The State Court Administrator's Office provides a yearly comprehensive orientation training for all new judges that includes a component on child abuse and neglect

The JCIP in collaboration with the Citizen Review Board and DHS provides training in each county statewide on dependency law updates or changes after each legislative session.

A conference on family law is sponsored annually by the State Family Law Advisory Committee and the Domestic Violence Subcommittee

Guidelines, manuals, tables and information packets are available for judges and other court staff. These are prepared by the Court Programs and Services Division

Education for tribal judges on child welfare issues is coordinated through the JCIP and DHS' ICWA Program Manager.

Oregon has developed integrated family courts throughout the state to connect and coordinate criminal, juvenile and family law issues.

*3. It would be helpful if DHS had legal representation on all cases.*

## **DHS Response**

During the last legislative session DHS received funds for additional legal representation from the Attorney General's Office and to hire paralegal staff in several offices. This is intended to alleviate some of the legal work currently done by caseworkers and to shorten the time that children are in out of home care by moving cases more quickly and effectively through the court process. If these steps to provide legal presentation are successful, it is anticipated that additional legal representation will be available for DHS staff.

*4. Shortening the turn around time on urine drug testing of parents would be helpful in decreasing the number of times a worker would have to go to court.*

## **DHS Response**

This issue presented is that juvenile court judges are holding hearings and making case decisions often about child placement before the results of drug tests are available. Then after receiving test results, making different decisions based on those test results.

Case work decisions especially about child placement should be based on child safety and the parent's ability to protect and provide for their child not on drug testing. If parents have relapsed, the effects of use should be demonstrated in their behavior toward their child and in the way they are caring for their child. Those can be observed and reported to the court separate from drug testing results.

## **Malheur County Panel Recommendations:**

*1. Make strong changes in DHS Child Welfare policy and procedure that would allow for earlier intervention and removal of the child from the home when there are findings of child abuse. Also to work on modifying the assumption that the biological parent is naturally the "best" parent for the child, especially when the child is thriving in a foster care home that wishes to adopt the child, and the parent has a repeated history of child abuse, drug and alcohol abuse or abandonment, yet policy states that the child must be reunited with the parent if at all possible within the 18 month time frame.*

## DHS Response

Child welfare is required by state and federal laws to provide reunification services to parents when children have been removed from their custody due to abuse and neglect. Parents are required to successfully complete a change based service agreement to remove the safety threats and any risk influences that create potential harm to the child. The state is also required to explore an alternate permanent plan for the child in case the reunification plan fails. This may include permanent placement with relatives or adoption. Federal and state law provide provisions, procedures, and mechanisms that assure that the State does not require reunification of a surviving child with a parent who has been found by a court of competent jurisdiction to have:

- a. committed a murder (which would have been an offense under section 1111(a) of title 18, United States Code, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) of another child or such parent;
- b. committed voluntary manslaughter (which would have been an offense under section 1112(a) of title 18, United States Code, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) or another child or such parent;
- c. aided or abetted, attempted, conspired, or solicited to commit such murder or voluntary manslaughter; or
- d. committed a felony assault that results in the serious bodily injury to the surviving child or another child of such parent (section 106(b)(2)(A)(xvi);

Federal and state law also assure that conviction of any one of the specified felonies constitute grounds under State law for the termination of parental rights of the convicted parent as to the surviving children (section 106(b)(2)(A)(xvii)).

*2. Do outreach and education about child abuse prevention, support groups, and referrals for parental support at PTA meetings.*

## DHS Response

This is an excellent recommendation. We suggest forming a partnership between the local Family Support and Connections program, Commission on Children and Families, and the Malheur CAPTA Panel to establish this as a community wide

prevention goal. Some of the funding provided to support the CAPTA Panel could be used to support this project such as covering the cost of printing informational material.

Parents Anonymous of Oregon is another resource to explore for your community. They provide parent support groups and information and material on preventing child abuse and neglect. In the past, they received CAPTA funding to establish a parent support line serving Multnomah, Clackamas, and Washington counties.

*3. Start a parent-mentoring group to provide new or inexperienced parents with a home visitor to allow for parenting skills to be taught in the home, and respite care, as well as a safe place for their children.*

### **DHS Response**

The local health department in your community receives state funding to operate a program called Healthy Start. This program is intended to provide voluntary comprehensive screening and risk assessment of newborn children and their families. Local Commissions on Children and Families are also mandated to promote wellness for children and their families and to address the needs of children and families at highest risk. As noted in the response to Recommendation Number 2, the CAPTA panel may want to consider this as an area of focus for the upcoming year and form a partnership with the local child welfare office, the health department, safety net, and Commission on Children and Families. CAPTA panel funding could be used to support pieces of this project.

*4. Trainings with the faith community on child abuse recognition, screening and making appropriate referrals.*

## **DHS Response**

One of the requirements for Oregon to receive CAPTA funding is the provision of training to individuals required to report suspected cases of child abuse and neglect. Oregon Revised Statutes require child welfare to develop and make available training material to mandatory reporters. A CAPTA funded project began in 1999 to meet these requirements. It included rewriting and distributing a booklet on mandatory reporter. In 2004, ten thousand copies of the newly written “What You Can Do About Child Abuse and Neglect” booklets were printed and almost all the copies distributed. DHS reprinted them to provide agencies, organizations, schools and churches approximately 4,000 copies of the booklet each month. DHS also produced and continues to distribute copies of a mandatory reporter training video. A statewide mandatory reporter-training curriculum funded through CAPTA was developed in April 2005. The CJA Task Force is in the process of issuing a request for proposals to develop and implement specialized training for mandatory reporters of child abuse and neglect. The target audience includes physicians, teachers and other school employees. The mandatory reporter booklet and videotape are available for use in your community.

*5. Utilizing play therapy in the mental health community when parents are ordered to go to counseling so they get hands on skills and mentoring on how to interact with and enjoy their children in a therapeutic supervised setting where they are using real skills that can be transferred to the home environment with the help of therapist and para-professionals.*

## **DHS Response**

Play therapy has become an outdated treatment modality. Clinical studies indicate that other treatment modalities such as Cognitive Behavior Therapy are more effective.

DHS is exploring the use of Parent-Child Interaction Therapy and Attachment Coaching as methods to support development of parental attachment. This type of intervention is demonstrating effectiveness in supporting parent-child bonding and in development of specific parenting skills. However it is an intensive and expensive modality.

*6. Better quality screening of potential foster care parents including bringing the name and background histories of potential foster care parents before the Child Abuse Prevention MDT for screening and a team decision on appropriateness for licensure.*

### **DHS Response**

Oregon Administrative Rule: 413-120-0400/0470 and 413-200-0301 to 413-200-0401 prescribes the process and standards to be used in screening and certifying prospective foster parents, adoptive parents, and other adult relatives and non-relatives residing in the household. The rules were established to reduce the risk of exploitation and/or abuse of children in the care of or receiving services from DHS and outlines how DHS conducts criminal offender information and other background checks of individuals. It outlines the procedures by which DHS obtains criminal offender information on subject individuals who are seeking to provide relative, foster or adoptive care to children in DHS custody. It lists the convictions, criminal history, or arrest record that makes applicants ineligible. In addition, these rules provide opportunities for individuals to appeal and challenge the department's decisions to deny, suspend, and revoke certifications through Oregon Administrative Hearing process.

This is a process established in rule and directed by statute, DHS does not believe transferring decision-making responsibility and liability process to a larger body would best serve children and families. Further it would jeopardize the confidentiality of foster and adoptive applicants.

*7. More parenting classes that are not just preaching to the choir but are required for offenders.*

### **DHS Response**

Parents are required to demonstrate behavioral changes to reduce the safety threats and provide stability in the lives of their children. Parenting classes, counseling, and alcohol and drug treatment services are some of the many strategies the department uses to help parents meet their child's safety and attachment needs. If parents do not complete their change based services agreements, they risk losing permanent custody of their children.

8. *More outreach and education efforts to engage the community as a whole, as based on the community survey results, it is apparent that the community still is unaware of the significant problem of child abuse and child sexual abuse in our community, and what referral and protective systems are in place.*

### **DHS Response**

One of the roles of the CAPTA panels in providing education on the extent and significance of child abuse and neglect and the resources available to address these issues directly in each of their communities. Although the specific role of the panel is to examine child welfare procedures and practices on a local level, a broader role for the panels was also envisioned: mobilizing all areas the community to take responsibility for keeping children safe such as service clubs, churches, the business community, law enforcement, community organizations and city, county, state, and federal agencies. A single agency cannot accomplish the task of keeping children safe. A far more effective way to deal with the issues surrounding child abuse and neglect is on a community wide basis. We can provide support to the CAPTA panel if they would like to take a leadership role in this effort. There are other organizations that are also involved in this task in your community such as the Commission on Children and Families and the Community Safety Net Program. We can obtain training and technical assistance from one of the National Resource Centers through the Administration on Children and Families on development of a community-wide awareness campaign or other activities the panel would like to pursue.

9. *More funding and resources devoted to prevention and intervention of child abuse service agencies. Staff is consistently overworked, have extremely high caseloads, burn out and this is when children start falling through the cracks.*

### **DHS Response**

The issues of overworked staff, high caseloads, and burnout are of ongoing concern for DHS as well. Through a process of working with national experts to examine issues of child welfare caseload, training for field and supervisory staff, and improvements in child welfare policy and procedures, DHS developed several strategies to reduce child welfare workload requirements. This was done by obtaining additional legal assistance in juvenile dependency cases from paralegals and attorneys at the Oregon Department of Justice in the last

legislative session. This will reduce the time caseworkers spend in writing petitions and appearing in court.

DHS also received additional casework positions during a Legislative interim session and is currently filling these positions. Other strategies DHS is pursuing include improving the caseworker/supervisor ratio, training for both supervisors and caseworkers and utilization of non-case carrying staff. Child welfare administration is continually working on ways to provide better training and support to caseworkers to avoid burnout and improve services to children and their families.

**5. Annual Report for CFCIP and ETV**

**CHAFEE FOSTER CARE INDEPENDENCE PROGRAM**

**AND**

**EDUCATION AND TRAINING VOUCHERS PROGRAM**

## **Responsible State Agency**

There have been no changes in this area.

## **National Evaluations**

Over the past year, Oregon's Independent Living Program (ILP) has responded to surveys/evaluations for the following: National Resource Center for Youth Development (numerous surveys), DHHS Region X office, Connected by 25, college students (three requests), and the University of Chicago.

## **Program Design**

There have been no major changes to ILP services in the past year. Oregon continues to offer the following ILP services: skill building (contracted service), Independent Living Subsidy Program (housing for 16+ yr. olds), Chafee Housing, Education and Training Voucher program Oregon Student Assistance Commission (OSAC) scholarships and DHS vouchers), and access to ILP Discretionary funds. There have been clarifications added to the coordinated use of the Chafee Housing and ETV Programs. Details may be found in the individual program sections of this document.

The ILP was not successful in conducting an outcome survey during the past year. However, plans are currently underway to determine outcome data on youth that have left Oregon's foster care system in the past five years. A Request for Proposal (RFP) and contract will be issued in mid-Summer, 2006. The ILP Program Manager hopes to have the research conducted during Winter 2006. The contract will require a final report due by March 2007. Efforts will be made to incorporate the draft National Youth in Transition Database questions and data elements in Oregon's research. DHS will also review the Case Family Programs' Chafee Assessment tool to determine its usefulness in Oregon's research efforts. The research results will be incorporated in next year's report.

The National Child Welfare Resource Center for Youth Development (NCWRCYD), University of Oklahoma, conducted a review of Oregon's Independent Living program, services, processes, and procedures in August 2005. The final report was received on December 16, 2005. Suggestions for improvement included:

- Provide services that are based in a youth development approach, which emphasizes youth involvement and accountability.
- Improved integration of the life skills assessment, service plans, and life skills instruction.
- Increase the Central Office Infrastructure/Staff to improve service coordination and collaboration
- Increase the involvement of foster parents, relative caregivers, and other caring adults in life skills instruction and practice.
- Review the current age eligibility for services provided through Chafee funding

DHS has shared the report with the ILP State Advisory Committee. Strategies for improvement implemented to date include:

- T2/Independent Living Program Training: Emphasizes the importance of youth taking responsibility for achieving their goals for transition. The passage of SB808<sup>1</sup> and SB1034 helped institutionalize the importance of youth involvement in crafting their transition plan and determining the services needed to achieve their plans. (T2/ILP Training is the Comprehensive Transition Plan, known as form CF 69a.) Senate Bill 808, effective in January 2004, changed the requirements for planning for youth in DHS care and custody age 16 and older.
- ILP Contractors have been advised of the reports finding regarding the lack of integration regarding the life skills assessment, service plans, and skills instruction. Ansell-Casey Life Skills Assessment training was conducted During November and December 2005 to teach Contractors how to incorporate the assessment results with the service plan and skill instruction. This topic has also been incorporated in the T2/ILP Training.
- No movement has been made in regard to increasing infrastructure or staff for the ILP. Such an increase would require approval of Oregon's Legislature. Given Oregon's budget constraints, this is not feasible at this time. DHS is researching creative options to resolve this issue.
- Resources have been purchased to aid foster parents/caregivers with teaching life skills in the home. Each branch office has received a supply of the Ready, Set, Fly! booklet, the New Making It On Your Own workbook,

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<sup>1</sup> SB808 amended ORS 419B.343 regarding recommendations of the committing court, case planning and plan contents and ORS 419B.476 regarding conduct of hearings, court determinations and orders.

and the FYI3 Planner for youth. DHS has asked the following states for information regarding the curriculum used to teach foster parents how to provide life skills training in the home: Minnesota, New York, New Hampshire, and Massachusetts. Only New Hampshire has responded. This is an area that Oregon will continue to research.

- DHS plans to delay the review the various eligibility criteria for Oregon's ILP services until the results of the outcome research are known.

## **Program Statistics**

For federal fiscal year 2005 (10/1/04 through 9/30/05), the ILP providers served an average of 769 youth per month. This is a 16.5 percent increase over the previous year. To date for FFY 2006 (10/05 - 4/06), ILP providers are serving an average of 805 youth per month. This represents a 4.7 percent increase for the same time period last year. While the number of youth being served continues to increase, the rate of increase has slowed. This may be due to the fact approximately nine of the 20 contractors have implemented waiting lists due to the high demand for services.

Total youth served during FFY 2005 was 1,248 (a 7.5 percent increase from the previous year). Following are the referral and discharge statistics for the youth served:

625 youth began ILP services in a prior fiscal year (+42%)  
622 youth started ILP services in FFY 2005 (-12.6%)  
702 youth continued ILP services into the next fiscal year (+43.9%)  
546 youth were discharged in FY2005 (-18.9%)

The above statistics represent the first year that the ILP has seen a decline in the number of youth who began receiving services during the fiscal year being reported. The following may have contributed to the decline:

- Youth are staying in a provider's program longer. Note the significant increase in the number of youth who began services in a prior fiscal year (42 percent) and the 18.9 percent decline of youth discharged from the ILP during FFY05 (546) compared to FFY04 (673).
- Waiting lists – as mentioned previously, nine of Oregon's ILP Contractors have implemented waiting lists. Some youth may have to wait a year before

contracted services are available. However, Child Welfare caseworkers are still required to meet the transition needs of the youth in care. This may indicate a need for training regarding the option to open the ILP services as a non-paid service when services are being provided or facilitated by a DHS caseworker.

- Chafee Housing – in order for former foster youth to access Chafee Housing, they must continue to work with an ILP Contractor. This may add to the length of stay in a Contractor’s program.

In previous years, Oregon has been able to provide outcome data regarding youth served (types of services and number of youth receiving those services). However, Oregon’s conversion to an Access database system, which is connected to CAF’s Integrated Information System, continues to provide challenges with extracting data. The ILP Coordinator will make the functionality of the ILP/ETV database a priority for the coming year.

## **General Program Overview**

### *Life Skills Assessment*

The Ansell-Casey Life Skills Assessment (ACLSA) is the preferred life skills assessment for Oregon. As mentioned previously, ACLSA training was held during November and December 2005. The primary goal of training was to assist staff and ILP Providers to understand the link between the assessment results, transition plans and service provision. A secondary goal was to focus on coordinating the assessment process with community partners, foster parents, and child welfare workers. The T1, Transition Readiness Index (CF69) is a requirement for ILP Contractors as part of the assessment process. However, the T1 is optional for DHS staff.

### *Youth’s Service Plan/Comprehensive Transition Plan*

CAF continues to use the T2, Comprehensive Transition Plan (CF69A) when crafting a youth’s plan for transition. DHS continues to stress the importance of involving youth in the planning process and those adults the youth views as supports in their life. The T2/ILP training informs staff and community partners how and why the team approach to planning is vital to a youth’s success. DHS worked with FosterClub to create the T Time Binders – a resource tool to be used when assisting a youth to craft a transition plan. Each person attending the T2/ILP training is provided a T Time Binder. All ILP Providers and System of Care (SOC) Teen Experts have also received a T Time Binder.

Housing Services/Room and Board

Oregon’s goal in this area is to increasing housing options for youth in and out of care. The ILP State Advisory Committee has created a workgroup to assess and implement housing options for youth. The workgroup has been meeting since March 2006. Progress and results of this workgroup will be provided in next year’s report.

As a result of the NCWRCYD review in 2005, Oregon plans to revise policy to provide clarifications regarding youth accessing both Chafee Housing and ETV funds simultaneously. DHS will clarify that if a youth’s ETV award includes room and board as part of the cost of attendance, the youth will not be allowed to also access Chafee Housing, regardless of need. However, if a youth’s ETV award does not include room and board as part of the cost of attendance, the youth may be eligible for Chafee Housing services. Youth who begin Chafee Housing prior to applying for ETV funds will be allowed to continue on Chafee Housing until the school releases the financial aid (including ETV) to the student. At that point, Chafee Housing assistance will cease.

Following are statistics on youth served by Oregon’s ILP housing programs – Independent Living Subsidy Program (ILSP) for youth in DHS care and custody; and Chafee Housing for youth who aged out of care at age 18 or older:

**ILSP** – The total number of youth served during FFY05 was 77 (a 30.5 percent increase). The ILSP averaged 43 youth per month during FFY05 (a 65.3 percent increase over the previous year). The ILSP is currently averaging 32 youth per month – a decline of 13.5 percent for the same time period in FY05 (October – April). Additional information on those youth is as follows:

Age at time of ILSP enrollment

FFY 2005 (10/04 - 9/05)	FFY 2006 (10/05 - 4/06)
16 years old: 1 (-66.7%)	16 years old: 0 (no change)
17 years old: 10 (-16.7%)	17 years old: 7 (+40%)
18 years old: 45 (+15.7%)	18 years old: 27 (+125%)
19 years old: 21 (+200%)	19 years old: 18 (+100%)
20 years old: 0 (no change)	20 years old: 7 (+700%)

FFY 2005: Median number of months on ILSP: 6 months

Least amount of time on ILSP: 1 month  
 Longest amount of time on ILSP: 14 months

**Disposition for ILP Housing Service SIND**

<b>Code</b>	<b>Description</b>	<b>Number</b>	<b>Percent</b>
IDRP	Youth no longer willing or able to meet program requirements	1	2%
SEMC	Emancipation	25	50%
SHOM	Reunification	2	4%
SHOP	Reunification with Parent/guardian not caretaker at time of removal	1	2%
SMAR	Married	1	2%
SOIN	Youth accepted into alternate program (I.e. Job Corps, National Guard)	3	6%
SOSC	Child moved to another placement with equivalent level of care	3	6%
SOTH	Other	12	24%
SRUN	Runaway	2	4%

Total Youth Terminated from SIND: 50

**Chafee** – Chafee funds are based on a one-year grant, with a two-year expenditure cycle. The amount of FFY04 (10/1/03-9/30/04) Chafee Housing funds expended between October, 2004 and July, 2005 was \$230,845. The amount of FFY05 (10/1/04-9/30/05) Chafee funds expended between July, 2005 and April, 2006 was \$165,775. The total number of youth served during FFY05 through Chafee Housing was 109, an increase of 2.8 percent over FFY04. A total of 48 youth were from Multnomah County, a decrease of 9.4 percent from FFY04. The rest of the state served 61 youth, an increase of 5.7 percent from FFY04.

