Oregon Department of Human Services

Child Welfare Progress Report

This month in Child Welfare

Since I arrived in November, my team and I have been gathering information and creating space for conversations around possible futures for Oregon's child welfare system.

While the COVID-19 pandemic has upended many of the ways in which we operate, our discussions have continued to build momentum for transformation. As we now talk about what returning "to normal" looks like, these conversations continue by asking: What is it that we want to create and shape as we move forward? Are there new opportunities for reimagining better support services?

We are committed to transforming our Child Welfare Division into one that works to strengthen and support both birth and foster families, viewing that as the be way to serve the needs of Oregon's children and young people. If we want better outcomes for children, we need to focus on creating better outcomes for families, in teamwork with the communities that support them.

We already help families in many ways, but we in the child welfare system and our partners need a more holistic approach. We need to integrate this focus on family and community into every aspect of what we do and how we do it. As you may know, we have been working on a *Draft Vision for Transforming Child Welfare* that provides a basic blueprint for the way a transformed system focused on family would look, how to make it happen, and what it would mean for children, families, partners, and staff.

We believe this approach to transforming our child welfare system will make children and young adults safer and healthier, and that through our efforts they will experience less trauma and greater well-being. Over the next few weeks, I am excited to share this vision statement with partners and community members, and I ask you all for feedback and meaningful input.

Sincerely,
Rebecca Jones Gaston, MSW
Director, Oregon Child Welfare

May is Foster Care Awareness Month

The Oregon Department of Human Services (Oregon DHS) is celebrating Foster Care Awareness Month across the state through local offices and community partnerships. The US Children's Bureau has themed the 2020 celebration as "Foster Care as a Support to Families, Not a Substitute for Parents."

This theme is particularly important in a national conversation about how biological and foster families can work together to center a child's experience in care and create a set of resilient factors for them to thrive.

The Parent Advisory Council (PAC), formed in 2015 and run by the Morrison Child & Family Center, is comprised of parents from Oregon with prior Child Welfare involvement because of substance abuse, resulting in temporary removal of their children. All PAC members have navigated their DHS case and are actively parenting their children.

The quarterly meetings of the Parent Advisory Council are a reminder of the importance and opportunity for collaboration between foster families and parents with Child Welfare cases.

All children need support and love. Family collaboration has the power to transform our community into a larger child safety system that benefits everyone.

This Foster Care Awareness month, thank you to all the families working to support youth in care. You are making a difference!

About the Oregon Child Welfare Progress Report

In March 2018, Governor Kate Brown requested a monthly progress report on Child Welfare. The report is published monthly to share progress in specific areas connected to the directives from the Governor.

For more information, contact the Child Welfare Director's Office at ChildWelfare.DirectorsOffice@state.or.us or (503) 945-6953.

Past Oregon Child Welfare Progress Reports are posted at www.oregon.gov/dhs.

See the annual Child Welfare Data Books (https://go.usa.gov/xVnHU).

Table of Contents

April Highlights **4**

Child Safety **4**

Open Assessments 4

Fatality Prevention and Review Team 5

Oregon Child Abuse Hotline (ORCAH) 5

Foster Care **6**

Certified Providers Trendlines and Foster Home Capacity 6

Factors for Children Entering Foster Care 7

Youth in Foster Care Receiving Treatment Services Outside Oregon 8

Children and Youth in Temporary Lodging 9

Child Welfare Workforce **9**

Trend in Social Service Specialist (SSS1) Staffing 9

Operational Support **9**

Public Records Request Processing 10

April Highlights Related to COVID-19

CHILD SAFETY:

- The Child Safety program is focused on addressing COVID-19 to ensure essential safety functions continue, and that personal protective equipment (PPE) has been distributed.
- The Oregon Child Abuse Hotline (ORCAH) has transitioned 95% of its workforce to telecommuting.
- Virtual visitation for caseworkers and between families and children has been implemented when visits are not able to occur in person due to safety considerations.
- In order to calculate the impact of COVID-19 on Oregon's Child Welfare system and best prepare for safety measures, Child Welfare implemented a tracking system for children in care, as well as foster providers and residential treatment centers.

