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Child and Family Services Reviews Statewide Assessment July 18, 2024

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Minor formatting adjustments may have been made to this document for 508 compliance. Content is unaffected.

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SECTION I- GENERAL INFORMATION

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In preparation and development of the Statewide Assessment for Round 4 of the federal Child and Family Services Review (CFSR), the New York State Office of Children and Family Services (OCFS) engaged with various stakeholder groups, both in a focus group setting and

through electronic surveys, to gain a holistic view of the functioning of the supports and services provided throughout the child welfare system. This input was specific to topics such as families' experiences with the courts, voice in case planning, and availability and accessibility of services. Descriptions of the engagement efforts are outlined below.

OCFS utilized existing resources and forums to gather information, such as the Parent Advisory Board, Family Policy Advisors, Youth Advisory Board, and the Directors of Services Annual Leadership Conference to assess youth and family experiences. OCFS continues to expand its analysis of system performance and incorporate input from critical stakeholders to enhance functioning and identify areas of growth as well as areas to further develop.

CFSR Leadership Team

- OCFS created the CFSR Leadership Team in September 2022 in preparation of CFSR Round 4. This team consists of representatives from NYS child welfare leadership, family policy advisors, legal, and regional operations. The team meets monthly with partners from the Children's Bureau. The team is updated on CFSR steps, statewide assessment items, and prepares leaders for the on-site case reviews and, when needed, the Performance Improvement Plan (PIP) development.

Judicial /Legal Community

- In preparation for the Child and Family Services Review (CFSR) in September of 2024, the NYS Unified Court System (UCS) and OCFS jointly decided to survey the judicial and legal communities given the integral role that these parties play in our state's child welfare system. A fifteen-question survey devised by the Office of Justice Initiatives' Division of Child Welfare and Family Justice was shared with Child Welfare Court Improvement Project members in collaboration with the Office of Court Research. The questionnaire was live from December 12th through December 21st of 2023. Of the 384 surveys sent, 305 were completed (80% completion rate) representing all judicial districts in the state as well as the Office of Court Administration and the Appellate Division

Systemic Factors Leads

- Each systemic factor is led by a subject matter expert with representation from training, policy, data analytics, Continuous Quality Improvement (CQI), regional operations, and OCFS leadership. Leads gather information from various sources, including stakeholders, to assess the functioning of the systemic factor and, when necessary, provide recommendations for program improvement. This group meets monthly to provide status updates on progress with the systemic factor items.

Tribal Leaders

- In September 2023, Tribal leaders/child welfare representatives from all nine federally recognized tribal nations were invited to attend and participate in the NYS OCFS Tribal Consultation Meeting. Five tribal leaders, representing four nations participated.

Youth with Lived Experience in Foster Care

- In the fall of 2023, two in-person and three virtual focus groups were facilitated to engage youth with lived child welfare experiences. Four cohorts of youth were invited to attend: those between the ages of 14 and 17 currently in foster care, those aged 18 and above currently in foster care, those aged 18 and above previously in foster care, and those currently attending college. Fifteen youth were invited to each session, and a total of twenty-eight youth participated. Youth described their experiences across various areas, including preparedness for leaving foster care, available support systems and connections, achieving permanency, and court proceedings.
- In November 2023, The New York City Administration for Children's Services (ACS), in partnership with foster care provider agencies, conducted the seventh annual Foster Care Youth Experience Survey.[1] The response rate was 60%; 1,132 out of the 1,888 eligible youth completed the survey. The survey questions focused on youths' experiences related to their education, employment, health care, connections to family and friends, and permanency planning.

Families/Parents with Lived Child Welfare Experience

- Parent Advisory Board- Began in 2020. Made up of fifteen foster parents, adoptive parents, adults with lived experience in foster care and parents impacted by the child welfare system and leadership from OCFS. The group meets with OCFS staff six times a year with the goals of understanding how the policies and procedures of OCFS impact families both to support safety permanency and well-being outcomes as well as how they can be barriers. This group has been a strong advocate for more trauma-informed care throughout the system which contributed to OCFS investment in trauma-informed care models. The groups have provided input in various areas including updates to the caseworker foster care manual, post adoption resources, parental rights documents, and the direct cash transfer pilot.

- In November and December 2023, one in-person and four virtual focus groups were co-facilitated by NYS' Family Policy Advisors and supported by the Capacity Building Center for States (CBCS). Five cohorts of families, who have been impacted by NYS' child welfare system in the last two years, were invited to attend. These groups included families from Upstate NY, New York City, Region 2, as well as fathers and Hispanic families. Fifteen parents/caregivers were invited to each session and a total of 51 participants attended the sessions. Parents and caregivers provided valuable feedback on a range of topics, including the array of services offered, agency responsiveness, and caseworker training.

- In the fall of 2023, an electronic survey was sent via email to approximately 2,000 parents from a listserv managed by Families Together in NYS. The survey included questions about family involvement in service plan development, experiences with service providers, and interactions with courts. Though the survey was sent to a significant number of email addresses, only 17 responses were received.

Foster/Adoptive Parent and Kin/Family Caregivers

- In the fall of 2023, the Adoptive and Foster Family Coalition sent an electronic survey via email to approximately 1,000 foster parents they had interactions with since 2020. The survey included topics around preparedness to foster a child, involvement in court, and

[1] YES2024.pdf (nyc.gov)

training. Though the survey was sent to many individuals, only 12 responses were received.

- In the fall of 2023, four virtual focus groups were facilitated to engage foster, adoptive, and kinship families who have cared for a child in foster care within the past two years in New York State. Families from small and/or rural counties, large and/or urban counties, and New York City were invited to discuss their experiences. Nearly 15 foster, adoptive, and kinship parents were invited to attend each of the sessions and a total of 19 participated. The discussions covered a range of topics including caseworker assessments, service plan reviews and court hearings, training, and service array.

- In 2022, The New York City Administration for Children's Services (ACS), in partnership with prevention provider agencies, conducted the annual Family Experience Survey.[2] The response rate was 39%; 2,748 out of the 7,052 families enrolled in services completed the survey. The survey includes questions about the type and quality of services received; interactions with case planners; demographic information about families and household composition; and suggestions for how services may be improved.

Local District of Social Services (LDSS) Directors of Service

- In October 2023, at the statewide Directors of Services Leadership Conference, all directors were invited to attend a Focus Group facilitated by OCFS. Of the 58 individuals who were invited, 20 attended. The focus group discussed data, training, services, and caseworker workloads.

- In addition to the focus group, the Directors of Services were also provided a survey covering additional topics including foster and adoptive home licensing, case planning, and permanency hearings. Of the 58 invited to take the survey, 26 responses were received.

- September 2022, as a part of an annual assessment of Program Quality Improvement (PQI) reviews (item 25), OCFS sent a survey to the 36 LDSSs that had a prior review. Responses were received from 15 LDSSs (42% response rate).

Voluntary Agency (VA) Leadership

- Regional Voluntary Agency leadership quarterly meetings with OCFS regional offices occur on an ongoing basis. Information sharing, challenges from the field, and collaboration with peers are essential to a well-functioning system. In the spring of 2024, members of these groups provided input for this assessment as a part of their standing meetings.

Caseworkers

- In the fall of 2023, an electronic survey was sent via email to approximately 237 caseworkers across New York, yielding 126 respondents (53% response rate). The survey included topics around caseworker and foster parent training, services for families, and the role of the courts in achieving permanency.