Chafee Housing averaged 53 youth per month from October, 2005 through April, 2006, a 23.2 percent decrease over the same time period in FY05. The Multnomah County average was 19 youth per month, a decline of 40.6 percent, and 34 youth were from other counties, a decrease of 8 percent. Additional information on the youth served is as follows:

### Age at time of Chafee Housing enrollment

FFY 2005 (10/04 - 9/05)	FFY 2006 (10/05 - 4/06)
18 years old: 44 (-20%)	18 years old: 24 (+84.6)
19 years old: 47 (+4.4%)	19 years old: 38 (+137.5)
20 years old: 18 (+200%)	20 years old: 27 (+107.7)

FFY 2005: Median number of months on Chafee: 7 months  
 Least amount of time on Chafee: 1 month  
 Longest amount of time on Chafee: 12 months

### FFY 2005 Disposition for Chafee Housing Service ILPC

Code	Description	Number	Percent
IAGE	Youth reached maximum age of 21 years old	5	6%
IBEN	Youth accessed maximum benefits allowed, \$6,000	35	42%
IDRP	Youth no longer willing or able to meet program requirements	31	37%
ISLF	Youth achieved self-sufficiency and no longer needed assistance	12	14%
TRAN	Transferred	1	1%

Total Youth Terminated from ILPC: 84

Oregon used 10 percent of the FFY04 ILP allotment for Chafee Housing (a 3 percent decrease from FFY02). This decrease was most likely due to Oregon shifting the contracting and spending cycle to the State's fiscal cycle (July – June). This shift shortened the FY04 budget by 3 months. The ILP has allocated \$300,000 of FFY05 funds for Chafee Housing for the current year (July 2005 – June 2006). The FFY05 allocation is equal to 12% of the federal allotment or 10% of the overall ILP budget (including match).

#### Personal and Emotional Support Through Mentors

The ILP State Advisory Committee has created a workgroup to assess existing mentor programs throughout the state to determine if youth can access an existing program in their area or if it will be necessary to create a formal mentor program specifically for foster youth. The work group will also research mentor programs

nationwide for best and promising practices. This workgroup was formed in January and continues to meet and research this topic. If costs are prohibitive, an option may be to increase the activities occurring in the State that connect youth to potential supportive adults (i.e., job shadows, volunteer opportunities, sports, after school programs, etc.). The workgroups findings will be reported next year.

### **Ages and Stages of Achieving Independence**

As mentioned previously in this report, there have been no significant changes to Oregon's ILP services or eligibility. However, the ILP State Advisory Committee has created a workgroup to assist in meeting the following goals:

- Implement a continuum of care, taking into consideration the needs of the following age groups: 14-15, 16-18, 18-21 year olds.
- Improve collaboration and coordination of training with Portland State University Child Welfare Partnership.
- Increase coordination of training with other DHS agencies (Self-Sufficiency Programs, Oregon Vocational Rehabilitation Services, Heath, Seniors and People with Disabilities, Developmental Disabilities) and other youth serving organizations to improve, diversify, and increase the training opportunities regarding youth issue for foster parents, ILP Contractors, staff, community partners and youth.

This workgroup has an immense task ahead of them. The ILP Coordinator and the DHS training unit have begun discussions with the PSU Partnership regarding caseworker and caregiver training related to adolescents. The PSU CW Partnership has agreed to review the curriculum that DHS is able to obtain from other states related to teaching life skills in the home.

### **Education and Training Vouchers**

The main change for this area will be a policy clarification regarding youth who access both ETV funds and Chafee Housing funds. As mentioned in the Housing section of this document, if a youth's ETV award was based on costs of attendance that included room and board, the youth will not be allowed to access Chafee Housing when the youth receives the ETV award.

DHS is also working with OSAC to determine if it is possible to streamline the scholarship application process. Currently, there are seven cumbersome steps involved in distributing an ETV scholarship. Several options are being discussed

and a new application process will be implemented by January 2007 for the 2007-2008 academic year.

Another struggle for Oregon has been meeting the match requirement of the ETV. The Former Foster Children Scholarship (FFCS) has been a major source of match for the ETV program. Unfortunately, there are no longer State General Funds allocated to this program. However, the FFC Scholarship is set up to accept both public and private funds. The ILP State Advisory Committee determined that it would be in the best interest of Oregon's foster youth to begin an awareness campaign for the FFC Scholarship. ILP providers also felt that an awareness campaign would be a good community activity for the ILP youth to interact with the public, learn marketing skills and the community resources available in their area. FosterClub has donated informational flyers for the providers and youths to use as they canvas their local communities. The campaign will inform communities of the postsecondary struggles of foster youth and of the opportunities available to assist foster youth, such as being a mentor, donating to the Former Foster Children Scholarship, host home during school breaks, providing computers or other necessary supplies. It is through this awareness campaign Oregon hopes to garner the match necessary to access the full ETV allotment. The success of these efforts will be reported next year.

Oregon uses the academic year as the time frame to ensure no youth receives more than \$5,000 per year (varies by school; September – August, or July – June). This creates an issue when attempting to report statistics which are tied to the federal fiscal year (October – September), as the time frames overlap and dollars from two fiscal years may fund one academic year. Therefore, DHS will provide award details by academic year, as noted below. A detail of expenditures by fiscal year may be located in the Additional Annual Report Data Section of this document.

04-05 Academic Year:

ETV OSAC Scholarships: 84 for a total of \$344,400

ETV DHS Vouchers: 73 for a total of \$69,884

(of the 73 vouchers issued, 25 youth also received scholarship funds)

Total ETV Awards: 132 recipients for a total of \$414,244

Following is a breakdown of the \$69,884 in DHS Voucher funds issued:

Tuition: \$33,715	Room & Board: \$6,597	Lab Supplies: \$660
Fees: \$1,238	Housing Start-up: \$3,230	Spec. Equip: \$7,076
Books: \$10,165	Transportation: \$3,758	Tutor: \$1,960

Other: \$1,485 (may include day care, medical insurance, moving costs, loan repayment, etc.)

05-06 Academic Year:

ETV OSAC Scholarships: 135 for a total of \$567,372

ETV DHS Vouchers: 58 for a total of \$66,023

(of the 58 vouchers issued, 27 youth also received scholarship funds)

Total ETV Awards: 166 recipients for a total of \$633,395

First Time Recipients: 108

Following is a breakdown of the \$66,023 in DHS Voucher funds issued:

Tuition: \$38,217    Room & Board: \$4,887    Lab Supplies: \$440

Fees: \$3,775    Housing Start-up: \$645    Spec. Equip: \$6,442

Books: \$7,156    Transportation: \$1,729    Tutor: \$1,757

Other: \$975 (may include day care, medical insurance, moving costs, loan repayment, etc.)

06-07 Academic Year:

No scholarships have been issued for the 06-07 academic year. However, OSAC has received 255 ETV scholarship applications, of those 226 are eligible for ETV funds. Two youth have accessed DHS Vouchers (\$200 each) for dorm deposits for the Fall of 2006.

Oregon anticipates awarding ETV funds to approximately 200 youth for academic year 2006-2007. Last year, only 52.6 percent of the eligible applicants completed the application process and received a scholarship. Oregon plans to increase the completion/award rate of applications to 60 percent for the 06-07 academic year.

Oregon was able to increase the overall number of youth receiving ETV awards by 25.8 percent. The majority of the increase was due to more youth accessing ETV scholarships through OSAC, a 60.7 percent increase over last year. Youth accessing ETV funds through the DHS Vouchers decreased by 35.4 percent. This indicates that more youth are planning ahead and submitting an OSAC application, instead of making a last minute decision to continue their education and training. Oregon hopes to continue the trend of increasing the ETV Scholarships and decreasing the need to access ETV funds through the use of DHS Vouchers.

Oregon issued payment to OSAC for administrative fees for processing scholarship payments as follows: \$26,011 with FFY04 funds and \$108,394 with FFY05 funds.

OSAC is tracking non-federal dollars awarded to ETV scholarship recipients. These funds are used to help meet the ETV grant match requirement. In-kind services and supplies from the Access to Student Assistance Programs In Reach of Everyone (ASPIRE) projects will also be used to meet the match requirement.

The ASPIRE program's website now includes a section specifically for foster youth. The site contains the basic information for Oregon's ETV scholarship, as well as other scholarships and websites of interest to foster youth. The site can be viewed at [http://www.aspireoregon.org/s\\_fosteryouth.html](http://www.aspireoregon.org/s_fosteryouth.html).

The ILP also partnered with ASPIRE to provide four regional trainings to educate foster youth and adults about the availability of the ETV, how to search, apply and compete for scholarships, supports available from postsecondary institutions, needs of foster youth while in college or trade school, and other topics related to ensuring foster youth are successful in their endeavors to continue postsecondary education and training. The training took place during November and early December, 2005. The training was held on college campuses in Medford, Portland, and Eugene. There were a total of 47 participants – 27 youth and 20 adults (ILP Providers, DHS caseworkers, and foster parents). While the events were well received by those who attended, participation was lower than expected. DHS and ASPIRE are discussing options to increase participation. One option may be to combine the training with the Annual Teen Conference.

### **Political Sub-Divisions**

No major changes in this area – Oregon is a state administered program and services are available on a statewide basis to both DHS clients and Tribal youth. The ILP Desk has also provided both DHS and the Tribes with resources to serve youth who do not access a contracted provider. Resources include the following:

ILP Discretionary Funds (each SDA and Tribe are allocated funds)

New Making It On Your Own (workbook for youth)

FYI3 Planner (binder for youth)

Ready, Set, Fly! (booklet for caregivers)

What are My Rights? (booklet for youth)

Beginnings Guides (booklets for pregnant or parenting teens)

The Path Before Me (booklet for youth)

## **Involvement with Public and Private Sector:**

Federally Funded Transitional Living Program (TLP): The CAF Assistant Director, Foster Care Manager, and ILP Coordinator are participating on various committees involving discussions on homeless and runaway teens. The ILP Coordinator participates in the Oregon Homeless and Runaway Coalition meetings. The ILP was asked to compile a panel to speak at the 2006 ILP/TLP grantees luncheon in May 2006. The topic was ILP/TLP Collaborations. The panel presenters were: Joe Hayes, J Bar J, a FYSB TLP grantee in Bend; David Spinella, Community Works, a community program in Medford providing both ILP and TLP services; and Rosemary Iavenditti, ILP Coordinator. The Health and Human Services (HHS) Region X staff assisted by publishing a booklet detailing the ILP/TLP collaborations occurring across Alaska, Idaho, Oregon, and Washington. The ILP has regularly participated in joint ILP/TLP conference calls hosted by Region X.

DHS continues to encourage ILP Contractors to build relationships with their local Homeless and Runaway Youth (HRY) providers. A minimum expectation is that the ILP Contractors will make their local HRY programs aware of the services available to former foster youth. The ILP Coordinator continues to hold discussions with individual FYSB TLP grantees to determine how Oregon can better serve former foster youth. Meetings to discuss potential partnerships between the local ILP Contractors and TLP staff occurred in Salem, Portland, and Eugene over the past year. Discussions are in the early stages in each of these cities.

Workforce Investment Act (WIA): The ILP Coordinator continues to participate as a member of the Oregon Workforce Investment Board (OWIB) Youth Committee. The OWIB held regional focus groups as part of a strategic planning effort. The focus groups will aid the OWIB to determine the State's goals for next year's workforce efforts.

The ILP Coordinator presented information to the Workforce Investment Act (WIA) agencies at the request of Oregon's Community Colleges and Workforce Development agency. DHS handed out 20 ILP training packets to WIA providers from around the state. DHS has also distributed a listing of all WIA agencies across the state to ILP Providers and SOC Teen Experts.

The ILP Coordinator meet with Clackamas DHS staff, ILP Provider, and the Clackamas Training and Employment Consortium (C-TEC) (Employment/WIA agency) on 6/28/05, to discuss the potential for the ILP and C-TEC to partner. Discussions resulted in a coordinated referral process and a better understanding of the services available from both entities.

The ILP Coordinator also presented ILP information to Youth Services Implementation (YSI) Team on 1/17/06. The YSI Team consists of Clackamas WIA agencies and some DHS staff. This meeting was well attended. The ILP Coordinator provided the group with several resources and detailed information regarding ILP services and eligibility criteria. The ILP Coordinator was able to respond to questions and clarify ETV eligibility for the group.

As a member of the OWIB Youth Committee, the ILP Coordinator attended the Oregon Workforce Partnership Youth Forum held on 5/25/06. The forum brought together WIA providers from around the state as well as OWIB members and OWIB Youth Committee members. The keynote speaker, Dr. Paul Harrington, Center for Labor Market Studies Northeastern University, provided interesting statistics and insight regarding connecting youth to a career path at an early age. The bulk of the day was filled with presentations regarding creative and promising practices for assisting youth to become competent members of Oregon's workforce.

As reported last year, DHS participated in the Shared Vision for Youth regional forum held in Phoenix in December 2004. Responsibility for oversight of Oregon's Team has shifted to the Partners for Children and Families (PCF). DHS continues as a member of the team. Progress has been slow; however, foster youth have been targeted as the population the Youth Vision Team plans to focus their efforts. Progress will be reported in next year's report.

Positive Youth Development (PYD) grant: The ILP Coordinator has reduced involvement with Oregon's PYD grantee, the Commission on Children and Families (OCCF). However, the ILP Coordinator continues to remain active on the PYD Youth Involvement sub-committee. DHS attended the PYD Round Table on March 16, 2006. The PYD Round Table brings together administrative and management level staff from youth serving agencies and departments. The following entities participated in the Round Table: Commission on Children and Families, School Age Care, NW Regional Educational Laboratory, J Bar J-Loft, DHS (ILP, Self-Sufficiency Programs, Adolescent Health Systems), Lasater &

Company Consulting, Looking Glass Youth & Family Services, Outside Inn, Drug and Alcohol Prevention, Community Colleges & Workforce Development, Mid-Columbia Center for Living, Lane County Dept. of Children & Families, Oregon After School for Kids (Oregon ASK), and the FYSB Region X Special Populations Team Representative, Judith Wood. The group was updated on the progress of the PYD efforts in Oregon. The group then brainstormed how to help implement the policy recommendations the PYD Advisory Council had drafted over the past year. It was a productive day. Each person left with an idea to implement in their program to integrate the youth voice in practice and policy.

Community Justice Act (CJA): The ILP Coordinator participated in the CJA Request for Proposal (RFP) scoring committee. The scoring committee ranked proposals submitted on a project to create curriculum to educate those who serve abused and neglected teens on the handling of adolescent abuse cases, conduct training, and develop resources for the Multi-Disciplinary Teams to serve youth more effectively.

Community Partner: The Foster Care Manager and ILP Coordinator met with a prominent business leader in the Salem area, Dick Whitnell. Mr. Whitnell was very interested to hear about the issues affecting teens in foster care. Mr. Whitnell sits on various Boards and Commissions. Mr. Whitnell hopes to engage his community business partners to improve the foster care system in Marion County.

### **Tribal Consultation and Coordination**

The ILP Coordinator continues to build and strengthen relationships with Tribal members by attending the quarterly ICWA Advisory meetings to address Tribal needs, concerns, and desires. The ILP Coordinator has become a regular presenter at the ICWA Conference round table sessions each Fall. The ILP Coordinator continues to advise Tribes regarding accessing the ILP Discretionary funds and programs.

New this year was a Native American Teen Gathering. The ILP contracted with the Confederated Tribes of the Grand Ronde to sponsor the Gathering. The Gathering was held on August 2 – 4, 2005, at the Southwestern Oregon Community College, in Coos Bay, Oregon. Youth served were ages 14 through 20. The Gathering provided an opportunity for Native youth to network with one another, develop skills to assist in transitioning to adulthood and participate in cultural activities. Workshops included: Belief Systems, Measure 11, Power of

Vision, Trouble Shooting Real Life, Roles of Young Women, Roles of Young Men, Independence City, Meth Don't Go There, and Team Building. Participation was solicited from all Tribes, DHS, and the Native American Youth and Family Services (NAYA) - an ILP provider serving Native youth in urban Multnomah County. The number of attendees greatly improved from two years ago. The first attempt at a Native Teen Gathering resulted in less than 10 youth. This year's event involved 45 youth (increase of 320 percent). The following Tribes were represented: Confederated Tribes of the Grand Ronde, Klamath Tribes, Confederated Tribes of Warm Springs, Native youth in DHS custody, and urban youth served by NAYA from various Tribes and various states. Plans are underway to hold another Gathering in late Summer 2006.

One reason for the large increase of attendees was the decision to open the event to both foster youth and at-risk Native American teens as recommended by the Tribes. Youth who were not eligible for ILP services were required to pay an \$85 registration fee. The fee covered the cost of room and board for non-ILP eligible youth. Having a Tribe host the event also provided greater access to the Native American communities across the state. The Contractor offered to involve each Tribe in hosting a workshop. While not every Tribe took advantage of the opportunity, every Tribe was offered an invitation to participate in planning as well as work shop presentations.

### **Medicaid Option**

No change.

### **Fair and Equitable Treatment**

No change. All eligible youth are provided access to services on a fair and equitable basis.

### **Additional Annual Report Data**

The following pages contain the budget and other data normally submitted with the State's annual report for the ILP.

## **ILP Grant Expenditures**

It is important to note that Oregon has traditionally expended the Chafee funds during year two of the grant award. Efforts are being made to gradually shift Oregon's ILP spending cycle to match the state's fiscal year – July 1 to June 30. This gradual shift has resulted in an overlap of federal fiscal year expenditures (funds from two federal fiscal years may be expended during the months of July through September). This is due to the fact that the final balances are not known until late in the fiscal year. Therefore, flexible budget items may not be purchased until August or September. Yet mandatory budget items (contract payments, salaries, training) are being expended on a 12-month period beginning July 1.