FOSTER CARE AND TREATMENT SERVICES:

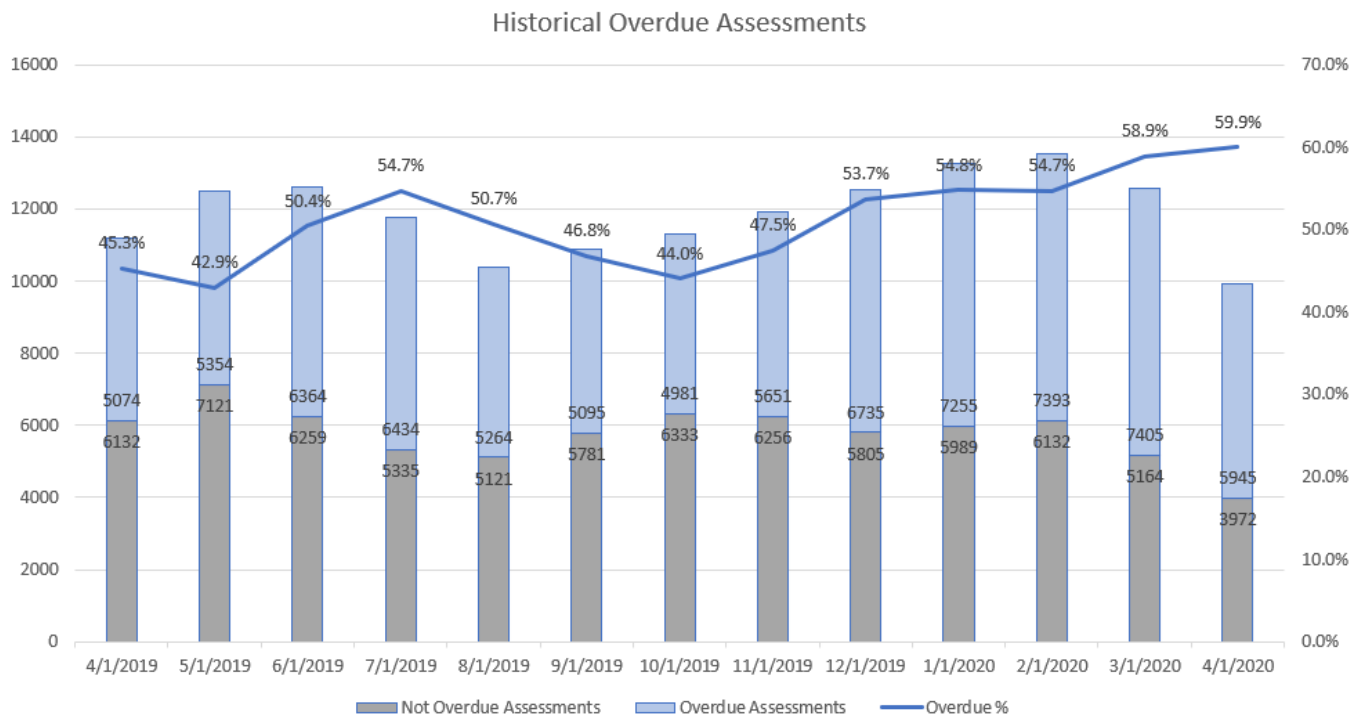
- Child Welfare has responded to needs from foster families while daycares are closed and created an "alternative care" reimbursement for up to $375 per child. This allows for babysitting and can include respite care.
- Foundations (a 24-hour foster care training curriculum) has been transitioned online to maintain access to education through the pandemic.
- Foster Care Program has made temporary changes to allow for general foster care applicants to be emergency-certified after passing a thorough safety assessment.

Child Safety

Child Welfare receives reports of potential child abuse, assesses situations and prepares safety plans to assist children and families, working closely with law enforcement and other community partners. In some cases, a safety plan is put in place, which enables a child to stay at home with the family. When child safety cannot be ensured in the home, an out-of-home safety plan is developed where DHS considers relative placement as its first option, followed by foster care.