[2] PreventionSurveyLL17Report.pdf (nyc.gov)

SECTION II- STATE CONTEXT AFFECTING OVERALL PERFORMANCE

Part 1: Vision and Tenets

NYS is a state-supervised, county-administered child welfare system. Services are locally administered through 57 LDSSs, the five boroughs of New York City (NYC), the St. Regis Mohawk Tribe (hereinafter included in the term LDSS), and county youth bureaus. State dollars are allocated to fund services at the community level. A framework of regulation, policy, and procedures is established by OCFS and operationalized by LDSSs. While OCFS has responsibility for direct oversight of some services and program development, it is the LDSS' responsibility to serve clients accessing the available services within the LDSS' milieu. Approximately one-third of LDSSs are considered rural. OCFS collaborates with these LDSSs to fund and provide services and programs that address the special needs of these rural communities.

OCFS serves as the Title IV-B agency for NYS. OCFS is dedicated to improving the integration of services for children, youth, families, and vulnerable populations; to promoting their development; and to protecting them from violence, neglect, abuse, and abandonment. The agency provides a system of family support, juvenile justice, child care, and child welfare services that promote the safety and well-being of children, youth, and adults. Moreover, OCFS is committed to ensuring that we lead with equity. OCFS understands that a history of discrimination, exclusion, violence, and marginalization of communities of color, the LGBTQ+ community, and people with disabilities have also generated disparities that exist with in health and human services. To serve all New Yorkers meaningfully and equitably, we acknowledge that previous models of human services included antiquated, biased, and myopic views of disenfranchised populations. OCFS is committed to transforming its operations so that efforts to address disparities in our systems of care are authentic, sustainable, and oriented toward healing and equity.

Mission Statement

The OCFS serves NYS by promoting the safety, permanency and well-being of our children, families, and communities. OCFS achieves results by setting and enforcing policies, building partnerships, and providing funding and quality services. A copy of the Practice Model that guides the work within LDSSs and voluntary agencies (VAs) is attached (Appendix B).

Programs and Services

OCFS oversees the provision of services for children and families involving prevention, foster care, adoption and adoption assistance, child protective services (including operation of the Statewide Central Register for Child Abuse and Maltreatment), and protective programs for vulnerable adults. OCFS is responsible for the functions performed by the State Commission for the Blind (NYSCB) and coordinates state government response to the needs of Native Americans on reservations and in communities. OCFS is responsible for programs that provide services to children who have been commercially sexually exploited and for the oversight of programs that serve homeless and runaway youth, and for programs for the prevention of juvenile crime and status offenses.

OCFS provides oversight and monitoring of regulated childcare (e.g., family day care, group family day care, school-age child care and day-care centers outside of New York City), legally exempt child care subsidies, child care resource and referrals, Empire State and the Advantage After-School Programs, and provides services and programs for infants, toddlers, preschoolers, and school-age children and their families.

Approach to Drive Change

NYS's bold vision for modernizing child welfare is centered on strengthening and investing in parents, families and communities, and intentionally tackling inequities and disparities in the social determinants of health – poverty; lack of affordable, quality child care; education barriers; housing instability; food insecurity; lack of affordable, quality physical and mental health care; intimate partner violence; maternal depression; family mental illness; substance use disorder; and discrimination – which are identifiable root causes that bring families to the attention of child welfare. We know the child welfare system cannot address these social and psychosocial needs alone, yet the families we serve need us to be familiar with and provide robust resources to address these issues. We can improve outcomes for families by changing the trajectory of child welfare.

OCFS is charting a new course. With access to new Title IV-E federal prevention funding, a continued state commitment to open-ended prevention funding (62/38) and realigned state funding, deepened government partnerships, and a public health perspective, we can transition from a child-centric system to a family and child well-being system. We know, and the data tell us, that a child's connection to their family is paramount to healthy family bonds and provides the foundation upon which safety, permanency, and well-being can truly be achieved, even when a child cannot remain safely in their home and foster care is required. To that end, we have begun to reimagine our system to be one in which we:

1) Embrace listening to parents, youth, and kin caregivers as they tell us what they want and need,
2) Marshal our own resources and the resources across the public platform and in communities to address those needs from a public health perspective,
3) Embrace diversity, equity, inclusion, and accessibility (DEIA) recognizing the disparate impact our policies have had on people with varied racial, ethnic, gender, disability, immigration, language proficiency and socio-economic status by providing opportunities for individuals to gain access to a wide range of resources and services across all sectors,
4) Deploy evidence-based practices designed to strengthen and support families, and
5) Invest in community-based programs which reflect the communities they serve.

In addition to investing in primary, secondary, and tertiary preventive services, OCFS continues to focus on the use of kinship resources when a child cannot remain safely in their home. To promote kinship placements, OCFS requires LDSSs to have a Kin-First Firewall policy. This practice is intended to increase safe and appropriate kinship placements by requiring a higher level of review to verify that all viable relatives and adults with a positive relationship to the child have been explored to achieve a kinship placement before making a non-kinship placement. OCFS set a goal of 50% of all children in foster care residing with kin. As of 12/31/23, of the children in care, 39.4% were residing with kin.

Additionally, OCFS developed a Kinship Champion Training to cultivate dedicated “Kinship Champions” within LDSSs who search for, engage, notify, and assess potential kin caregivers and provide support to those families. Kinship Champions are the repository of information about the options, processes, and supports necessary to place children with kinship caregivers and safely sustain those placements. Kinship Champions serve as advocates within the LDSS to maximize kin placements and are liaisons to the community to continue to expand awareness of the need for kin resources to support children who are removed into foster care.

OCFS has also set a target regarding the number of children placed in a congregate setting. The goal is for less than 12% of all children coming in foster care to be placed in congregate care. As of 12/31/23, the state rate was 14.3%, down from 16.8% on 12/31/19.

OCFS also strives to have children in congregate settings achieve timely permanency, and to this end, has developed a long stay review process. The focus of the long stay review process is to ensure those children who have been placed in a congregate setting for more than 12 consecutive months or 18 nonconsecutive months (or in the case of a child younger than 13, for more than six months), continue to have a need for that level of care. OCFS requires each LDSS to develop a local review process to assess whether a child has a treatment need that cannot be met at a lower level of care. The LDSS must evaluate each child’s placement for progress related to their goals as well as barriers to achieving the goals. The LDSS may make a recommendation for an extension of the child’s congregate care placement and request OCFS review and approval the extension.

Additionally, over the last few years, NYS passed a series of legislation that reflects youth justice reforms broadly, as well as the federal Family First Prevention Services Act. Specifically, Raise the Age legislation was passed in 2018, which changed the age that a child can be prosecuted as an adult to 18 years of age in criminal cases in NYS. In 2019, Persons in Need of Supervision (PINS) Reform legislation was passed that eliminated the ability to remand youth under a PINS proceeding to detention and created an option of PINS pre-dispositional placement, for those instances in which a youth requires an out-of-home placement. Additionally, in 2022, NYS passed legislation that raises the lower age of juvenile delinquency from 7 to 12 years old. OCFS is fully aligned with the intended purposes of these legislation to reduce the criminalization of children and impact racial disparities in the juvenile justice and foster care system.

Part 2: Cross-System Successes and Challenges

Successes

OCFS collaborates with and gains input from LDSSs, youth bureaus, and VAs using a variety of methods as OCFS works to promote the safety, permanency, and well-being for the children, youth, and families of NYS. Communication occurs through state-level associations – the New York Public Welfare Association (NYPWA), the Council of Family and Child Caring Agencies (COFCCA), the Empire State Coalition of Youth and Family Services (Empire State Coalition), the NYS Juvenile Police Officers Association (NYSJPOA), foster and adoptive parent organizations, such as the Adoptive and Foster Family Coalition, and the Association of NYS Youth Bureaus (NYSAYB). OCFS staff participates in association meetings and conferences, and frequently communicates with individual members of subgroups as needed and appropriate.