## **FFY2004 – Final Expenditures**

Following is Oregon's accounting of funds expended from September 1, 2004, through September 30, 2005:

ILP Budget	
FY2004 HHS ILP Grant Funds (Basic Allocation)	\$2,216,643
FY2004 ILP State Match (Contractors/DHS SOC/Other)	<u>\$ 554,161</u>
<b>TOTAL SUPPORT/REVENUE</b>	<b>\$ 2,770,804</b>
(1) ILP Desk Salaries and OPE	\$ 107,234
(2) Supplies & Equipment	\$ 23,955
(3) Travel, Training, Materials, and Publications	\$ 15,068
(4) Annual Teen Conferences	\$ 62,074
(5) State Advisory Board	\$ 309
(6) ILP Contractor Payments (includes Basic, Additional Match Funds, and value of Contractor Generated Match)	\$2,117,412
(7) DHS Match (System of Care, and other)	\$ 117,965
(8) ILP Discretionary Funds (including voluntaries)	\$ 62,514
(9) Chafee Housing Services (8 percent of expenditures)	\$ 230,845
(10) Program Reviews	\$ 1,493
(11) Special Projects (CTB, FC Allstar, Website, Banner)	<u>\$ 31,935</u>
<b>TOTAL EXPENDITURES</b>	<b>\$ 2,770,804</b>
FY2004 HHS ETV Grant Funds (Basic Allocation)	\$ 723,184
FY2004 ETV State Match (* required to access full federal allotment)	<u>\$ 180,796*</u>
<b>TOTAL SUPPORT/REVENUE</b>	<b>\$ 903,980</b>
(1) ETV Scholarship Awards via OSAC	\$ 315,103
(2) ETV Disbursements via DHS Service Delivery Areas	\$ 69,884
(3) Outreach	\$ 9,735
(4) Staff, .5 FTE	\$ 29,587
(5) In-kind sacs./supplies	<u>\$ 106,077</u>
(OSAC/ASPIRE/FosterClub/FFC Scholarship)	
<b>TOTAL EXPENDITURES</b>	<b>\$ 530,386</b>

**Note: Oregon had \$298,875 ETV funds that were not accessed.**

This was due to a lack of matching funds. Oregon could have expended the full federal allotment had there been sufficient matching funds.

## FFY2005 – Projected Expenditures

Following is Oregon's current budget indicating the anticipated amount of ILP and ETV FY2005 funds to be expended from August 1, 2005 through September 30, 2006:

### ILP Budget

FY05 HHS ILP Grant Funds (Basic Allocation)	\$2,412,523
FY05 ILP State Match (Contractors/DHS SOC/Other)	<u>\$ 603,131</u>
<b>TOTAL SUPPORT/REVENUE</b>	<b>\$ 3,015,654</b>

### Expenditures:

(1) ILP Desk Salaries and OPE	\$ 112,000
(2) Supplies & Equipment	\$ 500
(3) Travel, Training, Materials, and Publications/Pathways	\$ 101,500
(4) Annual Teen Conferences (Retreats/Gathering)	\$ 70,000
(5) State Advisory Board	\$ 500
(6) ILP Contractor Payments (includes Basic, Additional Match Funds, and value of Contractor Generated Match)	\$2,155,000
(7) DHS Match (System of Care, and other)	\$ 152,281
(8) ILP Discretionary Funds (including voluntaries)	\$ 70,000
(9) Chafee Housing Services	\$ 300,000
(10) Program Reviews	\$ 1,500
(11) Special Projects	<u>\$ 52,373</u>
<b>TOTAL EXPENDITURES</b>	<b>\$ 3,015,654</b>

FY05 HHS ETV Grant Funds (Basic Allocation)	\$ 824,423
FY05 ETV State Match (* required to access full federal allotment)	<u>\$ 206,106*</u>
<b>TOTAL SUPPORT/REVENUE</b>	<b>\$ 1,030,529</b>

(1) ETV Scholarship Awards via OSAC & Admin. Fees	\$ 466,372
(2) ETV Disbursements via DHS Service Delivery Areas	\$ 66,023
(3) Outreach	\$ 21,055
(4) Staff, .5 FTE	\$ 15,094
(5) In-kind services/supplies (OSAC/ASPIRE/FosterClub)	<u>\$ 142,136</u>
<b>TOTAL EXPENDITURES</b>	<b>\$ 903,980</b>

**Note: Oregon anticipates \$255,879 ETV funds will not be accessed.**

This is due to a lack of matching funds. Oregon is able to expended the full federal allotment if there are sufficient matching funds. Discussions are on going with

OSAC, the ILP Providers, FosterClub, community partners, and the Legislature regarding this dilemma.

## **Progress on Additional Five-Year Plan Goals/Other Accomplishments**

### *Training:*

DHS provided or partnered with various community partners to sponsor and conduct the following trainings:

#### **Annual Teen Conference:** July 25 – 28, 2004, Portland, Oregon

Teen Conference was held at Lewis and Clark College. We had a second year of reaching our maximum attendance of 100 youth. The youth enjoyed experiencing dorm-style living, a university campus and cafeteria food. This was a good setting to discuss transition options, and continuing education or training after high school. The activities began with the FosterClub AllStars conducting a short skit to remind the youth of the expectations and rules of the Conference. After dinner the youth view two segments of the Aging Out videos. The viewing was followed by a debriefing session. Youth found the videos interesting and enlightening – showing how difficult it can be to transition out of the foster care system and that it is possible to be successful. Workshops over the next three days included: My Own Place: All-Star Housing experiences, Success in Higher Education, Foster Youth Involved (FYI), Recycle Art, The Apprentice: an employment challenge course, Getting Solid, and Independence City. This year the ever-popular dance was replaced by pizza and laser tag. The youth and adults raved about this activity. Also new this year was a VIP Panel. Throughout the conference, time was scheduled for the youth to work on topics regarding issues in the foster care system. The five groups each presented their issues, challenges, and solutions to a VIP Panel. The Panel consisted of the Foster Care Manager, the Oregon Foster Parent Association President, the ILP Coordinator, and Community Colleges and Workforce Development's Education and Workforce Youth Liaison. The Panel was there to hear from the young people. The stories were poignant and informative. The "VIP's" were able to take the youth's comments back to their agency or program and consider the youth voice when working on policy and practice issues. There was a short closing ceremony to draw a closure to the Conference.

**Teen Retreats** – July 2005 – August 2005; Tillamook, Bend, Portland, and Coos Bay, Oregon.

Regional Teen Retreats were held for the younger youth (ages 14-16) during the Summer of 2005. The Retreats are to focus on daily living skills, decision-making, and healthy relationships. Five FosterClub Allstars participated in the Teen Retreats, focusing their presentations on permanency and transition plans. Additional workshops included: CPR/First Aid, Self Defense, Cooking, Advocacy, Hygiene, Decision Making, and Employment (toured the Tillamook Cheese Factory and the Candy Factory). The youth also had fun activities: boating, swimming, beach sand castles, candle making, sewing, and crafts. A total of 83 youth participated (27 males, 56 females). There were 18 counties represented: Benton, Clackamas, Clatsop, Columbia, Coos, Crook, Deschutes, Douglas, Harney, Jackson, Jefferson, Lane, Linn, Marion, Multnomah, Polk, Tillamook, Multnomah, Washintgon. Plans are underway for a second round of Teen Retreats for Summer 2006.

**ASPIRE Fall Conference** – October 7 -8, 2004, Eugene, Oregon

This is becoming an annual event for DHS. The Fall Conference is when ASPIRE brings in their staff and volunteers to learn about new resources and how to assist youth to succeed. The ASPIRE program provides volunteer mentors to assist youth with accessing financial aid for postsecondary education or training. DHS provided funding to allow ASPIRE to incorporate the ETV program into the ASPIRE curriculum distributed to all ASPIRE staff and volunteers, and assisted with a portion of the conference costs. DHS was allocated 75 slots for Indian Child Welfare (ICW) caseworkers, ILP providers, and foster parents. The ILP Coordinator provided a workshop regarding the ETV Program – eligibility, access, and other supports available through the ILP. Plans are currently underway to increase the number of workshops that DHS, ILP, and ASPIRE staff would find useful regarding the postsecondary needs of foster youth.

New this year, the Education Credit Management Corporation (ECMC) conducted a pre-conference training. The training was well attended by the ILP Providers and several DHS staff. ECMC discussed current happenings in the financial aid industry and provided updates on free products and services offered by ECMC. Each participant left with a wealth of information and the “Realizing the College Dream” binder (teacher/advisor training). The curriculum contained activities to assist a young person to work through the process of determining their career

interests and then determining which classes they should be enrolled in during high school.

ECMC also worked in partnership with OSAC to print the “Opportunities 2005-06 Oregon Guide to Education After High School.” The Opportunities guide is available free of charge. DHS obtained 200 copies and distributed a supply to the ILP Providers, and SOC Teen Experts. Copies are also available at any of the T2/ILP trainings conducted since November 2005.

### **ILP Specific Training**

#### T1/T2 Transition Plan Training (provided upon request)

The ILP Coordinator and ILP Tri-County Liaison conducted T2/ILP training to assist the field staff with transition planning and learning the ILP eligibility and services available. Staff learned how to use the new transition planning forms and involve youth in the planning process. In addition to learning what was available through the ILP, participants also learned about the expectations of youth who participate in program services.

The ILP provided training as follows:

- 9 – local branch offices (Eugene, La Grande, Polk, Newport, Multnomah, Ontario, Bend, Burns, John Day)
- 2 – Citizen Review Board (10/29/05 CRB Conference, Mult. Co. brown bag lunch)
  - 5/4/05, DHS Community Development Coordinators (in coordination with Vocational Rehabilitation’s Youth Transition Program Coordinator)
  - 6/7/05, Marion/Polk Foster Parent Association
  - 6/21/05, Marion Co. Relative/Adoptive/Guardianship caregivers
  - 11/16/05, IPOP facilitators, joint presentation with JRP, Salem
  - 9/28/05, Annual ICWA Conference
  - 4/13/06, Lane County Foster Parent ILP training

#### **ILP Display Booths**

- 6/18/05, Marion Co. Foster Parent Appreciation picnic
- 7/16/05, Supportive Adolescent Project (SAP)/ILP/Greater Multnomah Foster Parent Association picnic
- 11/9/05, Shoulder-to-Shoulder Conference

4/6/06, Clackamas Community College Youth Opportunity/Employment Fair

Provider Training – The ILP Providers continue to host a bi-monthly ILP Provider meeting. The meetings serve as a networking opportunity, training day, and include an update by the ILP Coordinator on current issues. The ILP Coordinator also conducted four trainings for new ILP provider staff. Training includes general ILP services, contract requirements (including match), referral process, ILP forms, branch contacts and an emphasis on positive youth development.

The ILP Tri-County Liaison (serving Multnomah, Clackamas, and Washington Counties) continues to meet monthly with the tri-county ILP providers. ILP providers have the opportunity to discuss issues specific to their urban service areas. The Providers continue to consider these meetings a good use of their time.

Casework Practice – 2005/2006

The ILP continues to be included in Casework Practice on a regular basis. This is an excellent opportunity to ensure every worker is at least aware of the importance of involving teens in planning for their futures and the services available to assist with the transition to adulthood. Training occurs almost monthly, with the ILP Coordinator presenting a 55-minute session on this topic. All participants receive a folder containing ILP forms and program information.

System Of Care (SOC) Experts Quarterly Meetings – As a result of a recommendation by the ILP State Advisory Committee, the SOC Teen Experts are meeting on a quarterly basis. The first quarterly meeting was held on 12/6/05. The SOC Teen Experts have enjoyed the opportunity to meet with other designated “experts” in the field to network and problem solve.

Service Delivery Area 2 Foster Parent Training workgroup – This workgroup was created due to the need to ensure foster parents receive current and accurate information regarding teen services. A meeting was held in April and May of 2005 between SDA 2, ILP Tri-County Liaison, local ILP Providers, Juvenile Rights Project, and the Intensive Family Services (IFS) contractor. The group decided to hold a training in the Fall of 2005 regarding ILP services (basic skills, housing, ETV), Youth Decision Meetings (YDM) and Senate Bill 808. The goal was to inform foster parents of the Transition Readiness Index (T1) and Comprehensive Transition Plan (T2) and how that is to be used in planning with

youth. Eventually, the training was also coordinated with the PSU Partnership, Metro Training Unit.

During the training, foster parents expressed concerns regarding youth and young adults in their homes who were not appropriate for the services discussed. This feedback led to additional trainings with foster parents focused on Vocational Rehabilitation, Mental Health, Developmental Disabilities (mental retardation and developmental and physical disabilities) and schools Individual Education Plan (IEP).

On April 25, 2006, the Oregon Parent Training and Information (ORPTI) Center and Vocational Rehabilitation Services conducted training addressing the concerns mentioned by foster parents. This Fall (late September or early October) a training with Multnomah County DD and Mental Health services will provide information on how to assist youth to transition from the youth systems to the adult systems. Options to have Cascadia and Project Respond (mobile mental health crisis team) present information are under consideration. Future plans include repeating the series in the Spring of 2007. Trainers would present the “current version” of what was presented in the Fall of 2005, indicating any systems changes (programs added/dropped, eligibility changes, etc.).

**Portland State University Child Welfare Partnership Training (related to teens and teen issues):**

Casework Practice (includes a segment on transition planning with teens)  
The IEP Dance: Learning the Steps  
Parenting the very difficult child: Keys to being successful  
The Heart of the Matter: Basic Child Development isn't so Basic Anymore  
Transitioning to Adult Living  
Ages and Stages of Attachment  
When Behavior Modification and Consequences Don't Work  
Grief and Loss  
Post Traumatic Stress Disorder (PTSD) vs. Attention Deficit Disorder (ADD)/Attention Deficit Hyperactivity Disorder (ADHD)  
Medication Management for Children in Foster Care

Please review the Title IV-E training section for further details regarding future plans for adolescent related training for caseworkers and foster and adoptive parents.

## **Miscellaneous Training:**

Clackamas: C-TEC sponsored training for youth

7/05, Beginning Retail Training

9/05, Summit Up Leadership Camp

10/05, DPSST Security License Training

Shoplifting & Retail Security Training

Oregon Childcare Certification Training

11/05, Oregon Peacemakers Conference

12/05, Culinary Arts

1/06, Teen Mediation Training

Oregon Traffic Control & Forklift Training

2/06, Youth & Family courts Mediation Training

First Star Customer Service Training

3/06, Introduction to Wildland Fire Fighting Training

Introduction to infant Massage for Day Care

Spring Break Technology Career Exploration

4/06, C-TEC Opportunity & Employment Fair-Day Internship

Zero Point Retreat

Front Desk & Spa Assistant Training

Oregon State Recognizing & Reporting Child Abuse & Neglect

Introduction to Health Care

Medical Terminology

Beginning Self Contained Underwater Breathing Apparatus

(SCUBA) Certification Training

5/06, Infant & Child Cardiac Pulmonary Resuscitation (CPR) Training

Year-round activities: 40-hour volunteer employment internships

Youth Employment Made Possible Internships

Youth Employment Labs – Employment Made Possible

Marion County: Meth & Teens, presented to the general public.

## **Special Projects:**

*ILP Peer-to-Peer Orientation* – February 1 – 2, 2006, Tulsa, OK

Oregon's ILP Coordinator was invited to participate at the ILP Peer to Peer Orientation as a peer mentor. The Orientation not only tapped the knowledge of experienced ILP Coordinators from around the country, it also tapped the creativity of new Coordinators.

*ILP/TLP Pathways to Adulthood Conference* – May 17-19, 2006, Portland Oregon was excited to be the host state for the Pathways conference this year. DHS made a significant effort to include teen workers, ILP Providers, and ICW workers at Pathways. The ILP assisted with registration fees for those that the local branches could not afford. DHS was able to send 87 staff, ILP Providers, and ICW workers to Pathways. Feedback has been positive. The ILP Providers were pleased with the event and enjoyed the opportunity to network with Providers from across the country.

*Clackamas Teen Stakeholders* – The Clackamas DHS office continues to pull together a variety of community partners and DHS programs that provide services to teens in Clackamas County. The Stakeholders meet once a month to update each other on new resources, have guest speakers, and hold case staffings regardless if the youth in question is a foster youth. Clackamas has had great success in spreading knowledge about local teen resources with this collaboration. Each month there seems to be a new community partner at the table. The Tri-County ILP Liaison attends these meetings on a regular basis and presents any time the ILP has new information.

*Camp To Belong (CTB)* – The ILP has provided funding for teen sibling groups to attend Camp To Belong for the past three years. The Oregon Foster Parent Association (OFPA) has partnered with entities in Washington and Idaho to create a Northwest Camp To Belong. The ILP provided funding for the transition planning/higher education portion of Camp To Belong and continues to support ILP eligible teens/siblings by sponsoring a portion of the registration costs.

*Child Welfare Advisory Committee, Teens Sub-Committee* – The sub-committee continues to focus efforts on: Creating a consistent intake response and services for teens. The sub-committee has surveyed the following State agencies to determine their intake processes: DHS branch offices and SDAs, Oregon Youth Authority, Juvenile Departments, and the Commission on Children and Families. Sub-Committee members met with SDA managers to discuss the survey results and to determine what they found as barriers to consistent intake for teens. The Sub-Committee has created a report and recommendations for the DHS CAF Advisory Committee. The Sub-Committee will be hearing from several counties which currently have teams in place to review, triage and collaborate on services to teens at risk of or currently involved with child welfare, juvenile justice, mental health,

and community social services. Progress in this area will be detailed in next year's report.

*ILP State Advisory Committee* – The ILP Coordinator continues to solicit advice and feedback from this committee. As stated previously in this report, the Committee has created several workgroups to assist with the goals of the ILP's five-year plan. Progress will be reported in next year's report.

*My Life Project* - The purpose of the My Life Project is to learn about the best ways to help young people in foster care with disabilities take charge of their lives and transition to successful adulthood. My Life Project is in year two of a three-year plan. The ILP includes the My Life Project staff in all ILP Provider correspondence. While the Project is not an official ILP Contractor, My Life Project is serving ILP eligible youth. Therefore, whatever resources or news may be of interest to eligible youth or ILP providers is forwarded to My Life Project as well. Currently the My Life Project sample includes 32 youth in Multnomah County, 16 of which are receiving one-on-one coaching on a weekly basis. All youth in the project have received, or are receiving special education services through their schools. All youth in the project will be reassessed at yearly intervals for 3 years to observe long-range outcomes.

*Action Research Training* – 2/6/06, Eugene, OR

The CAF Self-Sufficiency Program is the lead agency with regard to a new curriculum being designed for teen pregnancy prevention. The ILP Coordinator was invited to participate in a presentation by Action Research Training regarding the new curriculum. The curriculum is designed to solicit the youth voice in the development of the new state plan for Teen Pregnancy Prevention and Sexual Health issues. The curriculum is being piloted in Multnomah, Jackson, and Deschutes counties. Partners in this project are Americorp, Health Departments, Commission on Children and Families, Juvenile Rights Project, Students Today Aren't Ready for Sex (STARS), Planned Parenthood, and the University of Oregon. Results will be available in the Fall of 2006.

*Transitional Housing* – The Next Door, Inc. (NDI), The Dalles, OR

The NDI is the ILP Contractor serving Hood River, Wasco, Sherman, Gilliam and Wheeler counties. NDI has been working with Housing and Urban Development (HUD) for the past three years to obtain a housing facility to assist community teens with transitional housing. Currently, NDI has a duplex that houses two youth and one adult resident assistant. The NDI is planning to acquire a duplex that will

house six youth and one adult resident assistant. Long-range goals include a second duplex to house an additional 6 youths and one adult resident assistant. Youth who are participating on the ILP Housing Programs are able to request this transitional housing if needed.

### **Additional Demographics**

Descriptions of Oregon's youth population by total numbers eligible, gender and ethnic breakdown, types of placements, and special problems at the time of services can be found in Attachment A.