Assessments

Child Protective Services (CPS) assessments describe our response to a report of child abuse and if needed, the level of intervention necessary for children to be safe. Child Welfare is implementing two plans simultaneously: One to reduce the backlog of overdue assessments and a second sustainability plan for timely completion of new assessments to prevent future backlogs. In April, we have seen a decrease in the number of overall assessments partially due to the decrease in hotline calls coming in. Staff have been diligently working to clear assessments and have completed more than 1,500 in the last month. *Data (below) from May 7, 2020*

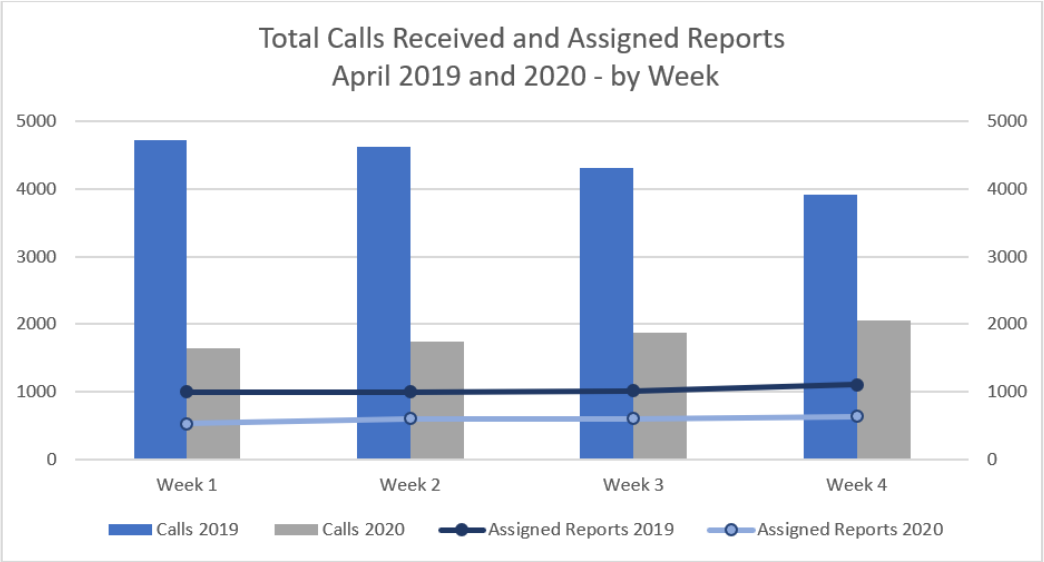


Fatality Prevention and Review Team

The Fatality Prevention and Review Unit leads the Critical Incident Review Teams (CIRTs). These teams focus on identifying systemic issues contributing to a child fatality and how they can be corrected or minimized to prevent future fatalities. The Fatality Prevention and Review program is currently building out prevention work focused on chronic neglect, safe sleep and suicide, three areas which make up many of the child fatalities in the state. Additionally, Oregon recently joined 14 other jurisdictions in the National Partnership for Child Safety Collaborative. The national quality improvement collaborative are applying safety science principles in their agencies and have committed to sharing data to help prevent tragedies. In April, CIRTs were assigned for two child fatalities.

Oregon Child Abuse Hotline (ORCAH)

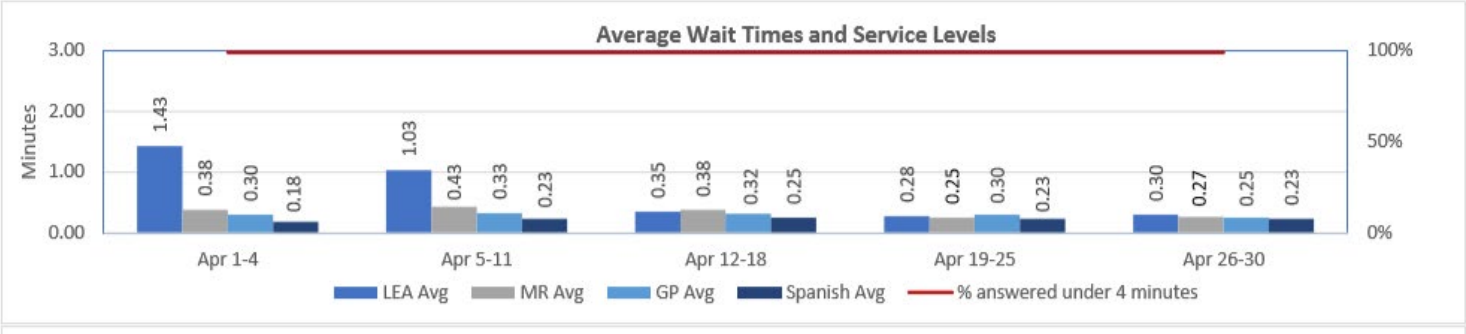
April 2020 marked one year of the hotline being centralized. This chart below shows the changes between April 2019 and April 2020. As a result of the COVID-19 global pandemic, the number of calls to the hotline dropped dramatically starting in March. In April we also saw a slight increase in the number of hotline calls coming in, from a nearly 70% drop in March to 48% in April. This decrease in calls is attributed to a decrease in mandatory reporter contacts, mostly teachers, reflecting the Stay Home, Save Lives order. In order to address this, the Child Welfare program worked with the Department of Education to create a “family well-being assessment” document to help educators while they participate in distance learning to connect with families about their needs. This document was also shared with the Self-Sufficiency Program as eligibility for services such as SNAP food benefits and Temporary Assistance for Needy Families are administered through their program. Communications to partner organizations and media has increased to highlight the importance of connecting with families to offer support during stressful times.