OCFS developed a Parent Advisory Board (PAB) in 2020, which includes birth, foster and adoptive parents, and kinship caregivers. The goal of the 15-member board is to provide feedback on their experiences with the child welfare system and make recommendations to OCFS for improving the system, and implementing state and federal initiatives to improve safety, permanency, and well-being for NYS's children and families. The PAB is co-chaired by a parent member as well as a state liaison.

Through a contract with Families Together in NYS (FTNYS), OCFS also has added Family Policy Advisors to our staff. Each Family Policy Advisor has lived child welfare experience and has received training from FTNYS. The Family Advisors, located in OCFS home office and regional offices, provide input on child welfare policy and practices, assist in case reviews, and work with local departments of social services to incorporate parent advocates as part of their workforce in assisting families who have been reported to child protective services.

OCFS is committed to hearing the voices of youth impacted by service systems and will continue to involve the members of the statewide Youth Advisory Board (YAB), developed in 2017. OCFS, in collaboration with the NYS Division of Criminal Justice Services (DCJS) and the University at Albany, has supported a Youth Justice Institute to enhance the training, technical assistance, and research knowledge of local stakeholders. The Youth Justice Institute is developing a Youth Justice Peer Advisory Council comprised of young adults with lived experience who will also provide guidance to OCFS. Additionally, OCFS contracts with the SUNY Albany Research Foundation, Professional Development Program to hold annual Youth Events in each of the six regions, providing an opportunity for youth in foster care to raise any issues that impact their wellbeing, safety, and permanency while they are in foster care.

OCFS consistently collaborates with our sister state agencies, which include the Office of Mental Health (OMH), Department of Health (DOH), Office for People with Developmental Disabilities (OPWDD), Office of Addiction Services and Supports (OASAS), the State Education Department (SED), and Office of Temporary and Disability Assistance (OTDA). There is a bi-weekly Deputy Commissioner's Cross Systems meeting to facilitate needed discussions, partnerships, and collaborations. OCFS also works closely with the Council on Children and Families. The council's Interagency Review Team brings agencies together to identify resources for children who are involved with multiple systems. Challenges faced on the state level are mainly around funding and the difficulty of braiding our funding to help meet the needs of the families we serve, for which many of them they are served by multiple state agencies.

An example of cross-systems collaboration is in 2022, OCFS released a joint funding opportunity with SED to develop Family Opportunity Centers (FOCs) to meet emerging needs of at-risk families by increasing their protective factors and facilitating connections/coordination with community partners, including schools and mental health and substance use disorder service providers, to strengthen and support families. This initiative was designed to support community-based efforts to develop, operate, expand, enhance, and coordinate services to prevent child abuse and neglect and to support the coordination of resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect, and promote permanency by implementing a protective factors framework. FOC programs offer a wide range of prevention services that include formal and informal parenting education, building social connections, meeting families' concrete needs, and overcoming barriers to accessing mental health and/or substance use disorder services if needed. Through these services, FOC's will also support improved student mental health, school climate, and student attainment for

grants awarded to school districts. We are hopeful that OCFS can continue to collaborate with other sister state agencies on service provision to NYS families.

Challenges

One challenge that has affected many of our LDSSs and our authorized VAs and community preventive agencies is staff turnover and recruitment. This has affected workloads, with many LDSSs and VAs struggling to meet state regulations and mandates related to timeliness. Additionally, beginning in the Spring of 2020 with the onset of COVID-19, many LDSSs and VAs had to manage the challenges of maintaining staffing levels due to staff illness and vacancies. This challenge was not isolated to child welfare, but also to many of child and family serving agencies, such mental health and substance abuse service programs. Recruitment efforts were not always successful, and many workers wanted positions that afforded them to the opportunity to work remotely, to which child welfare does not readily lend itself.

Another challenge noted by our VA and LDSS partners is the ability to find safe, stable foster care placements that can support the complex needs of the children entering foster care. Factors such as the recent COVID-19 pandemic, and a growing substance use and mental health crisis in our society has only exacerbated the challenges. Building a continuum of services and supports inclusive of upstream and evidence-based prevention services along with a network of foster homes, when that level of intervention is needed, is integral to achieving the systems transformation to which we are committed. The existing foster care system has been embattled by several challenges, including staffing shortages and turnover as well as having a treatment model that is effectively designed to support the increasing complex needs of children and older youth and their families. As NYS continues to focus on reducing the use of congregate care, the aforementioned challenges have to be addressed.

Part 3: Current Initiatives

As the statewide agency promoting the safety, permanency and well-being of New York's children, families, vulnerable adults, and communities, OCFS is focused on building societal and family systems that are equitable and empowering for all, regardless of one's age, gender, race, religion, ethnicity, socioeconomic status, gender identity and/or sexual identity. We recognize the need to allocate the necessary resources and opportunities needed for each person to realize equal potential for advancement. Within the child welfare system, we see how historically marginalized communities have been generationally harmed by systemic inequity.

In 2020, OCFS began requiring LDSS to have a Blind Removal policy, which is a way to not only address bias in decision-making during the child protective services (CPS) removal process, but also decrease the overall number of children being removed from their homes and build a more equitable system of care. While a direct correlation between Blind Removals and the previously mentioned Kinship Firewall policy cannot be made, NY is seeing improvements in reducing DMR rates which we believe may be positively impacted by these policies, as well as the work of the Kinship Champion, and SCR reforms. Disparity rates of black children at three child welfare points are seen below[3]:

[3] Source: OCFS Disproportionate Minority Dashboard 2022

	2018 Black Disparity Rate	2022 Black Disparity Rate
Indicated CPS reports	2.6	2.4
Entering foster care	4.0	3.6
In foster care, end of the year	5.6	5.0

Preventive Initiatives

Listed below are various initiatives that look to support underserved and under-resourced families and communities.

Social Determinants of Health

A bureau was created called the Social Determinants of Health (SDOH) with goals to:

- address the systemic issues (racial disparities, ineffective policies, and practices) faced by marginalized communities.
- identify and unify the work being done internally and externally to eliminate duplication of efforts and maximize the potential of resources allocated.
- work collaboratively across NYS agencies to create a comprehensive statewide blueprint for addressing the Social Determinants of Health and ACES.
- utilize these key areas to guide all steps of the process – social justice, poverty, education, and trauma with a child welfare focus.

Direct Cash Transfer Pilot

OCFS is piloting a Direct Cash Transfer which will be the first in the nation to track and gauge whether receiving cash payments decreases a family's future involvement with the child welfare system. This direct cash transfer is grounded in the belief that economic and concrete supports build toward true equity – when each family will one day be positioned at the same starting line and where these families in need will finally have the proper supports and resources to enjoy the stability they so desperately desire and deserve.

A total 150 households across the three counties have been enrolled in the treatment group and began receiving $500 per month via a debit card, unconditionally, in August 2023. They will receive $500/month for one year, totaling $6,000 per family. The pilot's target population is households eligible to receive a differential response to child protective services reports that have been registered by the SCR who reside in three counties – Monroe, Onondaga, and Westchester. This differential response program, called Family Assessment Response (FAR), is an option for engaging with families who have interacted with child protective services, but where this is no safety concern for the child and/or family.

The chosen counties have a high number of FAR-eligible cases, allowing for a robust evaluation. The Center for Guaranteed Income Research (CGIR) is conducting a randomized controlled trial (RCT) – considered the gold standard in research – to determine if receiving a direct cash transfer had a positive impact on parental physical and mental health, child development and financial stability, and whether it prevented future interactions with child welfare services.

CarePortal

OCFS is contracting with agencies statewide to provide an online technological platform, CarePortal, that serves as a network resource hub for child-serving agencies within local communities across NYS. With this online platform, the hope is to bridge the gap between community partners and local agencies that work directly with families in crisis, thereby mitigating interactions with the child welfare system.