## Oregon's Independent Living Program – Federal Fiscal Year 2005

Total number of youth **eligible** to receive federally funded Independent Living Services:  
(Including both Title IV-E eligible AND non-Title IV-E eligible youth, age 14 through 20.) 5,097

<b>Types of Placements</b> (as of 10/05 or last known placement)							
Age of Youth	Total Number Eligible	Foster Home SFAM/SEFC	Group Home SGRP	Residential Treatment SEAS/SRES	Independent Living SIND	Kinship Care SREL	<u>Other Runaway Unknown AWOL Case Closed</u>
14 years	608	322	5	152		129	
15 years	623	358	7	151		107	
16 years	673	407	7	160		99	
17 years	681	413	7	156	7	98	
18 years	638	379	7	128	28	93	3
19 years	647	371	10	100	45	109	12
20 years	1,227	630	21	268	75	210	23

Total number of youth **receiving** Chafee Independent Living Services: 1,248

		<b>Types of Placements At Time of IL Services</b> (Data provided for the numbers of youth in each category.)						
<b>Age of Youth</b>	<b>Total</b>	<b>Foster Home</b>	<b>Group Home</b>	<b>Residential Treatment</b>	<b>Independent Living</b>	<b>Kinship Care</b>	<b>Hospitalized</b>	<b>Other/Unknown</b>
14 years	15	11		2		1		1
15 years	89	60	1	16		7	2	3
16 years	218	151	3	27		27	1	9
17 years	326	224	7	52	7	26	1	9
18 years	321	215	5	35	34	22	2	8
19 years	176	99	1	8	42	15	3	9
20 years	103	47	1	8	31	9	1	6

		<b>Gender Breakdown</b>						
		<b>(By age)</b>						
<b>Gender</b>	<b>Total</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>
Female	758	9	60	122	203	192	107	74
Male	490	6	44	96	123	129	69	29

*Verified Special Problems:* An actual count of youth served with special problems was not available and cannot be obtained from the following breakdown, as a youth may have multiple special problems at any one time.

<b>Types of Special Problems At Time of IL Services</b>								
(Data provided for the numbers of youth in each category.)								
<b>Age of Youth</b>	<b>Hearing-Vision-Speech</b>	<b>Alcohol and/or Drug abuse</b>	<b>Health prob. epilepsy - c.palsy</b>	<b>M.R. learning disabled</b>	<b>Teen Parent</b>	<b>Delinquency</b>	<b>Emotionally Disturbed</b>	<b>Pending/Other/None</b>
14 years	*	*	*	*	*	*	*	*
15 years	4	1	1	10		3	36	5
16 years	1	6	8	22		9	83	10
17 years	6	10	12	33	4	18	118	18
18 years	8	13	9	27	2	11	115	14
19 years	5	1	4	14		2	42	6
20 years	3			7	2	2	8	6
Female	12	23	17	54	8	22	221	40
Male	15	8	17	59		23	181	19

\* The ILP is working with research to split out the 14 and 15 year old categories. However, at this time they are combined in one category of 15 and younger.

<b>Ethnic Breakdown of Youth Served</b>							
<b>(By Age , Ethnicity and Gender)</b>							
<b>Age of Youth</b>	<b>Asian</b>	<b>African-American</b>	<b>Hispanic *</b>	<b>Indian</b>	<b>Pacific Islander**</b>	<b>White</b>	<b>Unknown</b>
14 years	*	*	*	*	*	*	*
15 years		4	*	15		75	10
16 years	2	19	*	16	1	152	28
17 years	2	26	*	34		223	41
18 years		23	*	28	1	240	29
19 years	1	38	*	6		122	9
20 years	3	17	*	1		74	8
<b>Total</b>	<b>8</b>	<b>127</b>	<b>*</b>	<b>100</b>	<b>2</b>	<b>886</b>	<b>125</b>
<b>Female</b>	<b>6</b>	<b>79</b>	<b>*</b>	<b>54</b>	<b>1</b>	<b>535</b>	<b>83</b>
<b>Male</b>	<b>2</b>	<b>48</b>	<b>*</b>	<b>46</b>	<b>1</b>	<b>351</b>	<b>42</b>

\* Rather than an Ethnicity/Race, Oregon tracks Hispanic as a “Cultural Origin”, which is indicated on the FACIS information system member detail page as “H” for Hispanic or Latino, “O” for Not Hispanic or Latino and “U” for Unable to Determine.

## **6. Additional Supporting Information (Section D)**

### **a) Juvenile Justice Transfer**

- *Report the number of children under the care of the State child protection system who are transferred into the custody of the State juvenile justice system, and*
- *Contextual information, such as the time period for which they are reporting, and reporting population.*

For the time period covering 10/1/04 through 9/30/05 (FFY 2005), 51 children exited foster care directly to Oregon's Juvenile Justice System -- Oregon Youth Authority.

## b) Inter-Country Adoptions

*Identify/describe:*

- *The number of children who were adopted from other countries and entered into State custody in FY05 as a result of the disruption of a placement for adoption or the dissolution of an adoption;*
- *The permanency plans and the reasons for disruption or dissolution;*
- *The agencies who handled the placement or adoption, and the reasons for the disruption or dissolution;*
- *Activities that the State has undertaken for children adopted from other countries, including the provision of adoption and post-adoption services.*

The State assists Oregon families who have adopted internationally and whose health insurance or other support services required that they re-adopt the child in their U.S. state of residence to complete the legal process for re-adoption in Oregon. This includes providing families in electronic and paper formats with the Oregon statutes and administrative rules regarding adoption, as well as the required forms that must be submitted to the court.

Staff from the DHS CAF Central Adoptions Unit meets monthly with the member agencies of the Coalition of Oregon Adoption Agencies (COAA), which includes more than a dozen of Oregon's private licensed adoption agencies who do international adoptions. The agendas of these meetings have an indirect, positive impact on the services families served by these agencies receive. In addition, representatives from these agencies served on a DHS-led workgroup that rewrote Oregon's Administrative Rules governing the licensing of private adoption agencies. Again, this involvement indirectly impacts the families served by these agencies by assuring state standards that protect them and their rights and are consistent with those set forth in the draft rules of the federal Inter-Country Adoption Act.

Oregon families who adopt children internationally have some access to the Oregon Post Adoption Resource Center (ORPARC). ORPARC was created in 1999 utilizing Title IV-B (2) Family Preservation Funds. The primary focus of ORPARC is to provide services to support the adoptions of children from the public child welfare system. These services include information and referral, a lending library, organization of parent support groups and training on a wide

variety of topics related to parenting adopted children. ORPARC also operates a free web site which can be accessed by anyone. The following ORPARC services have been, and continue to be, available to families of internationally adopted children:

- a) Access to the ORPARC web site.
- b) Attendance, on a space-available basis, at all trainings offered by ORPARC. Because these trainings are offered frequently and at multiple sites across the state, space is generally available. Non-child welfare adoptive families are charged a nominal fee (usually \$5) for attendance.
- c) Brief information and referral (I & R) calls. Although the ORPARC newsletter is not sent to Oregon families who have adopted internationally, they often contact ORPARC as the result of seeing information about ORPARC in the Northwest Adoptive Family Association (NAFA) newsletter or other media. ORPARC provides the callers with brief information, such as the name of a therapist in the family's geographic area who has expertise in adoption-related issues.
- d) Access to the ORPARC newsletter.

In the fall of 2003, the Post-Graduate Certificate Program in Therapy with Adoptive Families was launched. This was made possible through a partnership created by DHS with ORPARC and the Portland State University's Graduate School of Social Work and the Graduate School of Education. The first cohort of 27 mental health professionals to complete the 100-contact hour (1 weekend per month for 10 months) graduate-level program taught by nationally recognized adoption professionals received their certificates on June 12, 2004. The second cohort completed the program and received their certificates in June 2005. Their names and resumes appear on the ORPARC web site and are shared with adoptive families (including those who have adopted internationally) and adoptive family organizations, such as NAFA. The primary objective of the Certificate program is to increase therapeutic supports for adoptive families, including those who have adopted internationally, across the State of Oregon.

In an effort to reduce travel and make the program more accessible to a larger number of professionals, the curriculum has been revamped to be a web-based curriculum. Experts from across the country are presenting in the monthly classes

in a forum that includes participation in person by individuals or on the web. This revised curriculum will begin with the first class in September 2006.

Time period: June 1, 2005 thru May 31, 2006.

**Disrupted: Children who entered the US with the intent of being adopted but for whom adoption was not finalized:**

<i>Child's Name</i>	Marie
<i>Country of Origin</i>	Sierra Leone
<i>Reason for Disruption</i>	Prospective adoptive parent could not produce in a timely manner proper legal papers to comply with Oregon's laws to complete the adoption. The adoption petition was dismissed by the Court on 5/24/06.
<i>Agency that handled Adoption</i>	Maine Adoption Placement Service (MAPS – Maine/Cherith International)
<i>Permanency Plan</i>	Child remains in the prospective adoptive parent's custody.

**Dissolved: Children from other countries who were adopted and the adoption subsequently was dissolved.**

**Children whose adoption was dissolved and entered State custody:**

<i>Child's Name</i>	Qui
<i>Country of Origin</i>	China
<i>Reason for Dissolution</i>	Physical abuse by parent
<i>Agency that handled Adoption</i>	Plan Loving Adoptions Now (OR)
<i>Permanency Plan</i>	Court ordered guardianship with a family friend. (This child came into State custody on 5/16/05, but was not previously reported.)
<i>Children's Name</i>	Victor and Tatyana
<i>Country of Origin</i>	Russia
<i>Reason for Dissolution</i>	Alleged sex abuse by father to Tatyana
<i>Agency that handled Adoption</i>	World Partners (GA)
<i>Permanency Plan</i>	Children are currently in foster care. Adoption is part of the planning, however children are not yet freed for

	adoption and there is no identified resource. Criminal investigation continues.
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**Children whose adoption dissolved, but did not enter state custody:**

<i>Child's Name</i>	Marvin
<i>Country of Origin</i>	Guatemala
<i>Reason for Dissolution</i>	Parent unable to manage special needs of child.
<i>Agency that handled Adoption</i>	Plan Loving Adoptions Now (OR)
<i>Permanency Plan</i>	Mother relinquished and the child was subsequently placed with another family who finalized the adoption on 3/22/06.
<i>Child's Name</i>	Krisada
<i>Country of Origin</i>	Thailand
<i>Reason for Dissolution</i>	Parents unable to manage child's special needs.
<i>Agency that handled Adoption</i>	Originally, Holt Int'l. (OR), however, child was privately placed by parents for second adoption.
<i>Permanency Plan</i>	Child was privately placed with another family who finalized the adoption on 3/10/06.
<i>Child's Name</i>	Peter
<i>Country of Origin</i>	Liberia
<i>Reason for Dissolution</i>	Parents were unable to manage child's special needs.
<i>Agency that handled Adoption</i>	No re-adoption in Oregon.
<i>Permanency Plan</i>	Parents relinquished to Plan Loving International which subsequently placed child with a family for purpose of adoption. This adoption is pending.

### c) **Child Welfare Demonstration Projects**

- *Identify if the States has a child welfare demonstration project;*
- *Describe the accomplishments and progress in the child welfare demonstration project as they relate to the goals and objectives in the State's CFSP (where applicable); and*
- *Discuss how Title IV-B funds are used to maximize the use of flexible Title IV-E dollars in the demo.*

**Approved:** March 24, 2004 - five-year extension granted through March 31, 2009.

**Interim Evaluation Report Date:** September 29, 2006 - Portland State University

**Final Evaluation Report Date:** October 31, 2009 - Portland State University

The fourth amendment, approved in March 2004, extends the Waiver Demonstration for five additional years beginning April 1, 2004 through March 31, 2009. During the extension period, the Waiver will:

- (1) Continue the demonstration of the flexible use of Title IV-E;
- (2) Continue the demonstration of Subsidized Guardianship;
- (3) Within the flexible funding component, undertake a special study of Family Decision Meeting Service Coordination within select counties;
- (4) Modify the evaluation design, given these programmatic changes; and
- (5) Adjust the current methodology for determining cost neutrality to account for these changes.

The state utilizes the Title IV-E Waiver Demonstration Project as an opportunity to enhance the Strengths Needs Based System of Care initiative, with the collaboration of local community partners, and to develop new innovative services. The intent of the waiver is to augment the agency's on-going efforts to build a strong System of Care using flexible services to prevent family breakup and establish safety, permanency and well being for children as soon as possible. Our commitment to strengths/needs based services is ideally suited to these goals and is the driving force behind the Title IV-E Waiver Demonstration project.

## **TARGET POPULATION**

Children ages 0 to 18 who are at risk of out-of-home placement or children who are in out-of-home placement are eligible to participate in the demonstration.

The target population for the Subsidized Guardianship component is children between the ages of 4 and 17 who have been in substitute care for more than 12 months and lived continuously in a safe and stable home with the prospective guardian for at least six months.

## **JURISDICTION**

Oregon operates its project statewide in all counties and tribes with a formalized Title IV-E agreement with the exception of Jackson and Clackamas counties as the Control Group. Guardianship assistance is available statewide.

## **INTERVENTION**

Oregon provides financial flexibility to Districts to help preserve families, provide permanency for children in care, and improve safety outcomes. The State designed its demonstration project to encourage local collaborations among community stakeholders to promote the development of more effective, efficient, and innovative child welfare practices.

### **Innovative Services**

Most services are contracted to local community service provider agencies in the districts.

Examples include but are not limited to: enhanced visitation, parent mentors, parent assessment visit services, children of incarcerated parents, life skills coach, drug and alcohol outreach, Temporary Assistance to Needy Families (TANF) as a children's program, relative search, domestic violence support group for families, children's mental health advocate, intensive infant/toddler services coordinator, educational advocate, case management coordinator, accelerating permanency, adoption acceleration, Housing and Urban Development (HUD) facilitator, foster parent liaison, team decision meetings, and Oregon family decision meetings.

## **Subsidized Guardianship**

Oregon implemented its Subsidized Guardianship program in year three of the demonstration. In order to be eligible for the Subsidized Guardianship program, children must have been in substitute care for more than 12 months, lived continuously in a safe and stable home with a prospective guardian for at least 6 months, and must be at least 12 years old if the prospective guardian is not a relative. As of May 31<sup>st</sup> there are 564 active Subsidized Guardianship cases.

## **EVALUATION DESIGN**

The evaluation includes a statewide process evaluation and three specific components: (a) Children and Family Services Review (CFSR) performance measure monitoring and analysis, (b) Subsidized Guardianship, and (c) Family Decision Meeting Service Coordination (FDMSC). Designs and methods employed to conduct the process evaluation and each component are tailored to address key questions of interest to the federal and state stakeholders as they relate to specific uses of Waiver flexible funds.

The evaluation is being redesigned to enhance part (a) Children and Family Services Review (CFSR) performance measure monitoring and analysis and (b) subsidized Guardianship. Part (c) Family Decision Meeting Service Coordination (FDMSC) is being eliminated due to insufficient target sample size and insufficient comparison sample size.

Some of the challenges faced included, but were not limited to, recruitment during implementation was slow to be established and was complicated by staff turnover at the branch level and despite adjustments to the protocol to allow for easier compliance the procedure for referral was not successful. Additionally the number of families fitting the criteria established for participation in the evaluation was smaller than data had indicated resulting in fewer qualifying families. And the attrition rate (27%) was higher than expected. The most common reasons were parent refusal, case closure, and agency loss of contact with parents.

## d) Foster and Adoptive Parents Recruitment

- *Describe progress and accomplishments made with regard to the diligent recruitment of potential foster and adoptive families that reflects the ethnic and racial diversity of children in the State; and*
- *Describe planned activities for recruiting foster and adoptive families in FY07.*

### Diligent Recruitment

#### Overview:

During FFY 2005 and 2006, Oregon experienced many of the same successes and challenges in meeting the needs of children requiring foster care and/or adoptive placement that we have seen during the past few years:

- More children entering foster care than exiting
- Keeping siblings together
- Maintaining children in their same school
- Relative care placements
- Placements within the child's neighborhood/community

The children needing care by the state has continued to be a direct result of parental drug and alcohol abuse as the predominate factors. In FFY 2005, 53.5% of the children who entered foster care had four or more reasons for removal, thus the needs of the children and the complexities that they enter care with remain a significant challenge for the state. As a result, relative caregivers, foster parents, and adoptive parents must increase their parenting skills, ability to be flexible and be able to advocate for meeting the needs of the child. The state must continue to increase our ability to support the families and recruit additional families to care for these children.

Oregon remains committed to placing children with extended relatives and within their same communities whenever possible. Often, this commitment requires the state to provide an emergency certification of a family in order for the child to be placed with their relative or neighborhood family. Oregon administrative rules continue to be refined to support this type of emergency placement for children.

Although the reasons for a child's removal have increased and have become more complex, the overall demographics of the child have remained the same. There were statistically insignificant changes in the overall make-up of the age of children and the race of children in care FFY 2004 and FFY 2005.

### **Successes:**

Oregon Administrative rules provide the ability to "specially certify" families for specific children. The special certifications are for families specifically recruited to care for a child who is a relative, friend, and/or neighbor who may be from the child's school or faith community. The families are required to meet the same level of *safety standards* as any other foster parent, but the difference is the sequencing of rule requirements such as training that may be allowed after placement versus prior to placement. This type of special "diligent" recruitment for children accounts for approximately 75% of the "new" foster/relative family certifications in FFY 2005. In Oregon, 2,389 new families were certified in FFY 2005.

Providing "Special Certifications" as a strategy for diligent recruitment efforts has allowed Oregon to focus on our ability to:

- Place children with relatives
- Place children in the same neighborhood/community
- Maintain same school placements
- Increase sibling placements
- Minimize placement moves in care

For the children requiring a foster family placement in Oregon, 30% of the children are placed with a certified relative caregiver. The rate of relative placement has remained the steady the past two years. In addition, Oregon has required all relatives caring for children in the state's legal care and custody to be certified under the same rules as all foster parents.

The educational stability of children in foster care has been a concern of the Department and advocates for some time. This is one area Oregon has focused on as a result of the Child and Family Service Review (CFSR). The importance of a stable educational setting for foster children was brought forth in the last legislative session in Oregon through HB3075. This bill allows for a foster child to remain in the same school regardless if they enter foster care in a different neighborhood or even different school district. The law goes on to require DHS to

provide the transportation for the child to maintain the school placement. The additional requirement in the new law specifically addresses foster children; if the child does need to change schools, the schools are required to exchange school records within 5 days as opposed to 10 days for other children.

The educational stability outcome is important to identify as a diligent recruitment effort for families within the same school settings from where children are coming into care. Oregon works to provide “targeted” recruitment in neighborhoods and through schools, which have a high incident of care rate. Often times, school personnel are either coming forward to assist in providing care or can provide the Department recommendations of families that we may approach about a specific child. In several schools around the state, school newsletters, resource fairs, or other school functions will allow the Department to include information about foster parenting in the local community.

As you will read elsewhere in this document, the state provides a focus toward diligent recruitment and support for children with Native American heritage. The most notable effort each year is the ICWA conference, which brings staff from tribes and the state together to learn and experience from one another, and to develop relationships and strategies to better recruit and support families for children.

During this past year we have been able to sustain many of our collaborations as well as increase some interest and new efforts. Most notable is our continued coordination with:

- A statewide 1-800 Foster/Adoptive Inquiry Line that remains connected to the *Adoptuskids* and is our primary line for the National Foster Parent Association referrals. **1-800-331-0503**
- Wednesday Child programs with local Oregon media.
- Our ongoing partnership with the State of Idaho for the “Boise Wednesday child program”. This collaboration with Idaho has allowed Oregon to recruit more diligently in our rural Eastern Oregon communities for children.
- The ongoing work with the Boys and Girls Aid Society, Northwest Adoption Exchange, Oregon Post Adoptive Resource Center.
- Oregon Foster Parent Association.