ORCAH average wait times

During the pandemic Stay Home, Stay Lives order, ORCAH was unexpectedly able to move almost 95% of its staff to work remotely. The calls from concerned citizens and mandatory reports continue to be answered. The reduction in call volume has improved average wait time measures for all categories of callers. ORCAH continues hiring and training screeners, and improving business processes, which will assist in sustainable reduction to wait times. Based on national best practice, the service level goal is to answer within four minutes.

Data for April 2020



LEA: Law Enforcement Agencies, MR: Mandatory Reporters, GP: General Public

Foster Care

Foster care efforts are focused in three primary categories: Safely reducing the number of children who enter the foster care system; safely reducing the length of stay in the foster care system; and increasing foster system capacity to match the unique needs of every child with a safe, stable and caring foster home in their community.

DHS has a priority to seek relative placement for children entering care, to maintain family and community connections. This category of caregivers is called “child-specific homes.” In April, 47% of placements in family foster care were with relatives. When relative placements are not possible, DHS finds certified foster families (“general providers/certification families”) that are able to meet a child’s individual care needs. In order to expand the number of general certification

homes available, multiple efforts to recruit families are underway including a partnership with Every Child (currently in multiple counties) and the hiring of 15 foster family recruitment champions.

Our partners at Every Child have seen an increase in inquiries to become DHS foster providers during COVID-19. There is also continued support for the joint Every Child/DHS project My NeighbOR which helps support children in care and their providers. In April, Child Welfare has responded to needs from foster families while daycares are closed and created an "alternative care" reimbursement for up to $375 per child. This allows for babysitting and can include respite care.

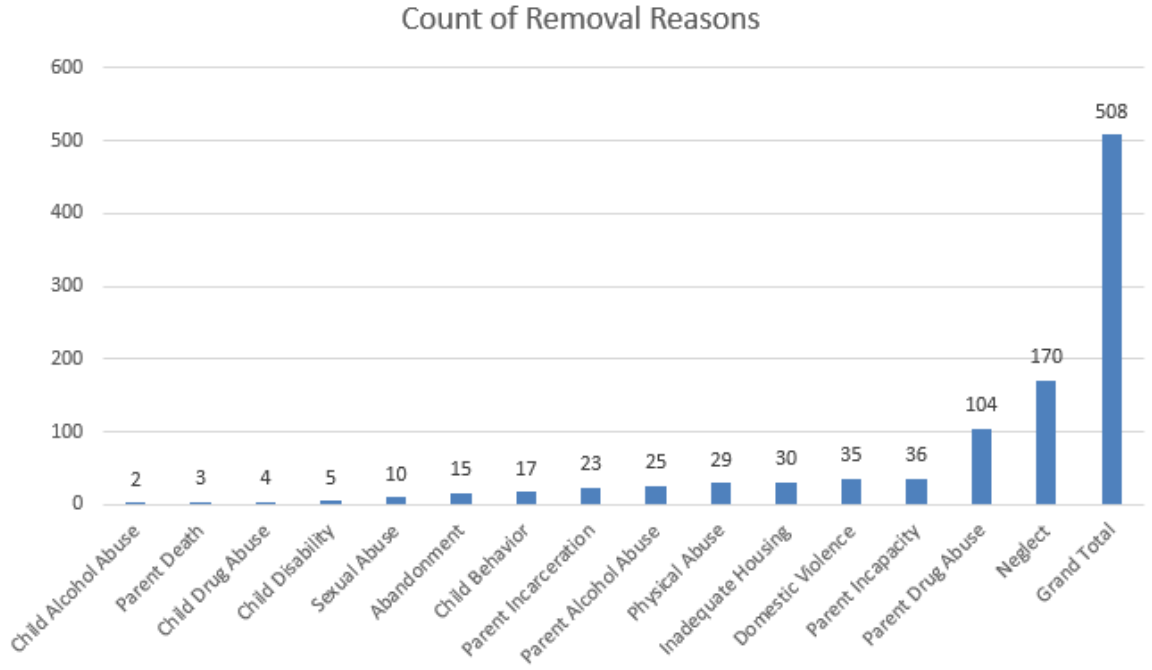
These charts reflect data as of May 1, 2020. We are continuing to see the number of children in care continue to decline.