- Caseworkers can use CarePortal to request specific items for their clients in need (i.e., tangible items such as diapers, cribs, home items, etc.).
- Once a request is uploaded by a caseworker, CarePortal then sends that request to a local network of churches and community providers seeking a volunteer to fulfill that need.

CarePortal designates a local implementer (typically, a local ministry with ties to the community) to facilitate partnerships with local churches, community providers, and child welfare organizations to participate in the portal. The goal is to target organizations whose mission it is to support children and families. CarePortal has served more than 200,000 children throughout the United States. Community partners have donated diapers, cribs, bedding and cleaning supplies and organized clothing drives for needy families. Nine (9) LDSSs in NY are currently providing this service and an additional 13 LDSSs are expected to participate by 2025.

H.E.A.R.S. Line

OCFS has established a warmline dedicated to providing support to children and families in New York. The H.E.A.R.S. Family Line (Help, Empower, Advocate, Reassure and Support), is a valuable resource that connects families with the services and supports they need to prevent child welfare involvement and improve well-being. HEARS representatives assist families by providing resources and referrals to support needs in a variety of areas, including food, clothing, housing, medical and behavioral health care services, parenting education, childcare and more. There have been more than 2,600 calls to the HEARS line to date, with about 60 being transferred calls from the SCR.

Family Opportunity Centers and Family Resource Centers

OCFS celebrated the opening of multiple family opportunity centers (FOCs) across NYS, which strive to improve the safety and well-being of children and families by addressing issues of poverty, education barriers, substance use disorders, and lack of quality health care. The FOCs, launched in partnership with the SED, are funded by grants through state funds and the federal Community-Based Child Abuse Prevention program included in the American Rescue Plan. There are currently 15 FOCs in operation.

Additionally, eight Family Resource Centers (FRCs) were created, which are easily accessible, strength-based programs that support families in communities across NYS. Family Resource Centers (FRCs) are flexible, family-focused, and culturally sensitive. Services and programs are based on local needs and build on existing planning processes with community and inter-disciplinary participation. The FRCs work in partnership with other community agencies and parents. Their programs assist families in their caregiving roles, strengthen informal support among families, offer needed resources either directly or through community referrals and promote community investment. Services enhance protective factors that research shows can reduce child abuse and maltreatment. These factors include parental resiliency, social

connections, knowledge of parenting and child development, concrete support in time of need, and social and emotional competence in children.

Collectively, the FOCs and FRCs provide programs to serve families in communities under the jurisdiction of 23 LDSSs and two of the NYC boroughs.

Healthy Families New York Expansion

The Healthy Families New York home visiting program matches parents with knowledgeable and caring workers who provide information and support during pregnancy and early childhood. Services include helping families access community resources and services, educating families on parenting and child development, connecting families with medical providers, and assessing children for developmental delays.

With additional state funding made available in 2023, OCFS was able to expand the Healthy Families NY program statewide, covering every county including the five boroughs of New York City. OCFS is also expanding the use of the evidence-based Child Welfare Protocol across the state, which will serve children and their families referred to the program through the LDSS preventive services.

Mobile Response Vans

Four LDSSs are participating in a Mobile Van Response Pilot program. Mobile response services are available for ongoing needs for families identified as high-risk and in receipt of preventive services. The mobile response unit responds to a request for assistance by going to the home where the child is residing or at a location in the community at a mutually agreed-upon time. The mobile response unit can be responsive when families call for help when a child has an emotional or behavioral health need that could lead to a disruption in the home.
Mobile response units work with the parent or caregiver and child to reduce or de-escalate identified behaviors and may provide intervention services to address any immediate concerns and ongoing needs. Mobile response services can also be utilized for non-emergent support, with response units stationed at key neighborhood sites to promote community engagement and facilitate linkages to programs.

Family First Preventive Services

OCFS subsequently submitted the NYS Prevention Plan in spring of 2022, with final approval of the plan being received on August 2, 2022. The plan's initial focus is the implementation of eleven evidence-based services directly by LDSSs or through contracts with preventive agencies. It is felt that the availability of these evidence-based services will impact the state's service array and accessibility for individualizing the services to meet the needs of the families they are meant to help.

To support this work, OCFS created a Center for Excellence which has contracted with a purveyor to support the implementation of Brief Strategic Family Therapy (BSFT), which was identified as a service LDSSs were interested in providing to families within their district. A total of three preventive agencies have been selected to receive training on BSFT and are providing this service to families that are referred by child welfare.

The Center for Excellence is also providing coaching and fidelity monitoring on Motivational Interviewing, which is currently a training offered to LDSSs and VAs through OCFS. LDSSs will also be able to seek support from the Center for Excellence as they look to implement other evidence-based services.

Foster Care Initiatives

Listed below are initiatives that look to enhance foster care and services to expedite reunification and adoption.

Family First Congregate Care

OCFS began implementing the Family First Prevention Services Act congregate care provision on September 29, 2021, with the focus on reducing the state's reliance on congregate care. OCFS sought and received approval for the Qualified Individual (QI) waiver on 9/30/21, with the final approval of NYS's Prevention Plan related to congregate reductions on 10/25/21. Since that time OCFS adopted comprehensive regulations detailing standards for Quality Residential Treatment Programs (QRTP), QRTP exceptions, long-stayer reviews, and other federal requirements. Through this process, children and youth will receive the services they need, for right amount of time, aiding in achieving permanency and the safe return home.

Therapeutic Foster Care Oregon (TFCO) Pilot

Therapeutic Foster Care Oregon is a therapeutic foster care program model for foster boarding homes that will be piloted in three districts. The districts are currently recruiting foster homes, as well as hiring clinicians and counselors to help support the homes piloting this program. Each district will provide 10 TFCO foster homes to care for children with complex needs.

Extraordinary Level of Care – New Foster Care Rate

A new level of care rate was added to the list of foster care payment rates to address youth with complex needs. On August 9, 2023, conforming and other regulatory amendments were adopted that include adding the extraordinary level of care rate category to the list of categories of foster care rates for children placed in foster boarding homes. Previously there were three levels of foster care – basic, special, and exceptional. OCFS has now adopted an "extraordinary" level of care for children placed in foster boarding homes. This placement type is available for children who, without an extraordinary level of care in a foster family boarding home, would need to be placed in a QRTP or require 24-hour-a-day care by qualified clinicians due to their complex needs. OCFS has released guidance on this and related regulatory changes within the directive 23-OCFS-ADM-21.

Foster and Adoptive Parent Recruitment

OCFS is piloting a software application that can be used by prospective foster and adoptive parents, and home finders as a means of expediting the approval/certification process. The software adheres to the statutory, regulatory, and policy requirements that meet both federal and state standards and will also promote consistency in applying licensing standards statewide.

Heart Line

The Heart Line will create a new and innovative statewide peer tele-support service for young adults currently in foster care and those who have recently transitioned out of the foster care system but are still eligible to return to foster care. This service proposes to 'close the gap' on equitable access to information and resources that can directly impact a young adult's ability to problem solve daily obstacles, while developing strategies to maintain resilience throughout their journey into adulthood. The current target population is young adults ages 14-21 who have current or prior impact by the NYS child welfare systems both in congregate and community-based settings such as therapeutic, foster, kin or adoptive foster care placements. The services of the Heart Line will be available to young adults who seek emotional or resource connection through a lens of relatability.

Child Protective Initiatives

Promoting safety for New York's children remains a priority and the following initiatives are being implemented to support this.