Some of our newer and growing collaborations are within local communities and more specifically with the business and faith communities, which historically have

not been brought consistently into collaborative efforts in Oregon. Collaborations such as:

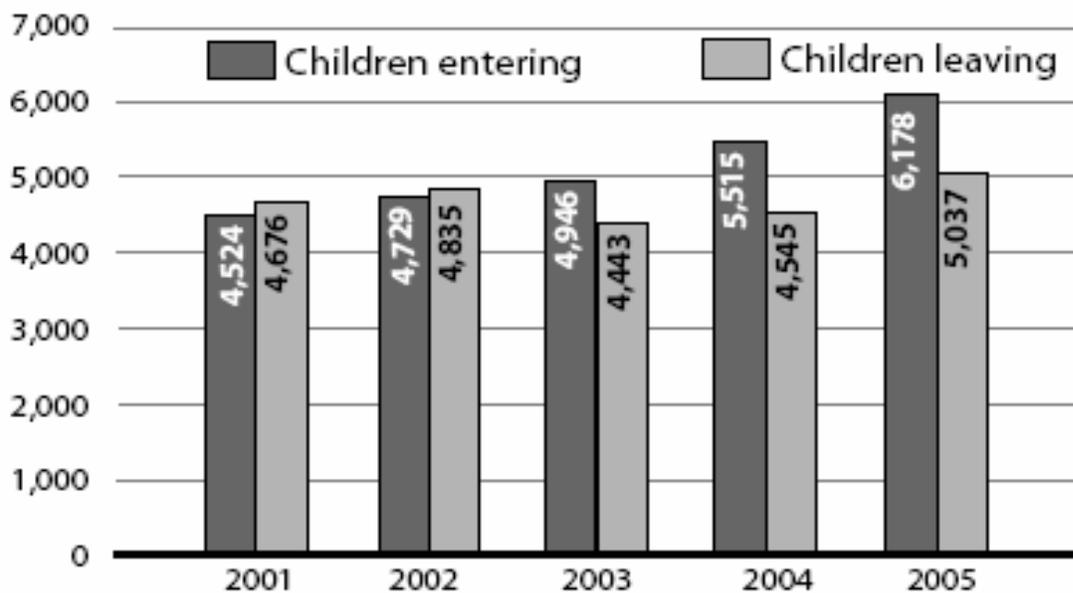
- Salem Exchange Club - Picnic with a Purpose
- Royal Family Camps - North Willamette Valley
- Foresters - Oregon Foster Parent Association Golf Tournament
- Portland church community – Adopting foster families in the neighborhood
- Reid Iford TV (donated work) - Foster Parent Recruitment Public Service Announcement
- Print media and TV media -- numerous articles this past year seeking stories about “who” foster parents are and how communities can help.

**Challenges:**

As noted earlier, the number of children coming into foster care is out pacing the number of children leaving foster care, resulting in a growth of children in the custody of DHS and necessitating the need for more foster and adoptive families.

**Children entering/leaving foster care**

*Federal Fiscal Year 2005*



A second challenge is providing a consistent and sustained focus to statewide recruitment for foster and adoptive families. The primary challenge is trying to

maintain a focus of overall general recruitment while still addressing the day-to-day crises of children needing care. Providing the emergency certification of relatives to care for the children has often overshadowed our ability to pro-actively reach out to communities for recruitment.

During this past year we have not been as consistent in maintaining, connecting or reaching out for additional assistance through the formal organizations of:

- FosterClub.Inc, *Neighborhoods Count*
- Adoptuskids, *Answering the call*

Lastly, and most importantly a challenge to address is from the feedback we receive from foster parent communities; not only is it a challenge to care for children with complex needs, but having limited or minimal support services available to them can impede their ability to foster children. The support services which are most often requested that are currently not available consistently across the state are: daycare for working foster parents, crisis after-hour support for mental health services, respite care and Department staff who have workloads that would allow them to spend more time in and with the foster family homes.

### **Fast Facts:**

- In federal fiscal year on an average daily basis there were:

4,450 caregiving families in 2003

4,830 caregiving families in 2004

5,373 caregiving families in 2005

- The Department certified 2,389 new families in FFY 2005 to care for children.
- 75% of the new families were certified for a relative child or a specific child known to the families; neighbor, extended family.

## Plans for FFY 2007

Continue with our primary priorities of placing children:

- with relatives
- in the same neighborhood/community
- in the same school placements
- with siblings
- to minimize placement moves in care

The primary focus will include strengthening the Department's administrative rules requiring certification of families in a timely manner and training staff on the rules and procedures to ensure this occurs timely for children.

The Department is engaged in re-writing a significant number of administrative rules, policies and procedures. Within these efforts administrative rules around placement matching, caseworker contact with children and families and ensuring quality in foster care are all being revised to provide more specific direction in caring for children and supporting the foster and relative caregivers.

The central office program staff will be re-engaging with the Adoptuskids, national program more consistently starting with this summer's Regional Convening Collaboration with Region X states. The efforts will assist Oregon's ability to address the federal Outcome Measures; P1: Children have permanency and stability in their living situations, P2: The continuity of family relationships and connection is preserved for children, WB2: Children receive appropriate services to meet their educational needs.

The state has started a process of reviewing different strategies to maintain a consistent focus on recruitment in a public system while meeting the crises of the day-to-day needs of children. This review of models included our neighboring state Washington, who hosts a model of recruitment campaign and outreach with communities by foster parent supported community contracts. Oregon anticipates moving a model forward during this next reporting period.

In addition, the Department is currently evaluating what services, foster parent supports and program enhancement requests will be made to the next Legislative Assembly for assistance.

**e) Adoption Incentive Funds**

- *Specify the services provided to children and families with the adoption incentive funds (if applicable).*

Oregon received a total of \$1,752,617 in federal Adoption Incentive grants for increased adoptions over the federally-established baselines for 2000, 2001 and 2002, as follows:

2000:	\$	166,617
2001:	\$	1,362,000
2002:	\$	224,000

Oregon received no adoption incentive payments for FFY 2003, FFY 2004, or FFY 2005. We do not anticipate any adoption incentive payments for FFY 2006.

**f) Current Executive Initiatives – Healthy Marriage, Fatherhood, Rural Development and Faith-Based and Community Initiatives**

- *Describe services and activities that the State provided using IV-B funds that support the initiatives;*
- *Identify who is providing the service;*
- *Describe services to be provided using IV-B funds in FY07;*
- *May describe services provided through other sources of funding.*

**“Building on Success Towards a Healthy Future”**

In early 2005, the Governor approved a proposal for a new permanent, statewide Teen Pregnancy Prevention and Sexual Health Partnership (TPP/SHP) to create a new strategic action plan for Oregon. The mission of the group is:

“A commitment to the development of and access to programs, creation of resources, and advocacy for policies that assist young people in the prevention of unintended pregnancies by building healthy relationships and making informed and responsible decisions about their reproductive and sexual health.”

The Teen Pregnancy Prevention Action Agenda has provided a comprehensive framework guiding the efforts and success of Oregon’s communities from 1997 to present. The State’s teen pregnancy rate has consistently been lower than the national rate and the State has made great progress in reducing it even further over the past decade. Among 15-17 year-olds in Oregon, the pregnancy rate fell almost 50% between 1990 and 2004.

## **Positive Youth Development Initiatives**

Children, Adults and Families (CAF) within the Department of Human Services (DHS) has been encouraging, participating, and implementing positive youth development activities towards the agency mission of helping people become independent, healthy and safe. The goal of all projects is to support our youth and promote healthy behaviors. These behaviors translate into many areas of a child's life and their personal growth and development.

Youth access these services through many different avenues. The most common avenue is the schools. The majority of all efforts focus on all youth, which would also include a youth in foster care. Information is disseminated to all Self-Sufficiency staff and partners through Service Delivery Area (SDA) prevention point staff.

These activities include:

- Prevention activities, primarily teen pregnancy prevention, incorporate the theory of positive youth development, such as after-school programs and mentoring opportunities. Most of these activities are funded through local funding streams and may include grants, in-kind, and agency support.
- A strategy in the state's blueprint (Action Agenda) for teen pregnancy prevention specifically on positive youth development.
- Provide support for three abstinence education pregnancy prevention programs. One program, STARS (Students Today Aren't Ready for Sex), involves positive youth development in every aspect. It is a peer-led model that gives sixth and seventh grade students the consequences of early sexual behavior and the skills to make informed decisions around why it is best to wait. Funding for this program comes from a federal abstinence grant and a match of private funds.
- More than half of the teen pregnancy prevention coalitions in the state have active youth participation in guiding efforts. All coalitions understand the need for youth participation and are looking for ways to increase their involvement. There is currently no long-term sustainable funding available from the state for coalitions. Most funding or staff time comes from local agency buy-in, fund raising, and in-kind support.
- Active member on the state Positive Youth Development (PYD) Advisory Council lead by the Commission on Children and Families.

- Active member on the Teen Pregnancy Prevention and Sexual Health Partnership (TPP/SHP) Statewide committee comprised of: Oregon Department of Education, Commission for Children and Families, Planned Parenthood of the Columbia Willamette, Planned Parenthood Health Services of Southwestern Oregon, DHS-Children, Adults and Families, DHS-Public Health, Multnomah County Health Department, Jackson County Health Department, Benton County Health Department and DHS-AmeriCorps Reduced Adolescent Pregnancy Partnership (RAPP).
- A statewide survey is available for youth and adults and is designed to collect input from parents, teens, community leaders, and other key stakeholders. The information gathered through the survey will play a large role in shaping the new state plan. We are anticipating that 3,000-5,000 surveys will be completed in Oregon.
- Youth Action Research: Teens in Jackson, Deschutes, and Multnomah counties have been trained to conduct research in their communities. They will be using their findings to help inform their local stakeholders, as well as shape the state plan. Their research will be aimed at social change and taking *Action*.
- Local Forums will be held in six counties around the state. The forums will be designed to gather broad and inclusive community input from parents, teens, community leaders, and other key stakeholders. This information will then be disseminated back to the local communities. The goal is to help initiate local change around adolescent sexual health and help to shape the new statewide plan. Information will also be shared and gathered at conferences, meetings and presentations around the state.

DHS fosters the view that better outcomes for clients and communities come through collaboration, integration and shared responsibilities. There are currently efforts happening throughout the state where DHS, faith-based and other community organizations work together. Collaborations with faith-based entities are strong within the realm of domestic violence. Domestic violence is the number one indicator for child abuse. These are some of the efforts:

- DHS Self-Sufficiency works closely with community faith-based organizations to provide referrals, food assistance, and other needed services.
- In Clackamas County, there is a group called “Love Inc. of Clackamas County”. They are a church consortium that pulls together their resources to

help clients in domestic violence shelters, fresh start kits, baby layettes, and clothing rack and they host the Foster Parent Appreciation Dinner.

- In several Service Delivery Areas, there are strong relationships between DHS and Domestic Violence and faith-based organizations, such as Christian Advocates for Adoption (CAFA), Catholic Charities, Rafael House, and Ecumenical Ministries.
- There are SDA domestic violence point people, these include point people on the Child Welfare side. All point people receive information on services and trainings available. The role of these point people is to disseminate the information within their respective fields.
- DHS has also worked with the Refugee program through Sponsors Organized to Assist Refugees (SOAR). This group is affiliated with Ecumenical Ministries of Oregon, Lutheran Family Services, Catholic Charities and Jewish Family Services. The target population for this group is: childless refugees.

**Oregon Commission on Children and Families  
Family Preservation and Support Services Program**

**TITLE IV-B SUBPART II OF THE SOCIAL  
SECURITY ACT**

**FAMILY PRESERVATION AND  
SUPPORT SERVICES PROGRAM**

**OREGON COMMISSION ON CHILDREN AND FAMILIES  
ANNUAL SUMMARY OF FAMILY PRESERVATION AND SUPPORT  
SERVICES PROGRAM**

**FOR FEDERAL FISCAL YEAR 2006  
(October 1, 2005– September 30, 2006)**

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## **Overview**

The Oregon Commission on Children and Families (OCCF) is the state agency responsible for a portion of Title IV-B (2) dedicated to promoting community-based family preservation and support services. OCCF and Department of Human Services, Children, Adults and Families (CAF) have signed an interagency agreement to consolidate planning for the Child and Family Services Plan with the Child Abuse Prevention and Treatment Act plan prepared by CAF.

OCCF serves as a catalyst to create partnership (community, county, state government, and non-government agencies) that sustains a community-based system of formal and informal supports along the full age and intensity continuum, from primary prevention to intervention and treatment. This continuum assures all children, youth and families will find the support they need.

## **Federal fiscal year 2006**

### **A. Specific Accomplishments and Progress**

In the 5-year Child and Family Services Plan (CFSP), the Oregon Commission on Children & Families described five core areas to guide the system development and implementation work dedicated to promoting community-based family preservation and support services (See Attachment A). The five core areas include:

1. Implementation of community comprehensive plans for children and families
2. Coordination and support of children and family programs and initiatives
3. Accountability and reporting
4. Policy development and promotion
5. Resource development

### **Implementation of community comprehensive plans**

Since the passage of Senate Bill 555 in 1999, OCCF has been charged with development and implementation of local comprehensive plans that coordinate and strengthen the system of services to families with children 0 to 18 years of age. Counties submit six-year plans that focus on 19 high-level outcome goals, benchmarks from *Oregon Shines*, the statewide vision for all Oregonians. (For

more information, go to “Achieving the Oregon Shines Vision: The 2005 Benchmark Report” online at [www.oregon.gov/DAS/OPB](http://www.oregon.gov/DAS/OPB)).

Local commissions fund activities that are priorities for their community and consistent with meeting local outcomes and goals identified in the comprehensive community plan. Counties apply the funds to activities that yield outcomes known to have a positive impact on at least one of the 19 high-level outcome goals. The activities funded at the local level represent implementation of at least one strategy from the local comprehensive community plan for services to children and families. A specific subset of goals and outcomes has been identified as the primary target areas for Title IV-B (2) funds (See table below.) Many activities impact more than one target area. Additional or secondary target areas that may be impacted by funded activities are also listed.

***Primary Target Areas for Title IV-B (2)***

High-level Outcome Goal	<ul style="list-style-type: none"> <li>• Local activity outcomes</li> </ul>
Reduce child maltreatment	<ul style="list-style-type: none"> <li>• Adequate social support resources</li> <li>• Effective social support groups</li> <li>• Improve family commitment and nurturance</li> <li>• Improve family assets</li> <li>• Increase nurturing, responsive care</li> <li>• Increase stability of family life</li> <li>• Quality parent-child/youth interactions</li> <li>• Reduce child neglect and/or maltreatment</li> <li>• Timely progress during out-of-home placement</li> </ul>
Reduce domestic violence	<ul style="list-style-type: none"> <li>• Adequate stress-coping skills</li> <li>• Improve family communication skills</li> <li>• Improve family problem-solving skills</li> <li>• Reduce family violence levels</li> <li>• Timely progress during out-of-home placement</li> </ul>
Decrease alcohol, tobacco and other drug use	<ul style="list-style-type: none"> <li>• Improve life skills and problem solving skills</li> <li>• Reduce use of Alcohol, Tobacco and Other Drugs (ATOD) during pregnancy</li> </ul>

	<ul style="list-style-type: none"> <li>• Reduce depression or other mental health issues</li> </ul>
Reduce poverty	<ul style="list-style-type: none"> <li>• Adequate basic resources: food, shelter, transportation</li> </ul>
Improve prenatal care	<ul style="list-style-type: none"> <li>• Reduce use of ATOD during pregnancy</li> </ul>

<i>Additional, or Secondary Target Areas</i>	
Increase child care availability	<ul style="list-style-type: none"> <li>• Adequate child care to meet family needs</li> <li>• Improved knowledge and skills among care providers</li> </ul>
Reduce high school dropout	<ul style="list-style-type: none"> <li>• Adequate academic progress</li> <li>• Adequate physical health status</li> <li>• Increase knowledge of child/adolescent development</li> <li>• Positive attitude toward school</li> <li>• Pro-social skills and behaviors</li> </ul>
Improve readiness to learn	<ul style="list-style-type: none"> <li>• Improved knowledge and skills among care providers</li> <li>• Normal child/adolescent growth and development:</li> <li>• Ready to learn at kindergarten</li> </ul>
Decrease youth suicide	<ul style="list-style-type: none"> <li>• Decrease depression or other mental health issues</li> </ul>
Decrease juvenile arrests	<ul style="list-style-type: none"> <li>• Improve conflict resolution and/or anger management skills</li> </ul>
Increase systems integration	<ul style="list-style-type: none"> <li>• Improved community-based supports and accountability.</li> </ul>
Increase community engagement	<ul style="list-style-type: none"> <li>• Increased positive, informal interactions that link adults, children and youths.</li> </ul>

In FFY 2006, Family Preservation and Support funds are most commonly used to protect children from harm (80%). Almost 68% of the funds were dedicated to implementation of strategies intended to reduce child maltreatment; another 12% was put to reducing domestic violence. The remainder was used to strengthen at-

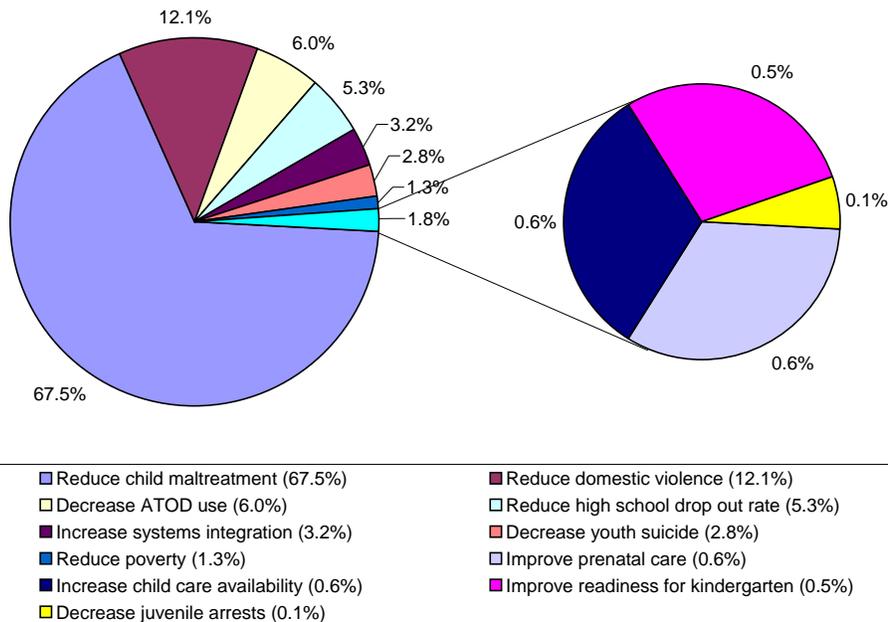
risk families (8.5%); improve the success of children and youth (9.7%); and strengthen the service delivery system (3.2%). (See chart below)

Families were strengthened through programs with outcomes associated with reduction of alcohol, tobacco, or other drug use; reducing poverty; improving prenatal care; and meeting the families' child care needs.

Children and youth participate in services that reduce risk factors and strengthen assets to ensure high school graduation; improve readiness for kindergarten; reduce youth suicide; and decrease juvenile arrests.