Definitions: ***Certificate of Approval (General Certs):*** *A document DHS issues to a certified family to approve the operation of a home to provide care for a child or young adult in the care or custody of DHS and for whom DHS determines a placement is needed.* ***Child Specific****: These are foster homes that are open only for specific children, often kinship/relative family placements.* ***Children in Family Foster Care:*** *The number of children in DHS care who are determined to need family foster care rather than treatment or a higher level of care.*

	19-Nov	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	Direction
Child Specific Providers	2357	2364	2441	2441	2428	2423	n/a
General Providers	1360	1431	1389	1370	1377	1379	
Children in Care	7141	6956	6884	6833	6815	6768	

Factors for children entering foster care

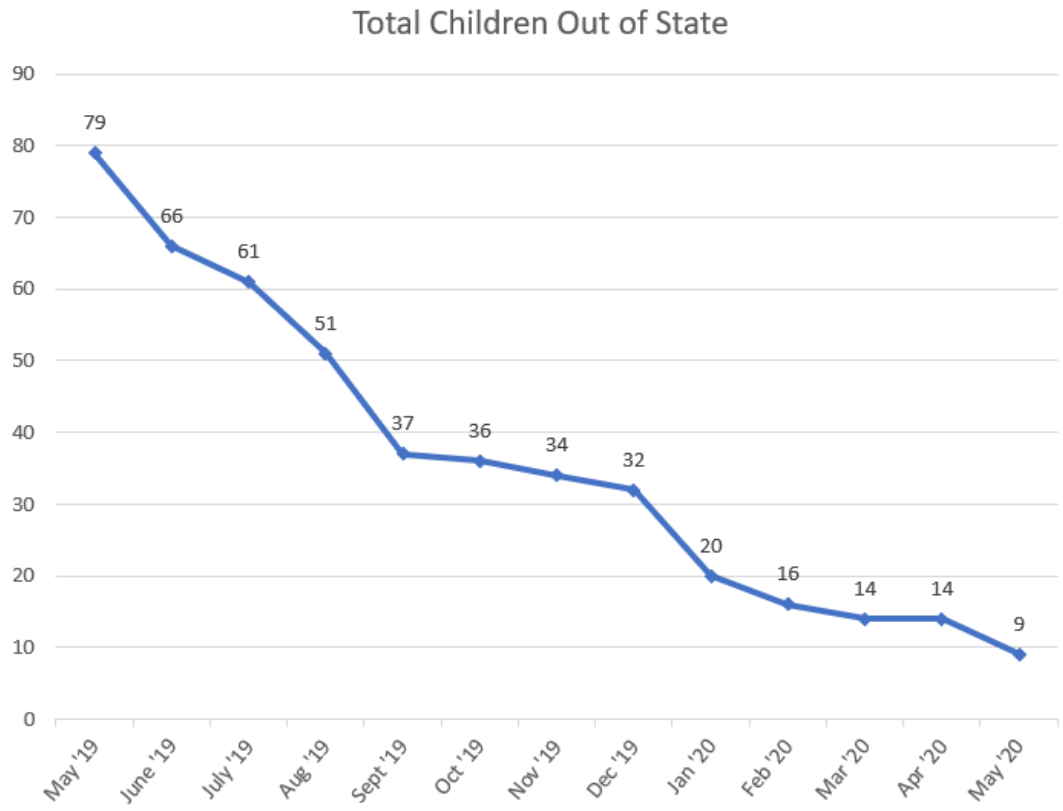
Data reflects the primary reason for children entering care in the month of March. A child may have more than one factor related to entry. Total # of children= 246 with 578 reasons. Data as of 5/4/20