SCR Reform

OCFS initiated Part R of Chapter 56 of the NYS Laws of 2020 to address several disparities, including socioeconomic and racial disparities in CPS determinations and disparities between the conclusions of CPS reports and the results of related Article 10 proceedings in family court. The law, commonly referred to as the "SCR Reform Legislation" went into effect on January 1, 2022, and has the following provisions:

- The law raised the level of proof required for CPS to substantiate a report of abuse or maltreatment. The lower standard of "some credible" has been raised to the higher "fair preponderance" standard of proof.
- All indicated CPS reports for maltreatment only are automatically designated as "Not Relevant to Employment" or "Not R & R" after eight years. The maltreatment allegations deemed "Not R & R" remain part of an indicated report, but the existence of the report cannot be revealed to current or prospective employers or licensing agencies. This allows individuals who have indicated CPS reports for more minor conduct to be cleared for employment working with children and vulnerable adults. It also allows the subjects of such reports to be cleared to become foster or adoptive parents.
- When a person with an indicated report has an administrative appeal and there is a related abuse or neglect proceeding in family court, the court's decision dictates how the appeal is determined. For example, if a parent has prevailed in family court, the OCFS administrative appeal will be decided in the parent's favor.

Between 2013 and 2020, the percentage of accepted CPS reports that resulted in an indicated finding each year was stable at approximately 28%. The indication rate dropped slightly during the pandemic years, before reaching a ten-year low of 21% in 2022 following the implementation of SCR reforms. The decline in indication rate may be attributed to the heightened standard proof now required to indicate a report of child abuse or maltreatment.

Safe and Together Model

OCFS has been working with the Safe & Together Institute to continue our efforts of creating a broader system of change in our work with families impacted by domestic violence. OCFS provides the Safe & Together Model training to staff in LDSSs through our Child Welfare Foundations course, as well as part of the Domestic Violence Learning Exchanges. Through the training and learning exchanges, LDSS staff develop the ability to identify perpetrator patterns of coercive control and actions taken to harm the children, and the impact on survivor and child safety and well-being. They also identify the full spectrum of the non-offending parent's efforts to promote safety and well-being of the children. By participating in these trainings and learning exchanges, staff can better partner with survivors, identify next steps, and more efficient interventions with the perpetrator to improve safety outcomes, reduce recurrence of maltreatment, and the need for out-of-home placements.

Updated Mandated Reporter Training

OCFS has launched a new mandated reporter training for all professional groups required by NYS law to report suspected child abuse and maltreatment. A key focus of the new training is an implicit bias component to prevent calls to the SCR based on race and poverty. In addition to implicit bias training, updates also include material to explain the impact of adverse childhood experiences (ACEs) on children and families to prevent inflicting additional trauma by unnecessarily subjecting a family to a child protective services investigation. The new training will also help mandated reporters identify when a family could instead be supported by directing them to culturally responsive, effective, and community-based programs through OCFS' new HEARS family line.

This OCFS training will also help develop improved skills to recognize signs of abuse and maltreatment in virtual settings with the increase of online schooling and telemedicine since the pandemic. More than 50 professional groups, including teachers, social workers, childcare workers, doctors and police officers, are mandated reporters, and they must complete the free, online, self-directed course by April 1, 2025.

Better for Families" BFF"

A collaborative approach to working with all child welfare cases, including those with substance use disorder (SUD), regardless of risk or need. BFF offers statewide change throughout the child welfare and family court system, as well as SUD and mental health treatment practices, by integrating effective family treatment court (FTC) principles into the broader legal / judicial child welfare system.

SECTION III- ASSESSMENT OF CHILD AND FAMILY OUTCOMES

For all Outcome areas assessed in this section, "PQI data" represents data gathered during internal Program Quality Improvement (PQI) reviews. PQI reviews identify strengths and areas needing improvement in Local Departments of Social Services (LDSS) CPS, Preventive/Protective (In Home), and Foster Care practice based on a review of a sample of cases. Items identified as strengths in less than 75% of applicable cases, are required to be addressed by the LDSS in a Program Improvement Plan. This threshold takes into consideration the limited sample of cases that are reviewed in each LDSS and is evaluated with each cycle of reviews.

The 2023 PQI reviews took place from February 2023-January 2024, had a period under review beginning in 2022, and included 21 of 59 LDSSs. CPS investigations were evaluated with an internal OCFS instrument and Preventive/Protective and Foster Cases with the federal OSRI instrument. The universe of cases available for review are identified based on the following criteria:

CPS – Closed investigations during the most recent 6-month period prior to the review
Preventive/Protective – Families with services for at least 210 days during the most recent year, with no children in foster care during the period under review
Foster Care – Children in foster care for at least 240 days during the most recent year

Additional information on PQI reviews is found in Item 25.

Safety Outcomes 1 and 2

*Safety outcomes include: **(A)** children are, first and foremost, protected from abuse and neglect; and **(B)** children are safely maintained in their homes whenever possible and appropriate.*

Performance Data Highlights

The New York State Office of Children and Family Services (OCFS) is committed to ensuring children and youth are, first and foremost, protected from abuse and neglect, and are safely maintained in their own home, with relationships to family, community, and culture preserved. New York's statutes, policies, practice model, practice manuals, and commitment to a continuous quality improvement (CQI) approach all support this safety outcome.

New York has been lower than the national rate on both federal safety indicators. Since CFSR Round 3, OCFS has made concerted efforts to employ a data driven approach to understanding and addressing performance in the following ways:

- Focus on quality data collection.
- Data driven, strategic planning to improve performance through the local county planning process.
- State assessment and redesign of mandated reporter training, to better align child protective resources with supporting families and ensuring child safety.
- Implementation of PQI Reviews

Although New York has observed improvement on the Safety Indicators since Round 3, performance remains below the national average, and **Safety Outcome 1** is identified as an **area needing improvement**. While there has been an improvement in performance on **Safety Outcome 2**, it remains an **area needing improvement** as performance on the federal CFSR on-site review instrument (OSRI) Items 2 and 3 are not 95%.

Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect

Reports of suspected child abuse and/or maltreatment are registered with the New York Statewide Central Register of Abuse and Maltreatment (SCR) which operates 24-hours a day, seven days a week. Upon receipt and acceptance of a report, the SCR transmits the report to the LDSS with jurisdiction and responsibility to initiate the investigation. State statute requires that CPS initiate an investigation or Family Assessment Response (FAR) within 24 hours of the receipt of the report. CPS must conduct a face-to face contact or telephone contact with the subject and/or other persons named in a report who may be able to provide information about whether the child may be in immediate danger of serious harm.

OCFS monitors the timeliness of the initiation of the CPS investigation during PQI reviews using OSRI Item 1 and CIT Item 4.

CIT Item 4 – The OCFS developed, CPS Investigation Tool (CIT) is used to assess LDSS CPS practice by evaluating documented casework activities in a closed CPS investigation. Item 4 in the tool assesses not only the timeliness of the initiation of the investigation within 24 hours, but also the adequate assessment of safety of the children named in the report within 24 hours.

CIT Item	Item Description	PQI Review 2020	PQI Review 2021	PQI Review 2022	PQI Review 2023
Item 4	Adequate assessment of immediate or impending danger to ALL children named in the report within 24 hours?	79% 214/272	78% 226/228	82% 214/262	90% 154/172

OCFS addresses performance improvement both at the local and state levels. During the 2020-2023 PQI reviews, 11 of 58 districts (19%) demonstrated less than 75% proficiency and were required to complete a local Program Improvement Plan (PIP) for this item. Those plans continue to be monitored by OCFS and are closed when LDSS performance is demonstrated to be 75% or higher either in subsequent reviews or other measurement activities.