The service delivery system is strengthened through increased system integration as seen in the funding of community-based models such as family resource centers and school-based centers.

**Implementation of Planning High Level Outcomes**



## Coordination and support of programs and initiatives

OCCF continues to support key components of an effective service delivery system. In FFY 2006, OCCF is targeting five programs and initiatives:

- Implementation of Healthy Start,
- Implementation of Relief Nurseries,
- Accountability and Reporting,
- Community Schools, and
- Homeless and Runaway Task Force.

Healthy Start is a child abuse prevention program that provides home visits and parent education to at-risk families with newborn children. Oregon Healthy Start Family Support Services are based on the Healthy Families America quality standards. OCCF staff provides technical assistance to programs and oversee credentialing of Healthy Start programs throughout the state.

Relief Nurseries are designed to meet the need for child abuse prevention programs. They work to both decrease exposure to risk factors and increase the children's competencies and sources of support. OCCF contracts for an independent, formal evaluation of Oregon's nine Relief Nursery programs each biennium. Results of the evaluation provide the basis of collaborative efforts between OCCF and the Oregon Relief Nursery Association to refine the model and ensure incremental quality improvements.

*Accountability and Reporting: Writer accidentally left this one out – she will provide the information soon.*

OCCF has begun laying the groundwork to implement more community schools. Public schools are intimately linked with communities. They serve as centers of learning and they connect neighborhoods with one another. As place-based institutions, they are an integral part of the neighborhood. Moreover, public schools have access to a myriad of local resources. Given the central role public schools play in communities, OCCF and local commissions have partnered with the Oregon Department of Education, Oregon Department of Human Services, local schools, and businesses. The goal is to further develop the community school

approach that links academic education to after-school programs and social and health services and supports for children, youth and their families.

In the 2005 planning update, local commissions provided information on the status of homelessness and runaway youth in their communities. This information led to the passage of House Bill 2202, the Homeless and Runaway bill adopted last legislative session. HB 2202 identifies OCCF as the facilitator and convener of the Homeless and Runaway Task Force. The task force is developing recommendations on funding mechanisms, existing financial resources, and policy changes that will support a continuum of services to homeless families and runaway youth. These recommendations will be reported to the Governor in January 2007. In addition, the task force is working on development of rural and urban demonstration sites to test effective service delivery models for both populations.

### **Policy development and promotion**

OCCF has taken the lead in building an infrastructure that supports continuing partnerships. This infrastructure includes the Partners for Children and Families (PCF), a statewide interagency team with both state and local representation that oversees the development and implementation of the coordinated comprehensive plans in each of the counties (See Attachment B). Information from these plans informs policy development, collaborative initiatives, system development and the development of a state plan.

OCCF is committed to ensuring proven results. OCCF measures performance and can show what is working and what is not. Activities funded through the commission system make a real difference in the lives of children, youth, families and communities throughout the state.

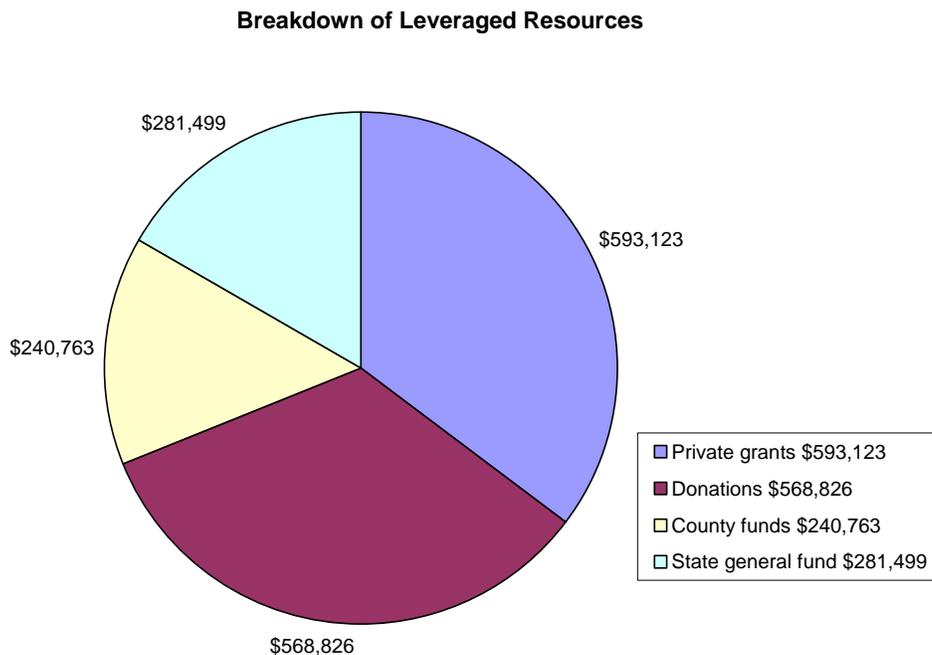
OCCF builds partnerships, brings in new funding and invests early to ensure both long-term results and measurable returns. By making front-end investments along a continuum, the commission system makes wise investments of taxpayer dollars.

Commissions engage citizens, organizations and businesses at the local level. Through this engagement, the needs of constituents are heard and included in policy work and services provided by state government. Programs, services, and initiatives implemented through the commission system reflect the priorities and best interests of the community.

## Resource development

One of the tasks of the commission system is to coordinate and enhance financial and other resources available for programs and services for children and families. Local commissions track and report the additional revenue and volunteer hours contributed to local efforts. Revenue includes private grants, donations, and county and state general funds that are received as a result of a compelling influence of local commissions. Review of OCCF data through March 31, 2006 shows that for each federal dollar budgeted to local activities, \$1.80 is leveraged from non-federal sources. Actual leveraged resources for all programs and services funded with Title IV-B (2) was \$1.7 million so far this FFY (See chart below).

In addition to monetary resources, local programs and services reported over 32,500 volunteer hours donated to community-based programs statewide in the same period.



## B. Revisions in Goals and Objectives

The state of Oregon has widely adopted the Oregon Benchmarks at all levels to focus on the future and monitor progress in achieving measurable goals. The

overall goals and objectives of OCCF remain rooted in assisting local communities to achieve progress towards the key Benchmarks that affect children and families. In the future, the commission system will increasingly focus family preservation and support services resources to attain measurable results for specific populations most in need of services that will:

- Reduce child maltreatment,
- Reduce adult substance abuse,
- Reduce domestic violence, and
- Reduce poverty.

As a result, OCCF continues to pursue the same goals and objectives but anticipates changes to the service delivery system that reflect the changing demographics of the State of Oregon. This will require increased attention to effective services that are culturally relevant.

### **C. Family Preservation and Support Services**

Family Preservation and Support Services funds are allocated to two purposes in the FFY 2006 budget: allocations to local commissions and tribes for programs and services.

\$1,126,854 was allocated through the Department of Human Services (DHS) to the Local Commissions on Children and Families for community-based family preservation and support programs in all 36 counties. The counties are allowed the flexibility to use the funds in accordance with the priorities and strategies of the local comprehensive plans for services, systems change, community development and capacity building that targets child maltreatment, domestic violence, adult substance abuse or poverty as long as the federal rules and regulations stipulating how the funds will be used are followed. Appendix A provides a description of each activity that the counties fund with the family preservation and support services grant stream in FFY 2006.

This year funds have been applied to three of the Title IV-B (2) service types:

- Prevention and Support Services (Family Support),
- Pre-placement, and
- Crisis Intervention.

Prevention and Support Services (Family Support) reach over 24,000 individuals throughout the state. There is strong local support for these services. For every

Title IV-B dollar used to fund these services, an additional \$2.73 was leveraged so far. This includes \$282,581 in local donations; \$250,671 in county general fund; and \$298,983 in private grants. In addition, over 19,000 volunteer hours were logged in support of these programs. Examples of the services provided include:

- Parent education programs
- Home visiting programs
- Family Resource Centers (School and Community-based)
- Child care to meet family needs
- Counseling and behavioral health programs

Oregon's Family Support and Connections programs (previously Community Safety Net) represent the Pre-placement Prevention category of services. They received nearly a third of the Title IV-B (2) funds this fiscal year. This program was funded by local commissions in seven counties throughout the state. So far, these programs have received over \$60,000 in private grants and donations and logged nearly 500 volunteer hours.

Three types of Crisis Intervention (Family Preservation) services are funded: Relief Nurseries, homeless and emergency shelters, and domestic violence services. Over 2,000 individuals will be served by the programs currently in place. This group of services receives the greatest monetary support overall. For every federal dollar received, \$2.85 is leveraged. So far this fiscal year, over \$500,000 in private grants and donations were received and more than 12,000 volunteer hours have been contributed.

\$38,700 is allocated to the nine federally recognized Indian tribes located in Oregon. Like the Local Commissions, the tribes are allowed the flexibility to use the funds in the best interest of their tribal program needs for services, systems change, community development and capacity building that targets child maltreatment, domestic violence, adult substance abuse or poverty as long as the federal rules and regulations stipulating how the funds will be used are followed. Appendix B shows each tribe's goal and strategies for family preservation and support funding for FFY 2006.

The tribes' use of Title IV-B (2) funds differs from county uses in a few significant ways. Supporting families in poverty is a much higher priority. It is also common to need support in overcoming transportation barriers to accessing services. Improving family management and life skills is another recurring theme.

## **D. Training Plan**

### **Implementation of community comprehensive plans**

Further development of Internet based data collection and statistical sharing projects will enhance local coordinated comprehensive planning efforts at the county level. Local commissions currently utilize OCCF's Fiscal Monitoring and Outcome Reporting System to provide information on activities funded at the county level. The new web-based data collection system will allow access to planning information including the priorities and strategies counties are working to address.

OCCF is continuing work with key partners to develop and implement this coordinated reporting system. A number of modules are currently under development and will be in place by the next fiscal year. The concept is to allow entry of data by local partners from the client specific level through the program and activity level up to key information needed for reports and management of resources. This will maximize the reporting of results and reduce the duplication of workload inherent in required reporting processes.

### **Coordination and support of programs and initiatives**

OCCF staffs have undertaken a number of training, technical assistance, research and evaluation projects for services funded with family preservation and support services monies.

- OCCF is dedicated to funding services that promote positive outcomes for children and their families. This results-based accountability is seen in the percentage of programs that meet their targeted outcome results. Last fiscal year, 83% of the services and programs local commissions funded met or exceeded the desired goals and outcomes. OCCF staff support service improvement through reviews of outcome measures, targets and data for all commission-funded activities; developing and delivering training on outcome measures and setting targets; and implementing evidence-based practices especially as they relate to culturally appropriate services.
- Since HB 3659 was passed in 2001, OCCF has had an increased emphasis on implementing best practices programs and services. OCCF's web site includes information on demonstrated and model programs, and the essential components of proven programs. In 2003,

SB 267 was passed which increased the already stringent best practice requirements. Now local commissions strive to implement evidence-based programs that are cost-effective. OCCF staff have conducted regional trainings and provided one-on-one technical assistance to counties.

- Oregon Healthy Start Family Support Services are based on Healthy Families America best practices quality assurance standards. State support staffs coordinate credentialing efforts for all Healthy Start programs throughout the state. This process ensures that all programs reflect best practice; have a quality assurance mechanism in place, and maintain quality over the long-term.

### **Policy development and promotion**

Short and long term research collaborations between the Commission and other key state agencies resulted in the following research and evaluation products:

- Strategic Framework for Implementing SB555 as a six-year plan for the continuing development and improvement of the statewide coordinated comprehensive system;
- Legislative Fiscal Office (LFO) Report to the Governor and Oregon Legislature on the evaluation of the community plans; and
- Homeless and Runaway Task Force report and recommendations to the Governor.

### **Resource Development**

As the State has been faced with continuing funding constraints, leveraging resources has become a priority for the state and local commission system. OCCF provides training to local commissions on:

- Developing private and public partnerships,
- Identifying grant opportunities and funding sources, and
- Preparing grants.

### **Attachments**

- Appendix A: Family Preservation & Support Services, County Funded Activities

- Appendix B: Family Preservation & Support Services, Indian Tribe Activities
- Attachment A: OCCF System Development and Implementation Framework
- Attachment B: Partners for Children & Families State System

**Appendix A: Family Preservation & Support Services, County-Funded Strategies**

**Prevention & Support Services (Family Support)**

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
<p><b>ARLINGTON CHILD CARE</b> Public child care program that includes a respite program for families with special needs or in crisis and parent education training.</p>	<p><i>Increase child care availability</i></p> <ul style="list-style-type: none"> <li>• Adequate child care to meet family needs</li> </ul>
<p><b>BEAVERTON SCHOOL DISTRICT - FAMILY RESOURCE CENTER</b> The Beaverton Family Resource Center is centrally located at the Beaverton School District offices. The center serves as a clearinghouse to assist families to learn about and access community services and supports; serves as a site where agencies can out-station staff to simplify service access; provides consultation to school personnel about children and families and services to address identified needs; and provides information about after school programming in school and community sites.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> </ul>
<p><b>CALLING ON MOMS</b> Increased availability of parenting classes, through media assistance, public education workshops and direct contacts by program supervisor. Classes offered include Make Parenting a Pleasure, Nurturing Parenting Programs, Parents Who Care and Love and Logic.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> </ul>
<p><b>Columbia County Mental Health CCMH) SKILLS TRAINER</b> Skills trainer provides voluntary, intensive, individualized, time-limited, in-home services to youth ages 0 to 18 and their families using a family centered approach of focusing on strengthening the family infrastructure. The skills trainer works with the family in the context of their culture &amp; environment and specific needs.</p>	<p><i>Decrease teen alcohol, drug and tobacco use</i></p> <ul style="list-style-type: none"> <li>• Improve life skills and problem solving skills</li> </ul>

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
<p><b>CHILD CARE HEALTH CONSULTANT</b> Health consultation to child care providers in Clackamas County, with a focus on registered in-home providers. The Health Consultant will provide training in coordination with designated Child Care Resource and Referral (CCR) to Clackamas County child care providers regarding improving health and safety standards within their settings.</p>	<p><i>Increase child care availability</i></p> <ul style="list-style-type: none"> <li>• Improve knowledge and skills among care providers</li> </ul>
<p><b>COLLABORATIVE OUTREACH/SOUTH VALLEY INTEGRATION</b> Program to provide 393 hours of case management to 15 families at South Valley Integration site. Services include outreach, family advocacy, team meetings, and coordination.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Increase stability of family life</li> </ul>
<p><b>CONDON CHILD CARE</b> Public child care program that includes a respite program for families with special needs or in crisis and parent education training.</p>	<p><i>Increase child care availability</i></p> <ul style="list-style-type: none"> <li>• Adequate child care to meet family needs</li> </ul>
<p><b>DEVELOPMENTAL DISABILITY RESPITE</b> Provides vouchers for respite care to families who have children with developmental disabilities with very high care demands. The program seeks to reduce caregiver stress, reduce and/or eliminate the incidents of burn out and violence in the lives of families who are overwhelmed with difficult care giving responsibilities, provides quality time for other family members to interact positively and to build family strengths and ensure families are able to maintain their children in their own homes as long as it is safe and possible to do so.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> <li>• Increase stability of family life</li> </ul>
<p><b>DHS VOLUNTEER TRANSPORTATION PROJECT</b> The program's purpose is to reduce transportation as a barrier to DHS clients, high risk families and potential DHS clients receiving necessary or</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Improve community-based supports and accountability</li> </ul>

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
mandated services, education and appointments in John Day. It will utilize the well-established transportation program that uses local volunteer drivers.	
FAMILY CARE RESPITE Family Preservation funds for respite care for critical, chronically ill children.	<i>Reduce child maltreatment</i> • Increase stability of family life
FAMILY EMPOWERMENT PROGRAM (FEP) The vision of the FEP program is to prevent child abuse and neglect by connecting at-risk and poverty level individuals and families to their community through mentoring. The program helps empower individuals and families to become self-sufficient while engaging community members as volunteer mentors to support them in making positive changes in their lives. Mentors are trained to develop dependable, trusting relationships, help families problem solve and make better choices.	<i>Reduce child maltreatment</i> • Adequate social support resources • Reduce child neglect and/or maltreatment
FAMILY RESOURCE CENTER Family Resource Centers - Increase/improve/sustain support services countywide. Clients access coordinator for services in outlying Union County communities.	<i>Reduce poverty</i> • Adequate basic resources food, shelter, transportation
FOREST GROVE SCHOOL DISTRICT - FAMILY RESOURCE CENTER Multi service center serving Forest Grove, Cornelius, Banks and Gaston. Parenting skills classes are offered, as well as gleaning/food distribution and a clothing closet. Space is available for community agencies to out-station staff to facilitate access to services. Volunteers are recruited and trained to assist with services.	<i>Reduce child maltreatment</i> • Adequate social support resources • Quality parent-child/youth interactions
FRC - BETHEL VILLAGE FAMILY CENTER The Bethel Family Village Family Resource Center is part of the Lane County network of family centers and works in partnership with the	<i>Reduce child maltreatment</i> • Quality parent-child/youth interactions

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
school district and other community providers. Services offered include resource information and referrals, parent education both structured and drop in, family and youth enrichment activities, public access to computers and the internet, phone and fax.	<ul style="list-style-type: none"> <li>• Adequate social support resources</li> </ul> <i>Increase systems integration</i> <ul style="list-style-type: none"> <li>• Improve community-based supports and accountability.</li> </ul>
<b>FRC - EUGENE FAMILY RESOURCE CENTERS</b> The Eugene Family Resource Centers (4 schools) are part of the Lane County network of family centers and works in partnership with the school district and other community providers. Services offered include access to community resource information and referrals, ongoing child care classes, parenting education both structured and drop in, family and youth enrichment activities, video resource library, book exchange library, public access to computers and the internet, phone and fax.	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> </ul> <i>Increase systems integration</i> <ul style="list-style-type: none"> <li>• Improve community-based supports and accountability.</li> </ul>
<b>FRC - JUNCTION CITY FAMILY RESOURCE CENTER</b> The Family Resource Center of Junction City is part of the Lane County network of family centers and works in partnership with the school district and other community providers. Services offered include access to community resource information and referrals, parent education both structured and drop in, family and youth enrichment activities, computer internet public access, phone, and fax.	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> </ul> <i>Decrease teen alcohol, drug and tobacco use</i> <ul style="list-style-type: none"> <li>• Improve academic progress</li> </ul> <i>Increase systems integration</i> <ul style="list-style-type: none"> <li>• Improve community-based supports and accountability</li> </ul>
<b>FRC - MCKENZIE FAMILY RESOURCE CENTER</b> The Family Resource Center is part of the Lane County network of family centers and works in partnership with the school district and other	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> </ul> <i>Decrease teen alcohol, drug</i>