Youth in foster care receiving treatment services outside Oregon

DHS is working with the Oregon Health Authority (OHA) and other partners to expand capacity to serve children and youth in Oregon. Specific safety practices are in place to protect and respond to COVID-19 in congregate care settings. We continue to decrease the number of children in out-of-state treatment services, currently at 9, the lowest number in the past year.

Data is from May 22, 2020



Barriers that led to OOS Treatment	# of Children
Appropriate Level of Care Doesn't Exist	7
Appropriate Level of Care Unavailable	2

Children and young adults in foster care in temporary lodging

Temporary lodging involves a child or young adult being housed in a hotel with DHS staff while an appropriate placement is developed. Those in temporary lodging have access to school, services and appropriate daytime activities. Child Welfare continues working to decrease the use of temporary lodging. Due to COVID-19, a new deadline of June 1 was set for a comprehensive plan to address the necessary efforts to come into compliance with our settlement agreement.

Children and young adults in temporary lodging

Temporary Lodging: 3-month trend

Feb 2020 – 18
March 2020 – 21
April 2020 - 12

Trending: Down

The unique number of children in Temporary Lodging for April was 12, a downward trend over the past three months. The average number of children in a Temporary Lodging situation per night over the month of April was 2.4.

Child Welfare Workforce

Throughout the COVID-19 crisis, Child Welfare and DHS continue to hire positions. The new Child Welfare Deputy Director of Workforce Development and Equity, Aprille Flint-Gerner and Training Manager Kim Lorz along with partners are creating virtual training and onboarding to support new caseworkers.

Trend in Social Service Specialist (SSS1) staffing

This is a trendline picture of the SSS1 workforce, which includes every type of caseworker position. Data pulled 5/7/2020.

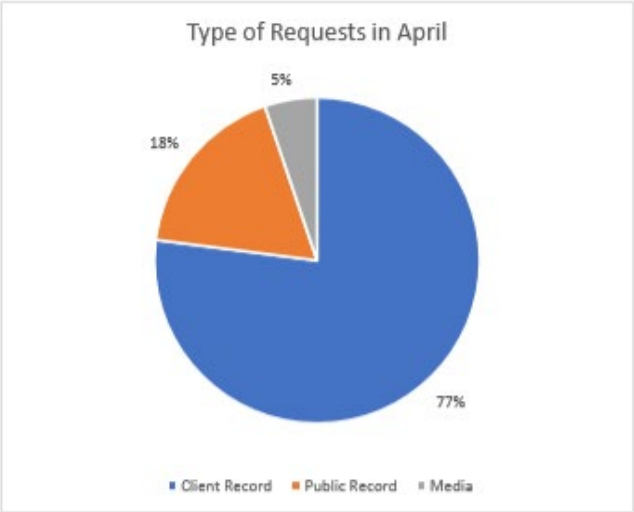
	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20
Total Number of SSS1 (Caseworker) hired and promoted	33	31	37	93	57	17	15	16	37	19
Total Number of SSS1 Employee Promotions	9	6	6	18	7	2	1	2	13	4
Total Number of Separations (including Retirements)	20	22	22	21	27	19	13	17	12	12
Total Number of Retirements	0	0	3	0	1	4	1	0	1	1