Statewide, performance on this measure has improved each year, even though different LDSSs were reviewed each year. One factor that may be contributing to this trend is the participation of OCFS staff in quarterly PQI executive team meetings. PQI performance from the previous quarter is reviewed and performance expectations are reinforced. This process has improved the data related technical assistance provided to districts.

OSRI Item 1 – Foster care and Preventive/Protective services cases are reviewed using the federal OSRI tool. Item 1 assesses initiation of the CPS investigation within 24 hours of the report.

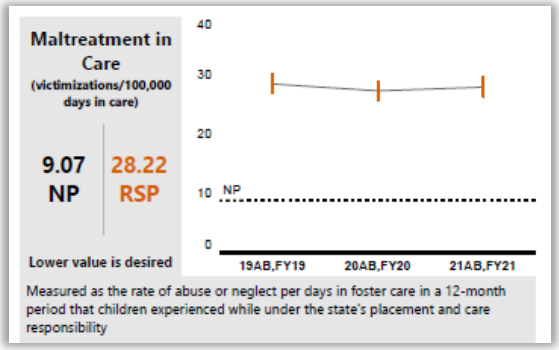
Statewide, performance on this measure is a strength, with all PQI reviews in 2023 demonstrating an initiation of a CPS investigation that meets the New York regulatory requirement.

OSRI Item	Item Description	CFSR R3 2016	PQI Review 2023
Item 1	Timeliness of Initiating Investigations	100% 28/28	100% 64/64

OCFS monitors Safety Outcome performance by using the Maltreatment in Care and the Recurrence of Maltreatment Indicators produced by the Children's Bureau.

S1 – Maltreatment in Care

The numerator is the number of victimizations in foster care in a 12-month period that children experienced while under the state's placement and care responsibility. The denominator is the number of days spent in care among children in the same 12-month period.



NY is currently below the national performance on the Maltreatment in Care Indicator. The Round 3 PIP included a focus on improved data quality and reporting as a way to improve this performance. LDSSs were provided child level files with the names and demographic information of the children represented in their performance to examine of the quality of the data and their practice. Themes that emerged from this analysis included:

- Accurate documentation of the incident date of the maltreatment, rather than the date of the report of the maltreatment is critical.
- Timely and appropriate data entry of discharge following a trial discharge is not consistent.

Though overall performance has shown little change over the last three reporting periods, when looking at the data by race/ethnicity, there is great variation in the trends of the rates during this period. This is continuing to be an area for deeper exploration.

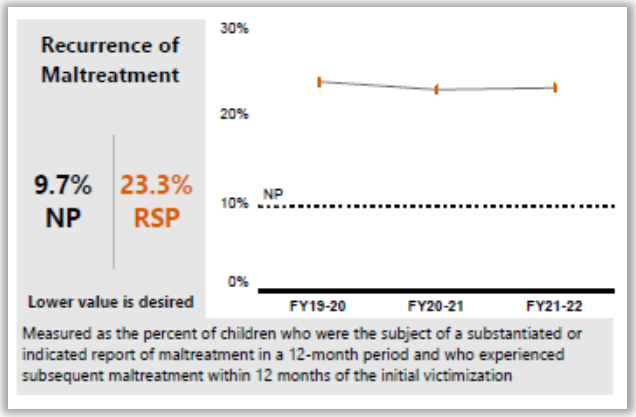
- Black/African American and Hispanic children had a decline and then increase during this period.
- Rates for American Indian/Alaska Native and Asian children have decreased significantly.

Maltreatment in Care, Children's Bureau February 2024 Release

Race/Ethnicity	19AB,FY19	20AB,FY20	21AB,FY21
American Indian/Alaska Native	23.81	12.84	0.00
Asian	22.78	23.44	10.93
Black or African American	24.08	23.29	23.38
Hispanic (of any race)	23.44	18.97	23.44
Native Hawaiian/Other Pacific Islander	0.00	0.00	0.00
White	15.36	21.13	16.79
Two or More	27.98	15.10	22.20
Unknown/Unable to Determine	0.00	9.53	16.59
Missing Race/Ethnicity Data	0.00	0.00	0.00

S2 – Recurrence of Maltreatment

The numerator is the number of children who were the subject of a substantiated or indicated report of maltreatment in a 12-month period and who experienced subsequent maltreatment within 12-months of the initial victimization. The denominator is the number of children who were the subject of a substantiated or indicated report of maltreatment in a 12-month period.



NY is currently below the national performance on the Recurrence of Maltreatment Indicator with little to no improvement over the last three reporting periods, despite a significant focus on understanding and improving performance during the Round 3 PIP. One PIP strategy was to support LDSS with a data driven CQI process to use in the development and monitoring of their local county planning process.

During the 2018-2023 LDSS county planning process, OCFS provided child level files and data analysis support to districts for an examination of local recurrence data to identify underlying factors impacting performance in their districts and develop and implement local strategies to improve performance. Strategies were implemented and effectiveness was monitored; however, very little change was observed in local performance.

Statewide there is great variation in performance on this indicator. There are no identifiable patterns based on geographic locations, population size, allegations, risk factors, or other variables. Below is a representative example of the variation over time observed in a sample of districts.

Recurrence of Maltreatment

LDSS	Size	FY 19-20	FY 20-21	FY 21-22
Allegany County	Small	22.1%	20.1%	15.0%
Fulton County	Medium	19.4%	17.8%	23.4%
Orange County	Large	20.7%	22.3%	22.5%
New York City	Extra Large	15.6%	15.9%	15.8%

Though statewide performance is improving, New York is not in substantial conformity with either of these Safety Indicators, despite diligent efforts at the state and local level to understand and address performance.

There are a couple of significant changes in CPS that will positively impact these indicators in the future.

- In 2022, the level of evidence required to indicate an allegation of abuse or maltreatment was raised from some credible evidence to a fair preponderance of the evidence. The indication rate in NYS changed from 28% of all reports indicated in 2021 to 24% indicated in 2022. The impact of this change in the law will not be seen in the CFSR measure until FY 22-23.

- In 2023 NYS launched a new mandated reporter training statewide and all mandated must complete this training by April 1, 2025. A key focus of the new training is an implicit bias component to prevent calls to the SCR based on race and poverty. In addition to implicit bias training, updates also include material to explain the impact of adverse childhood experiences (ACEs) on children and families to prevent inflicting additional trauma by unnecessarily subjecting a family to a child protective services investigation. The overarching theme to the new mandated reporter training revolves around the idea that 'you can support a family without having to report a family.' Referrals to vital necessities like food, health care and housing can make all the difference when a family simply needs to be supported rather than reported. The impact of this philosophical change potentially will not be seen in this metric for many years.