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
community providers. Services offered include resource information and referrals, parent education both structured and drop in, family and youth enrichment activities, public access to computers, internet, phone and fax.	<i>and tobacco use</i> <ul style="list-style-type: none"> <li>• Improve academic progress</li> </ul> <i>Increase systems integration</i> <ul style="list-style-type: none"> <li>• Improve community-based supports and accountability</li> </ul>
<b>FRC - OAKRIDGE FAMILY RESOURCE CENTER</b> The Family Resource Center is part of the Lane County network of family centers and works in partnership with the school district and other community providers. Services offered include access to community resource information and referrals, parent education both structured and drop-in, family and youth enrichment activities, after school activities, public access to computers, internet, phone and fax.	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> <li>• Adequate social support resources</li> </ul> <i>Increase systems integration</i> <ul style="list-style-type: none"> <li>• Improve community-based supports and accountability.</li> </ul>
<b>FRC - PLEASANT HILL FAMILY RESOURCE CENTER</b> The Family Resource Center is part of the Lane County network of family centers and works in partnership with community providers and the school district. Services offered include access to community resource information and referrals, parent education both structured and drop in, family and youth enrichment activities, public access to computers, internet, phone and fax.	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Effective social support groups</li> <li>• Quality parent-child/youth interactions</li> </ul> <i>Increase systems integration</i> <ul style="list-style-type: none"> <li>• Improve community-based supports and accountability.</li> </ul>
<b>FRC- SOUTH LANE FAMILY RESOURCE CENTER</b> The Family Resource Center is part of the Lane County network of family centers and works in partnership with community providers and the school district. Services offered include access to community resource information and referrals, parent education both structured and drop in, family and youth enrichment activities, public	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> <li>• Adequate social support resources</li> </ul> <i>Increase systems integration</i> <ul style="list-style-type: none"> <li>• Improve community-</li> </ul>

<p><b>ACTIVITY NAME</b> Description</p>	<p><i>High-level Planning Goal(s)</i></p> <ul style="list-style-type: none"> <li>• Activity Outcome(s)</li> </ul>
<p>access to computers, internet, phone and fax.</p>	<p>based supports and accountability.</p>
<p><b>FRC- SPFLD/MARCOLA FAMILY RESOURCE CENTERS</b> The Springfield/Marcola network of centers is part of the Lane County network of family centers who work in partnership with school districts and other community providers. Services offered include resource information and referrals, parent education both structured and drop in, family and youth enrichment activities, public access to computers, internet, phone and fax.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> </ul> <p><i>Increase systems integration</i></p> <ul style="list-style-type: none"> <li>• Improve community-based supports and accountability.</li> </ul>
<p><b>GREAT START</b> Great Start is a parent education program that increases skills of parents through training and mentoring. It also provides a preschool program. There are separate playgroups for infants, toddlers, and two preschool groups (one for three year olds and one for four year olds). In addition, the program supports a preschool by mail program for rural families and daycare providers. This program targets parents and children who cannot afford regular preschool, but are at high risk of not receiving services at all because their level of income is too high for Head Start.</p>	<p><i>Improve readiness to learn</i></p> <ul style="list-style-type: none"> <li>• Normal growth and development</li> <li>• Ready to enter kindergarten</li> </ul>
<p><b>HART FAMILY RESOURCE CENTER</b> Provides services for support and information to families located in Harrisburg.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> <li>• Quality parent-child/youth interactions</li> </ul>
<p><b>HEAD START - PARENT EDUCATION CLASSES</b> Offers a variety of parenting education classes designed to improve parenting skills: Love &amp; Logic, Active Parenting, 1-2-3-4 Parents, Cooperative Parenting &amp; Divorce and Make Parenting a Pleasure.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> </ul> <p><i>Reduce domestic violence</i></p> <ul style="list-style-type: none"> <li>• Improve family problem-solving skills</li> </ul>

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
	<ul style="list-style-type: none"> <li>• Improve stress-coping skills</li> </ul>
<p><b>HEALTHY START OF BENTON COUNTY</b> Healthy Start offers home visiting, parent education and referral to needed services to all first time parents. Voluntary screening and risk assessment is conducted to target the most intensive services to those families most in need.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> <li>• Adequate social support resources</li> </ul>
<p><b>HEALTHY START OF HOOD RIVER COUNTY</b> Families First Network, the Hood River County Healthy Start project, offers home visiting, parent education and referral to needed services to all first time parents. Voluntary screening and risk assessment is conducted to target the most intensive services to those families most in need.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> <li>• Quality parent-child/youth interactions</li> </ul>
<p><b>HEALTHY START OF POLK COUNTY</b> Healthy Start offers home visiting, parent education and referral to needed services to all first time parents. Voluntary screening and risk assessment is conducted to target the most intensive services to those families most in need.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> <li>• Quality parent-child/youth interactions</li> </ul>
<p><b>HEALTHY START OF YAMHILL COUNTY</b> Healthy Start offers home visiting, parent education and referral to needed services to all first time parents. Voluntary screening and risk assessment is conducted to target the most intensive services to those families most in need.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> <li>• Quality parent-child/youth interactions</li> </ul>
<p><b>HILLSBORO SCHOOL DISTRICT-FAMILY RESOURCE CENTER</b> The Hillsboro Family Resource Center is located in JB Thomas Middle School in central Hillsboro. The FRC serves as a clearinghouse for families to learn about and access community-based services and serves as a site where agencies can out-station staff to simplify access to services; provides coordination of parenting classes; provides</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> </ul>

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
consultation to school personnel about children and families and services available to meet identified needs; and provides information about after school programming available in school and community sites.	
KLAMATH YOUTH DEVELOPMENT CENTER School based outreach assessment and referral to parents and children in families experiencing dysfunction.	<i>Reduce child maltreatment</i> • Quality parent-child/youth interactions
KLEOS BEHAVIORAL HEALTH Children will be assessed quarterly by house parents to measure progress in pro-social behaviors.	<i>Reduce child maltreatment</i> • Effective social support groups
LINN, BENTON, LINCOLN (LBL)-EDUCATION SERVICE DISTRICT (ESD) FAMILY SUPPORT PROJECT 3-18 Provide programs and services in a gender and culturally competent manner for children and youths with identified risk factors and their families. Strategies may include home visits, school visits, linkage to resources, case management, parent education, youth skill building and engagement in positive activities.	<i>Reduce high school dropout</i> • Improve pro-social skills and behaviors
LIFE SKILLS FOR HEALTHY FAMILIES Life skill support groups / education sessions: provide parenting information to increase healthy adult/child interactions and positive parenting techniques.	<i>Reduce child maltreatment</i> • Quality parent-child/youth interactions • Effective social support groups
LIFESPAN RESPITE CARE To increase family stability and reduce stress by increasing the number of trained providers as well as providing a single point of contact for families and caregivers that provide ongoing long term care to access respite services.	<i>Reduce child maltreatment</i> • Increase stability of family life

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
<b>MADRAS HIGH SCHOOL (MHS) TEEN PARENT PROGRAM</b> To provide onsite childcare (At MHS) with the childcare providers serving as mentors to the teen parents. Childcare providers will provide daily care for the children, give instruction to the teen parents on basic child care and feeding and serve as role models. The teens will also attend Life Skills classes, positive parenting, and prenatal development and child development classes.	<i>Reduce child maltreatment</i> • Quality parent-child/youth interactions
<b>MATERNAL CHILD HEALTH HOME VISITING</b> Provide prenatal care, comprehensive education and home visitation, to ensure healthy birth outcomes.	<i>Improve prenatal care</i> • Reduce depression or other mental health issues • Reduce rates of ATOD use
<b>NORTH SHERMAN PRESCHOOL</b> The North Sherman Preschool is an Oregon Head Start Combination program serving 3 to 5 year olds and their families. The program nurtures and encourages social, emotional, physical and intellectual growth and development of the child. The curriculum fosters the development of ethnic pride, enhances individual strengths and develops skills in social relations. The program involves parent participation in the classroom.	<i>Reduce child maltreatment</i> • Reduce child neglect and/or maltreatment <i>Improve readiness to learn</i> • Ready to enter kindergarten
<b>OPTIONS COUNSELING, INC.</b> Options Counseling Inc. is providing a MultiSystemic therapy (MST) program for youth in grades 4-6 in Sutherlin, Winston, and Roseburg. Multisystemic Therapy is a family- and community-based treatment program for youth with complex clinical, social, and educational problems. MST services are individualized to the family's strengths and weaknesses and designed to improve parenting skills and to provide parental support.	<i>Reduce child maltreatment</i> • Quality parent-child/youth interactions <i>Reduce high school dropout</i> • Improve academic progress

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
<b>PARENTING WITH LOVE AND LOGIC</b> Three, two-hour classes taught twice annually, using the concepts, materials and curriculum of Parenting with Love and Logic from Love and Logic Institute, Inc.	<i>Reduce domestic violence</i> • Improve family problem-solving skills
<b>PARENTS AS TEACHERS EDUCATION MODEL</b> Coordinate and purchase materials and supplies needed for use by Healthy Start Family Support Workers as they implement the Parents as Teachers parent education model with parents enrolled in Healthy Start of Clackamas County. In addition, provider will be responsible for ensuring that Parents As Teachers based education group sessions are conducted.	<i>Improve readiness to learn</i> • Normal growth and development • Adequate child care to meet family needs
<b>PARENTS AS TEACHERS: BORN TO LEARN</b> A universal access best practices home visiting program to provide the information, support and encouragement parents need to help their children develop optimally during the critical early years of life.	<i>Improve readiness to learn</i> • Normal growth and development • Adequate child care to meet family needs
<b>READY SET GO</b> Healthy Start offers home visiting; parent education and referral services to all first time parents. Voluntary screening and risk assessment is conducted to target the most intensive services to those families most in need.	<i>Reduce child maltreatment</i> • Adequate social support resources • Quality parent-child/youth interactions
<b>RESPITE CARE</b> The Commission will provide Respite care stipends to help families afford respite care for their children. This helps fill a service gap for children 13 to 18 years. The actual respite service will be provided by a qualified individual from a list of respite providers through the respite lifespan program.	<i>Reduce child maltreatment</i> • Adequate social support resources

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
<b>RURAL PARENTING INITIATIVE</b> Provide 3 research-based parent education classes in rural Benton County in which 1 class is conducted in Spanish. Provide support and technical assistance to three Community Coordinators. Provide meals and childcare services for parent education classes.	<i>Percent of Oregon adults who volunteer time</i> • Increase volunteer support of children, youth and families
<b>SAFE KIDS PROGRAM</b> Safe Kids is based on the National Child Assault Prevention model which is an empowering skill and rights based prevention/intervention approach with elementary school children grades K-5. Safe Kids recognizes how and why children are vulnerable to child abuse, then addresses vulnerability by teaching children to recognize and resist dangerous situations.	<i>Reduce child maltreatment</i> • Reduce child neglect and/or maltreatment
<b>SHERMAN COOPERATIVE PRESCHOOL</b> The Sherman Cooperative Preschool is an Oregon Head Start Combination program serving 3 to 5 year olds and their families. The program nurtures and encourages social, emotional, physical and intellectual growth and development of the child. The curriculum fosters the development of ethnic pride, enhances individual strengths and develops skills in social relations. The program involves parent participation in the classroom.	<i>Reduce child maltreatment</i> • Reduce child neglect and/or maltreatment • Ready to enter kindergarten
<b>SPRAY COMMUNITY SCHOOL</b> After school education program to support youth in meeting the goal of graduation. Mentoring programs for youth who are acting outside of community norms.	<i>Reduce child maltreatment</i> • Effective social support groups <i>Increase community engagement</i> • Increase positive, informal interactions that link adults, children and youths

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
<b>STRENGTHENING FAMILIES</b> Intensive best practice program designed to serve acting out, at-risk youth and their parents to improve family problem solving skills and family stability.	<i>Reduce domestic violence</i> • Improve family problem-solving skills <i>Decrease juvenile arrests</i> • Improve conflict resolution and/or anger management skills
<b>SPARKS PROGRAM</b> Supported Parenting & Resources of Klamath assist parents with disabilities to be the best possible parents while assisting the entire family to effectively utilize skills training, education & peer support groups offered through the program.	<i>Reduce child maltreatment</i> • Adequate social support resources • Increase stability of family life
<b>SUPPORTING PARENTS IN WASCO COUNTY INITIATIVE</b> The Wasco County Commission on Children and Families (CCF) has been working to build a sustainable system for offering parenting classes in Wasco County for three years.	<i>Reduce high school dropout</i> • Increase knowledge of child/adolescent development
<b>TIGARD TUALATIN SCHOOLS FAMILY RESOURCE CENTER</b> Tualatin Family Resource Center provides information and support to students and families in the district, and assists them in accessing community resources. More than 1,500 individuals and families receive assistance from the center annually. DHS and workforce program staff are routinely stationed at the center to enhance access to services. Limited emergency food, hygiene supplies, and clothing is available. Mentoring for at-risk elementary students will be offered to a maximum of 50 students. At least one staff person is bilingual to assure access for Latino families.	<i>Reduce poverty</i> • Adequate basic resources food, shelter, transportation
<b>TILLAMOOK COUNTY HEALTHY START</b> Healthy Start offers home visiting, parent education, and referral to needed services to first	<i>Reduce child maltreatment</i> • Adequate social support resources

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> <ul style="list-style-type: none"> <li>• Activity Outcome(s)</li> </ul>
birth families. Voluntary screening and risk assessment is conducted to target the most intensive services to those families most in need.	<ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> </ul>

***Crisis Intervention (Family Preservation)***

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> <ul style="list-style-type: none"> <li>• Activity Outcome(s)</li> </ul>
ADOLESCENT SHELTER CARE The shelter home is a non secure facility geared to provide specialized short-term care and evaluations most appropriate for children 12 -17 years of age. It also provides necessary support and treatment services for those youth and families involved in the Youth Investment Project.	<i>Decrease teen alcohol, drug and tobacco use</i> <ul style="list-style-type: none"> <li>• Improve life skills and problem solving skills</li> </ul>
AFTER THE STORM Mental health counseling for children and their mothers who are affected by domestic violence. Increase, improve and sustain support services countywide.	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Increase stability of family life</li> </ul>
COBRA-EMERGENCY SHELTER To provide emergency shelter to women and children survivors of domestic violence from Jefferson County.	<i>Reduce domestic violence</i> <ul style="list-style-type: none"> <li>• Decrease family violence levels</li> </ul>
CURRY CRISIS ASSESSMENT PROGRAM This program establishes a resource for the period between the time of an initial disclosure of child abuse and the establishment of regular/ongoing counseling. Initial assessment of child trauma will take place within 48 hours of disclosure with 2-3 follow-up sessions. Assessments provide recommendations for mental health treatment and supportive sessions for child, family, foster family, etc. The maximum length of the program is thirty days per child. This program will provide a critical service not otherwise available in the county.	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> </ul>

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
<b>DOMESTIC VIOLENCE INTERVENTION PROJECT</b> The Domestic Violence Intervention Project provides short-term/crisis intervention services with the intent of reducing the risk of child abuse and neglect. This Project locates a full-time Clackamas Women’s Services advocate at the Department of Human Services office to work with families referred for child abuse and also identified as experiencing domestic violence.	<i>Reduce domestic violence</i> • Decrease family violence levels
<b>DOMESTIC VIOLENCE SERVICES</b> Crisis intervention to victims of domestic violence and sexual assault in Morrow County.	<i>Reduce domestic violence</i> • Decrease family violence levels
<b>DVRC - CHILDREN'S INTERVENTION PROGRAM</b> Youth ages 4-17 who have witnessed domestic violence are provided with case management and educational/skill building groups. Services include an emphasis on self-esteem, enhancement of personal safety and development of non-abusive self expression. At least one ten week group per quarter is provided for each targeted age group. Parents are also offered domestic violence support groups and parenting classes.	<i>Reduce domestic violence</i> • Improve family communication skills • Improve stress-coping skills
<b>FAMILY DEVELOPMENT CENTER THERAPEUTIC CLASSROOM</b> Relief nursery programs provide therapeutic early childhood classrooms, intensive parenting education and home visitation for families with young children at risk of abuse.	<i>Reduce child maltreatment</i> • Quality parent-child/youth interactions • Adequate social support resources • Adequate child care to meet family needs
<b>HOST</b> The HOST program provides temporary and long-term shelter and supportive services to runaway, homeless and at-risk youth throughout Marion County. Primary activities include: emergency	<i>Decrease teen alcohol, drug and tobacco use</i> • Improve life skills and problem solving skills <i>Reduce high school dropout</i>

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
shelter; 24-hour crisis intervention services; initial assessment by qualified staff for drug abuse, suicide and risk of abuse; on-site case management; support groups and life-skill building; family mediation; and life skill development classes (offered in English and Spanish).	<ul style="list-style-type: none"> <li>• Improve health status</li> </ul> <i>Decrease youth suicide</i> <ul style="list-style-type: none"> <li>• Reduce depression or other mental health issues</li> </ul>
MAYDAY, INC. This program, utilizing a Teen/Child Advocate, will focus on the issue of domestic violence as it directly relates to teens and children who have been directly victimized as well as those who have witnessed domestic violence.	<i>Reduce domestic violence</i> <ul style="list-style-type: none"> <li>• Improve stress-coping skills</li> </ul>
MOUNTAINSTAR RELIEF NURSERY The Relief Nursery programs provide therapeutic early childhood classrooms, intensive parenting education and home visitation for families with young children at risk of abuse.	<i>Reduce child maltreatment</i> <ul style="list-style-type: none"> <li>• Quality parent-child/youth interactions</li> <li>• Adequate social support resources</li> </ul>
SAFETY THROUGH SHELTER & SUPPORT Project DOVE's emergency crisis shelter provides families fleeing an abusive relationship with safe, no-cost housing, food, counseling, advocacy, referrals to other self-sufficiency resources, child care, transportation, legal assistance, and support groups.	<i>Reduce domestic violence</i> <ul style="list-style-type: none"> <li>• Decrease family violence levels</li> </ul>
WOMEN'S CRISIS SUPPORT TEAM ~ TALSUNNE SAFE HOUSE Talsunne Safe House provides advocacy to children, 0 to 8 years of age, who are sheltered due to domestic violence. The battered parent will also receive information and resources on how to advocate for their children.	<i>Reduce domestic violence</i> <ul style="list-style-type: none"> <li>• Timely progress during out-of-home placement</li> </ul>

***Pre-placement Prevention***

<p>ACTIVITY NAME Description</p>	<p><i>High-level Planning Goal(s)</i> • Activity Outcome(s)</p>
<p>COMMUNITY SAFETY NET OF CLACKAMAS COUNTY Coordinated case management to high risk youth and their families and home visits to families. The Community Safety Net is a voluntary system of family supports for parents who are identified as at-risk for child abuse and neglect. The Community Safety Net provides short-term services including needs assessment, parenting education, home visits, interactive child/adult groups, and triage to more intensive services. The Community Safety Net attempts to engage all caregivers and providers to support the entire family. Services are tailored to the individual family.</p>	<p><i>Reduce child maltreatment</i> • Adequate social support resources <i>Reduce domestic violence</i> • Improve family problem-solving skills</p>
<p>COMMUNITY SAFETY NET/CENTRAL POINT ADVOCATE Voluntary referral service and outreach to 100 high-risk families referred to DHS-Child Welfare for abuse/neglect but not on their caseload and case management services for 12 families. Services include preventative opportunities for at-risk families.</p>	<p><i>Reduce domestic violence</i> • Improve stress-coping skills</p>
<p>COMMUNITY SAFETY NET/PROJECT LISTO Provide targeted case management to 25 Spanish-speaking families with non-founded cases of child abuse and neglect or unable to determine cases and provide cultural support and expertise at West Medford Family Center Hispanic family staffing.</p>	<p><i>Reduce domestic violence</i> • Improve stress-coping skills</p>
<p>COMMUNITY SAFETY NET/ROGUE FAMILY CENTER Voluntary referral service and outreach to 200 high-risk families referred to DHS-Child Welfare for abuse/neglect but not on their caseload and case management services for 17 families. Services include preventative opportunities for at-</p>	<p><i>Reduce domestic violence</i> • Improve stress-coping skills</p>