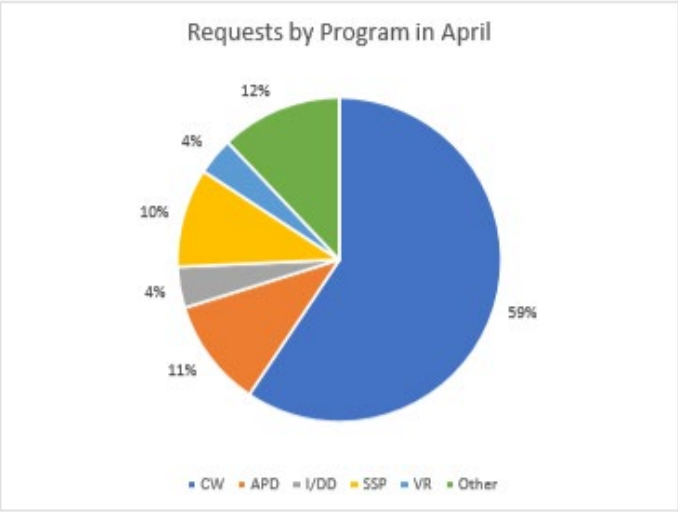
Operational Support

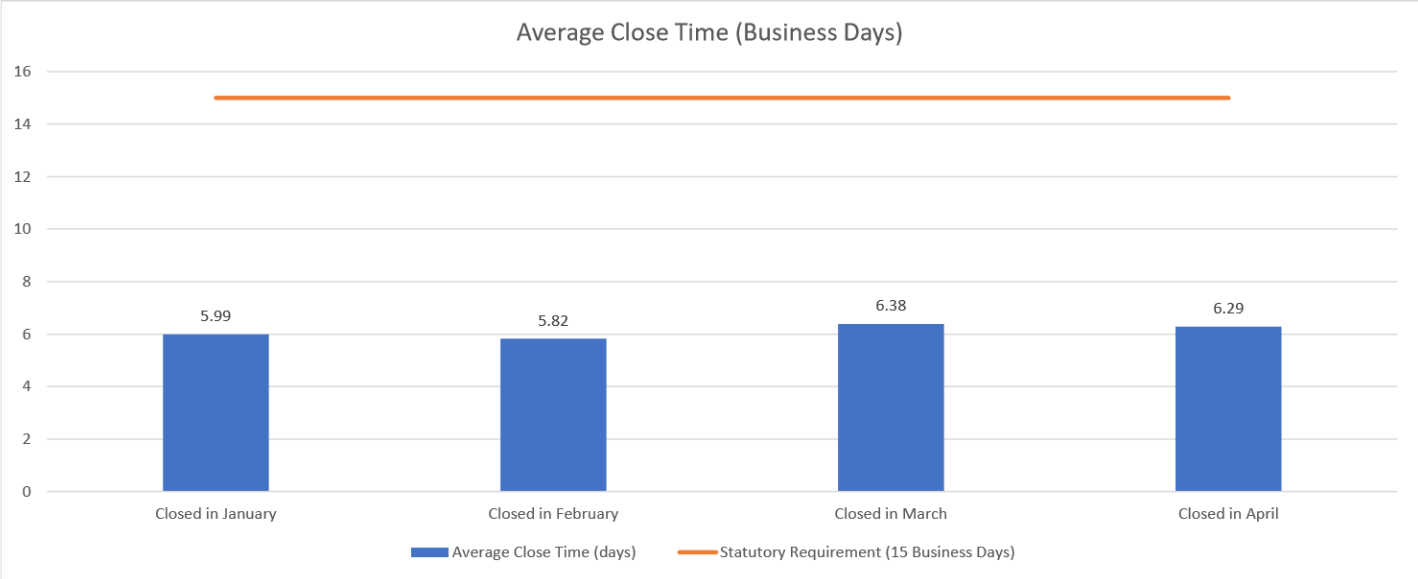
The Governor's Executive Order included direction to address operational challenges, including compliance with public records law and ensuring accurate and timely data is available to improve operations, processes and decision-making.

Public records request processing

DHS created a centralized Public Records Unit (PRU) in June 2019 to respond to public records requests, track policy compliance and report outcomes. The charts reflect the types of public records requests received and the average time to close the requests. The Public Records Unit continues to have low average processing times, currently at 6.29 days in April.







In compliance with statute, we acknowledge requests within five business days and make every effort to complete requests within 15 business days. On the rare occasion that we are unable to complete a request within 15 business days, we send a notice regarding why we need more time and providing a new estimate of when we will complete the request. These instances could include: DHS needing more information; the staff needed to finish the request are unavailable or the number of other requests being worked by DHS makes the deadline unrealistic.