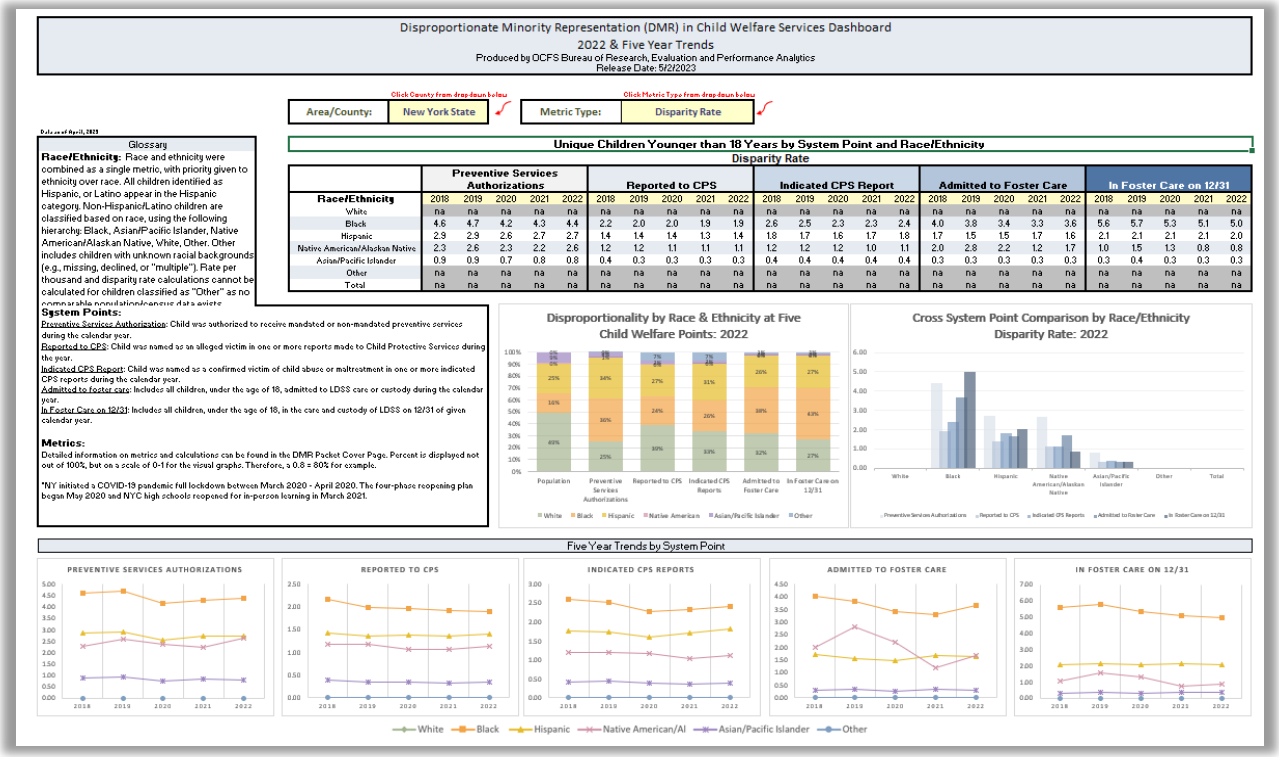
Safety Outcome 2: Children are safely maintained in their own homes whenever possible and appropriate.

The child welfare landscape in New York has changed significantly since the 2020 COVID-19 pandemic, and the true impact is only beginning to be understood. Since 2019:

- Reports to CPS have decreased 9%.
- Foster care admissions have decreased 26%.
- Families served with preventive services decreased 23%.

NYS	2019	2020	2021	2022	% Change 2019-2022
Admissions to Foster Care	8389	8129	6233	6200	-26%
Families Served with Prevention Services	47,022	40,009	37,516	35,972	-23%
Reports to CPS	162,115	134,392	145,680	148,087	-9%

The change in child welfare population is not the same across all race/ethnic groups, nor is this change consistent across LDSSs. OCFS produces an annual dashboard that identifies by LDSS, the numbers, percent, disparity, and disproportionality rates of children by race/ethnicity for five child welfare points: CPS reports, CPS indications, preventive services authorizations, admission to foster care, and in care populations. Below is a snapshot of this interactive report which is available on the OCFS website.



Monitoring the quality of services to families during this time of transition is imperative to understanding how well our system is working to keep children safe. OCFS monitors if children are maintained safely in their own homes whenever possible and appropriate during PQI reviews within two items: OSRI Item 2 and 3.

OSRI Item 2 – Assesses services to family to protect child(ren) in the home and prevent removal or re-entry into foster care. Additionally, if a child was removed from the home without providing service, an assessment is made whether the action was necessary to ensure the child's safety.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 2	Services to family to protect child(ren) in the home	96% 22/23	88% 51/58

Every case reviewed using the OSRI instrument is not applicable for every item in the instrument. Item 2 is one where often there are few applicable cases during an individual LDSS PQI review as the total sample of cases selected is between five and 10 depending on the size of the child welfare population in the LDSS. As a result, one or two cases scoring as an area needing improvement can result in a LDSS receiving a local Program Improvement Plan (PIP) for item 2. During the 2020-2023 PQI cycle, 14 of 58 districts (24%) demonstrated less than 75% proficiency and were required to complete a local PIP for this item. Those plans continue to be monitored by OCFS and are closed when LDSS performance is demonstrated to be 75% or higher on a subsequent review or another predetermined measurement plan.

OSRI Item 3 – Examines the concerted efforts of the LDSS to assess and address risk and safety concerns relating to the children in their own home or while in foster care.

OSRI Item	Item Description	CFSR R3 (2016)	PIP Baseline (PUR Start Date 2016-2017)	PIP Follow Up (PUR Start Date 2018)	PQI Review 2023
Item 3	Risk and Safety Assessment and Management -	73% 47/64	73% 127/175	83% 148/179	89% 184/207
Item 3	In Home Foster Care	58% 14/24 83% 33/40			84% 78/93 93% 106/114

Statewide, performance on item 3 has increased most significantly with children receiving in home services, though overall performance has been lower than in foster care cases. One common theme is the lack of documented ongoing assessments of children in the home that are not directly receiving supports. The addition of interviews with case participants in 2023 has provided a more complete picture of assessments and contributed to overall higher performance on this item.

Though performance is improving, New York is not in substantial conformity with item 2 or item 3 as performance is not at the 95% standard.

Activities since Round 3 will impact these items in the future.

- Expansion of the availability of voluntary prevention services:
    - Healthy Families New York (HFNY), a voluntary program grounded in evidence-based practices, was expanded in two ways. The first expansion involved funding at least one HFNY program in every county/borough of NYS. Additionally, OCFS has allowed and encouraged programs to use Child Welfare Protocols (CWP). This allows families referred by LDSS to enroll children up to 2 years old, instead of the signature enrollment limit of 3 months old. OCFS plans to expand CWP to all HFNY programs in the next three years.
    - NYS launched Family Opportunity Centers (FOCs). These centers are an enhancement of the successful Family Resource Center (FRC) model, which has been funded by OCFS for many years. Enhancements include strong connections to school districts and helping families overcome barriers to mental health and/or substance use disorder services.
- Safe and Together Model – NYS began funding the training and implementation of this family violence prevention in 2020. OCFS also embedded material from the Safe and Together Model in Foundations training for caseworkers.
- Since 2016, NYC regional office has completed safety reviews of both open and closed CPS investigations with CPS staff from New York City. In 2022 alone, staff reviewed over 500 cases with a focus on appropriate and timely safety assessments. Improvement has been noted in the areas focused on during these reviews.

Permanency Outcomes 1 and 2

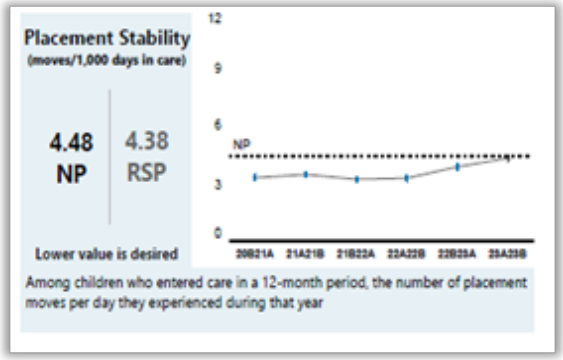
Permanency outcomes include: ***(A)*** *children have permanency and stability in their living situations: and* ***(B)*** *the continuity of family relationships is preserved for children.*

Performance Data Highlights

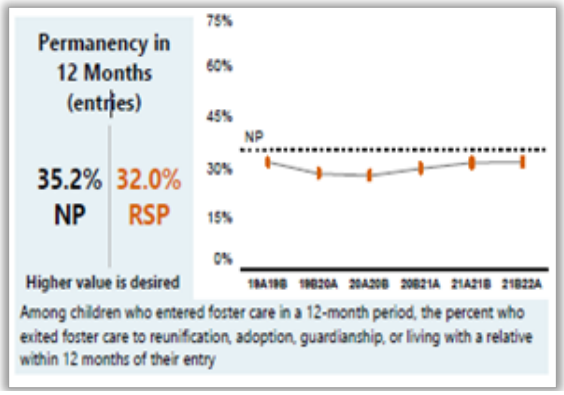
The New York State Office of Children and Family Services (OCFS) is committed to ensuring that when it is necessary to place children in out-of-home care, it is a safe, short, and stable experience concluding with permanent attachments to caring adults. New York's statutes, policies, practice model, practice manuals, and commitment to a CQI approach all support this permanency outcome.