ACTIVITY NAME Description	<i>High-level Planning Goal(s)</i> • Activity Outcome(s)
risk families.	
<p><b>FAMILY AND COMMUNITY ALLIANCE</b> Short-Term (90-120 days) in-home intervention services for families for whom a determination has been made that the family is not eligible for CPS or Child Welfare services or referred by Self-Sufficiency caseworkers.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> <li>• Reduce child neglect and/or maltreatment</li> </ul>
<p><b>FAMILY CONNECTIONS AND SUPPORT</b> The Family Support and Connections (FSC) Program in Clackamas County will provide one of the support efforts designed to prevent families from entering the foster care system. The focus of these services will be on Temporary Assistance to Needy Families (TANF) families and some families for whom a determination has been made that the family is not eligible for CPS or Child Welfare services</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> </ul> <p><i>Reduce domestic violence</i></p> <ul style="list-style-type: none"> <li>• Improve family problem-solving skills</li> </ul>
<p><b>FAMILY FRIENDS ~ FAMILY SENSE</b> The Family Sense Program provides direct service to families involved in visitation and/or custody exchange disputes. The program offers a safe environment designed to diffuse family tension and ensure children have access to a continuing relationship with both parents. Families served will include some with documented histories of child or spousal abuse, some with parents who are impaired by mental illness or substance abuse, and some parents who are reintegrating their children after a long separation.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Increase stability of family life</li> </ul>
<p><b>FAMILY SUPPORT AND CONNECTIONS</b> Families who do not meet the threshold for child protective service involvement are referred by child welfare programs to a triage team that meets weekly to assess family needs and offer services. Services include crisis intervention, referral to other community resources, and support.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Adequate social support resources</li> </ul> <p><i>Reduce domestic violence</i></p> <ul style="list-style-type: none"> <li>• Improve family problem-solving skills</li> </ul>

<p><b>ACTIVITY NAME</b> Description</p>	<p><i>High-level Planning Goal(s)</i></p> <ul style="list-style-type: none"> <li>• Activity Outcome(s)</li> </ul>
<p><b>FAMILY SUPPORT AND CONNECTIONS</b> Program proposes to expand the services of the safety net coordinator by connecting with youth who are chronically acting out or victims of neglect and their families. Coordinator will offer weekly support and information to assist the family in appropriate problem solving and modeling.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Increase stability of family life</li> </ul>
<p><b>FAMILY SUPPORT AND CONNECTIONS</b> "SAFETY NET" Voluntary Home Visiting program to families working with the Child Welfare TANF program. The primary service is to assist families with children and prevent them from entering the Child Welfare System through connecting families with existing resources, and develop a support network within the community.</p>	<p><i>Reduce child maltreatment</i></p> <ul style="list-style-type: none"> <li>• Reduce child neglect and/or maltreatment</li> </ul>

**Appendix B: Family Preservation & Support Services, Indian Tribe Activities**

NAME OF TRIBE Activity Description	Goal(s) • Activity Objective(s)
<p><b>BURNS PAIUTE TRIBE</b></p> <p>The tribe will provide funding for certified foster care persons to provide respite care for parents, and other caregivers.</p> <p>Trainings will be provided to parents, caregivers and other family members that focus on child development, behavioral issues, education and how to better handle stress. The tribe will also provide some classes on grief and loss.</p> <p>Staff assistance, victim advocacy and case management is provided to families in crisis. Additional supports to help families meet basic needs such as transportation, housing and utilities.</p> <p>Community-based prevention activities that encourage families to participate together will occur on the reservation.</p>	<p><i>Make respite care of children available</i></p> <ul style="list-style-type: none"> <li>• Ensure certified foster care persons are available to those in need of respite care</li> </ul> <p><i>Improve parenting skills</i></p> <ul style="list-style-type: none"> <li>• Provide at least three trainings each year</li> </ul> <p><i>Stabilize families in crisis</i></p> <ul style="list-style-type: none"> <li>• Provide case management and wrap around supports</li> </ul>
<p><b>COQUILLE INDIAN TRIBE</b></p> <p>Coquille Indian Tribe will help families in crisis meet basic needs such as housing or utility payments, and transportation to access needed services.</p> <p>The tribe will also help families in emergency crisis maintain a safe and adequate home environment for children.</p>	<p><i>Stabilize families in crisis</i></p> <ul style="list-style-type: none"> <li>• Provide case management and wrap around supports</li> </ul>
<p><b>CONFEDERATED TRIBES OF COOS, LOWER UMPQUA AND SIUSLAW INDIANS</b></p> <p>Tribal families who qualify for the Oregon Health Plan or TANF will be surveyed to identify areas that need addressed within the household. Family assessments that show children are at risk for potential State involvement or removal will receive supports such as: parenting, budgeting, and nutrition education; and mental and physical health care. Family Services Caseworkers follow up and monitor goal compliance with program participants to help ensure successful completion of household and family goals.</p>	<p><i>Reduce household risk factors</i></p> <p><i>Prevent foster care placements</i></p> <ul style="list-style-type: none"> <li>• Identify new at risk children</li> <li>• Conduct need assessments through the Interest Survey and Family Partnership Agreement</li> <li>• Provide case management on 100% of program participants</li> </ul>

NAME OF TRIBE Activity Description	Goal(s) • Activity Objective(s)
<p><b>CONFEDERATED TRIBES OF THE GRAND RONDE</b></p> <p>The tribe will continue to give in-home support to families identified as high risk, as well as foster parents, and guardians. Communication will also be provided to support foster parents.</p> <p>Grand Ronde will continue the new community-based programs that incorporate activities structured to involve children and families so the interactions can be monitored and positive role modeling can take place. Examples of events include: recreational events, motivational speakers, storytelling, culture camps and events that allow for processing between staff, children and families.</p> <p>In home assistance and intensive family structure development will be essential in working with high risk families to negate the need for or remove the risk of foster placement. An Intensive Family worker well-versed in budgeting, family dynamics and cultural approaches to incorporate the skills from a cultural basis will be employed. Also Positive Indian Parenting classes will continue.</p>	<p><i>Improve parenting skills</i></p> <ul style="list-style-type: none"> <li>• Provide in-home support to high risk families</li> </ul> <p><i>Strengthen the parent-child relationship</i></p> <ul style="list-style-type: none"> <li>• Organize at least three family activities/gatherings during the year</li> </ul> <p><i>Stabilize families in crisis</i></p> <ul style="list-style-type: none"> <li>• Improve life skills of high risk families such as budgeting, family dynamics</li> <li>• Strengthen high risk families through tribal culture</li> </ul>
<p><b>KLAMATH TRIBES</b></p> <p>This funding assists in the operation of the Indian Child Welfare Act (ICWA) program, as well as Child Protective Services (CPS) and the Foster Care program. CPS and ICW Specialists continue to make in-home visits, provide necessary transportation, attend placement meetings, and enhance foster care recruitment efforts. Along with additional funding, Klamath strives to provide at-risk families with the necessities of life in times of crisis. The department will develop intervention and prevention programs targeting at-risk families, and providing culturally relevant, family strengthening education. Specialists also participate in meetings with various agencies and entities within the community at large, and have established referral procedures for services; participate in a community resource committee; and continue to nurture a community based service referral system.</p>	<p><i>Improve parenting skills</i></p> <ul style="list-style-type: none"> <li>• Expand and enhance early intervention and prevention services</li> </ul> <p><i>Increase accessibility to services</i></p> <ul style="list-style-type: none"> <li>• Identify new at risk children</li> <li>• Conduct need assessments and</li> <li>• Provide referral and transportation to services as needed</li> </ul> <p><i>Find permanent home placement for children</i></p> <ul style="list-style-type: none"> <li>• Enhance foster care program and family reunification efforts</li> </ul> <p><i>Stabilize families in crisis</i></p> <ul style="list-style-type: none"> <li>• Improve life skills of high risk families</li> <li>• Strengthen high risk families through tribal</li> </ul>

NAME OF TRIBE Activity Description	<i>Goal(s)</i> • Activity Objective(s)
	<ul style="list-style-type: none"> <li>• culture</li> <li>• Provide case management and wrap around supports</li> </ul>
<p>CONFEDERATED TRIBES OF SILETZ INDIANS</p> <p>Siletz tribe will provide daily activities with ICW that include: providing voluntary services; working with the individual families to strengthen weaknesses that could result in removal; developing strengths that allow for reunification, facilitating communication meetings between providers and caseworkers to build positive non-threatening working relationships which reduce child risks within the home; conducting home visits to monitor care; and provide preventative planning to alleviate identified concerns and assist families by developing service plans in conjunction with family input to reduce child risk factors.</p>	<p><i>Improve parenting skills</i></p> <ul style="list-style-type: none"> <li>• Provide preventative services to families</li> <li>• Increase the number of preventative services offered outside the reservation area but within the 11 county service area</li> </ul> <p><i>Prevent foster care placements</i></p> <ul style="list-style-type: none"> <li>• Conduct more informal resolutions child referrals</li> </ul>
<p>CONFEDERATED TRIBES OF THE UMATILLA RESERVATION</p> <p>Nearly 100% of the DCFS child welfare case load consists of low income families, usually with less than two parent households who have alcohol and drug issues. The pressures caused by low income are often compounded by poor coping mechanisms and low educational achievement. Returning children into the home where a parent is unable to provide the most basic of needs for themselves or their children can cause a great deal of stress on a recovering parent in the reunification process. DCFS will assist the parent in providing for children's basic needs and requirements that will assist in the transition into permanency placement.</p> <p>Case managers will provide services, assistance and required treatment and therapeutic efforts that will stabilize the family setting so children will be safe. Case managers will assist parents in re-establishing safe and sanitary housing, food, utilities, work clothing and basic transportation to services.</p>	<p><i>Find permanent home placement for children</i></p> <ul style="list-style-type: none"> <li>• Provide case management and wrap around supports for reunification efforts</li> </ul> <p><i>Stabilize families in crisis</i></p> <ul style="list-style-type: none"> <li>• Improve life skills of high risk families</li> <li>• Provide referral and transportation to services as needed</li> </ul>
<p>COW CREEK BAND OF UMPQUA INDIANS</p> <p>Cow Creek Band of Umpqua Indians, Social Services Department will provide "Strengthening the Next Generation." This program will conduct one-on-one in-home visits and group classes on child development, budgeting, stress reduction, health and nutrition as it</p>	<p><i>Improve parenting skills</i></p> <ul style="list-style-type: none"> <li>• Provide parenting information that leads to improved knowledge and skills</li> </ul> <p><i>Increase accessibility to services</i></p>

NAME OF TRIBE Activity Description	<i>Goal(s)</i>
<p>relates to raising children. Cow Creek Health and Wellness Center will provide screening and services for qualifying clients and, if necessary, refer out for adequate health care the clinic is unable to provide. Referrals will be made to outside facilities to conduct developmental screenings if the Tribal Clinic's staff psychologist is unable to provide the service. In the event no personal transportation is available, the program will provide gas vouchers or bus pass for transportation to and from necessary medical/human services appointments. Assistance with meeting basic needs.</p>	<ul style="list-style-type: none"> <li>• Activity Objective(s)</li> <li>• Provide transportation to services as needed</li> </ul> <p><i>Stabilize families in crisis</i></p> <ul style="list-style-type: none"> <li>• Provide developmental screenings for children and</li> <li>• Referral to needed services</li> </ul>

## *Attachment A: OCCF System Development and Implementation Framework*

### Mission

The Oregon Commission on Children and Families is a partnership of citizens and professionals working together to improve the lives of children and families in Oregon's local communities. The Commission facilitates and supports community comprehensive planning for all children and families, promotes system integration, and provides leadership for local and state efforts in early childhood.

### Guiding Principles/Screens

Grass Roots • Collaboration • Positive Youth Development • Building Capacity before Commitment • Cultural Competency • Best Practices • Honesty, Safety, Consistency & Effectiveness in Communication • Statutory & Regulatory Requirements

### CORE AREAS

#### Resource Development

#### CCC Plan Development & Implementation

#### Programs/Initiatives Coordination & Support

#### Accountability

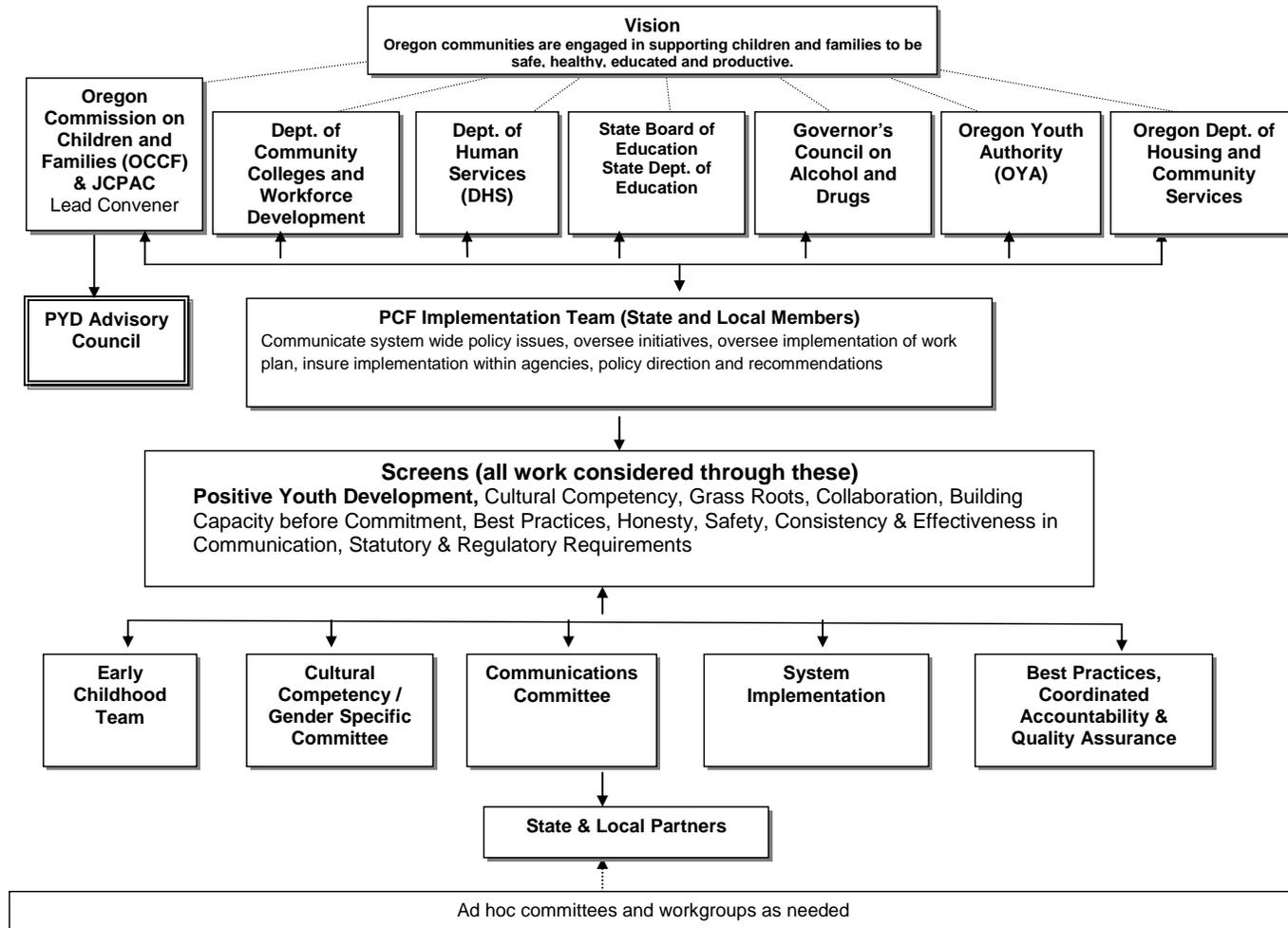
#### Policy Development & Promotion

### STRATEGIES

- |  |  |   |  |   |
|--|--|---|--|---|
| <ul style="list-style-type: none"> <li>a. Develop and sustain financial resources.</li> <li>b. Develop expertise of state and local staff and engaged partners.</li> <li>c. Develop and maintain information resources (e.g., data).</li> <li>d. Continue policy development around distribution of grant monies across the state, and other related policies that may become necessary.</li> <li>e. Maintain core infrastructures, including staff.</li> <li>f. Administer grants/grantstreams (e.g., obtain request and spending limitation, RFP &amp; appeal processes, grant management, compliance monitoring, evaluation).</li> <li>g. Link and leverage resources.</li> </ul> | <ul style="list-style-type: none"> <li>a. Identify common themes from plans to facilitate the development of state and local strategies.</li> <li>b. Continue work between state and local commissions regarding advocacy for plans, systems sustainability, and legislative work.</li> <li>c. Continue work of the CCF system in collaborating with formal and informal partners to explore and advocate for systemic changes.</li> <li>d. Engage, convene and support diverse constituencies to:                             <ul style="list-style-type: none"> <li>• Increase public involvement,</li> <li>• Design new initiatives,</li> <li>• Strengthen local systems, and</li> <li>• Achieve tangible results.</li> </ul> </li> <li>e. Identify, develop and adopt essential components, standards and outcomes.</li> </ul> | <ul style="list-style-type: none"> <li>a. Implement effective support of essential components of a local service delivery system, including:                             <ul style="list-style-type: none"> <li>• CASA</li> <li>• Healthy Start</li> <li>• Crisis/Relief Nurseries</li> <li>• Positive Youth Development</li> <li>• Childhood Care &amp; Education</li> </ul> </li> <li>b. Identify, develop and adopt essential components, standards and outcomes.</li> </ul> | <ul style="list-style-type: none"> <li>a. Develop, collect data on, and report on performance measures as required by DAS.</li> <li>b. Develop and maintain reporting methodologies that capture results across partners.</li> <li>c. Coordinate and maintain external evaluations of programs and systems.</li> <li>d. Develop and conduct assessments and internal reviews of local commissions and local programs. (Database reviews, quality assurance reviews, and local commission assessments, including internal controls, etc., that assist in the development of successful local programs and systems and ensure quality information for statewide use).</li> <li>e. Develop and maintain a web-based database for the collection of information from local commissions (FMORS).</li> </ul> | <ul style="list-style-type: none"> <li>a. Support the State Commission in policy development (systems policy).</li> <li>b. Support the State Commission in OAR development.</li> <li>c. Support the State Commission in budget development.</li> <li>d. Support the State Commission in member recruitment, development and support.</li> <li>e. Facilitate the development of statewide policy informed by CCC plans, programs and initiatives.</li> <li>f. Support State Commission advocacy efforts with the Governor, Legislature, agencies, media, and other public and private stakeholders.</li> <li>g. Develop and implement internal administrative policies that support effective local programs and commissions.</li> </ul> |
|--|--|---|--|---|

## Attachment B: Partners for Children & Families State System

### Partners for Children & Families (PCF) State System



**Glossary of Acronyms Used in Attachment A and B:**

CCC	Coordinated Comprehensive Community
CASA	Court Appointed Special Advocate
DAS	<i>Gerelyn will define</i>
FMORS	Fiscal Monitoring Outcomes and Reporting System
OAR	Oregon Administrative Rule
OCCF	Oregon Commission on Children and Families
JCPAC	Juvenile Crime Prevention Advisory Committee
PYD	Positive Youth Development