Permanency Outcome 1: Children have permanency and stability in their living situations

The CFSR Round 4 Data Profile dated February 2024 shows New York successfully met two of the five permanency indicators.



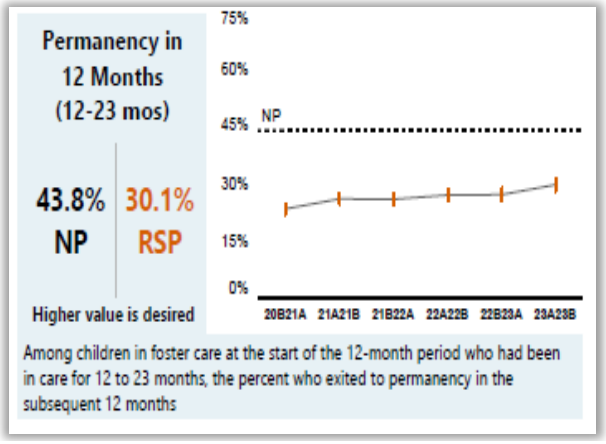
Placement Stability – New York consistently performs better than the national performance on the Placement Stability Indicator. However, there is concern, as performance on this indicator has declined in the past three reporting periods. According to the New York's Round 4 Data Profile dated February 2024, the Risk Standardized Performance (RSP) is 4.38 placement moves per 1,000 placement days, which is slightly better than the national performance of 4.48. In a review of New York's content data, children ages 6-10 years old experience highest rate of moves per 1,000 days (5.14). This group makes up 19.6% of the total days in foster care and 21.8% of the total moves.



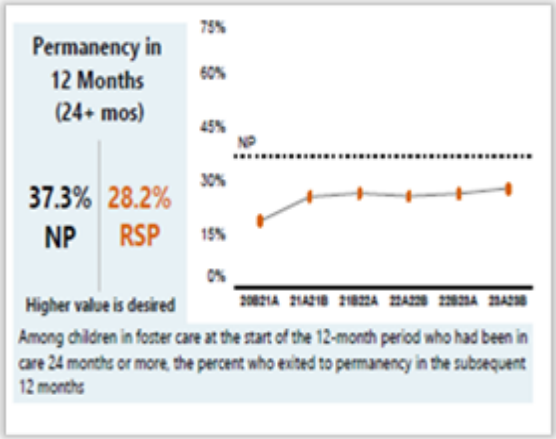
Permanency in 12 months (entries) – New York continues to perform below the national performance on the Permanency in 12 months Indicator, though improvement has occurred over the last three reporting periods. According to the New York's Round 4 Data Profile dated February 2024, the Standardized Performance (RSP) is 32% of children that entered care were discharged to permanency within 12 months, which is below the national performance of 35.2%. In a review of New York's content data, children age 17 years have the lowest permanency rate of 9.4%, though they also make up the smallest percent of all entries. Children age 1-5 years make up a high percentage of entries (26.6%)

and have the second highest permanency rate within 12 months (34.2%). Children identified as American Indian/Alaskan Native had a permanency rate of 54.5%, the highest of all racial/ethnic groups.

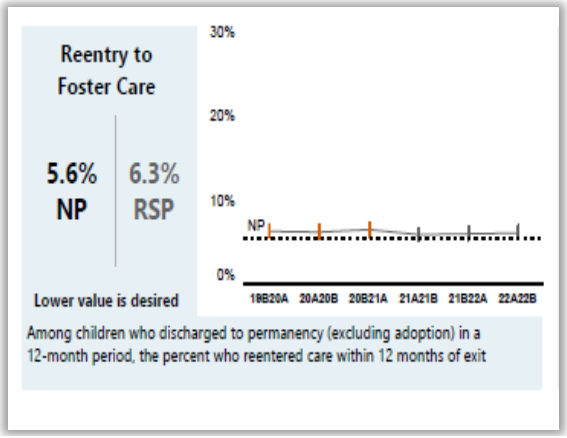
Permanency in 12 months (12-23) – New York continues to perform below the national performance on the Permanency in 12-23 months Indicator. According to New York's Round 4 Data Profile dated February 2024, the Risk Standardized Performance (RSP) is 30.1% of children who were in care for 12-23 months were discharged to permanency within 12 months, which is below the national performance of 43.8%. This indicator has consistently been the most challenging for New York to meet, but progress has been noted. In a review of New York's content data, there is variation by age, with children 1-5 years at 34.3% and children aged 17 only at 11%. Children identified as Black or African American had the lowest permanency rate, 24.7%, followed by those identified as Hispanic, 25.9%. Deeper exploration into the child welfare and court practices for children in care 12-23 months is necessary to understand and address the underlying factors impacting this indicator.



Permanency in 12 months (24+) – New York continues to perform below the national performance on the Permanency in 24+ months Indicator. According to New York's Round 4 Data Profile dated February 2024, the Risk Standardized Performance (RSP) is 28.2% of children who were in care 24+ months were discharged to permanency within 12 months, which is below the national performance of 37.3%. In a review of New York's content data, children aged 17 had the lowest permanency rate, 9.1%. Children identified as Asian and Black have a significantly lower permanency rate than any other group in this indicator at 25.4% and 25.6% respectively.



Reentry to Foster Care – New York's performance on the reentry to foster care indicator is improving and is close to the national performance. According to New York's Round 4 Data Profile dated February 2024, the Risk Standardized Performance (RSP) is 6.3% of children who were discharged from foster care reentered within 12 months. In a review of New York's content data, children under one reentered at the highest rate, 11.2%. Children identified as Black or African American make up the largest percent of discharges, (36.9%) and reentries (41.2%) respectively.



Permanency Outcome 1 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for 20% (8/40) of the cases reviewed. In PQI reviews conducted in 2023 which utilized the Round 4 OSRI, Permanency Outcome 1 has been substantially achieved in 43% (49/113) of cases.

OCFS monitors permanency and stability in foster care during PQI reviews with Onsite Review Instrument (OSRI) Items 4, 5, and 6.

- *Performance in all three outcomes have improved since CSFR R3, though none meet the 90% standard to be considered a strength.*
- *Most significant progress has been made in establishing permanency goals for children.*

OSRI Item 4 – Assesses the stability of the child's placement and evaluates the reasons for any moves the child may have experienced.

OSRI Item	Item Description	CFSR R3 (2016)	PIP Baseline (PUR Start Date 2016-2017)	PIP Follow Up (PUR Start Date 2018)	PQI Review 2023 (PUR Start Date 2022)
Item 4	Stability of Foster Care Placement	75% 30/40	71% 85/120	86% 106/123	87% 98/113

Item 4 was rated as an area needing improvement in Round 3. New York was able to reach the PIP monitoring goal established for Round 3 and has continued to monitor this item. During the 2023 PQI reviews, 87% (98/113) of cases were rated as a strength. Of the fifteen cases rated as area needing improvement, eleven were due to movements of the child during the period under review:

- Five were moves from non-relative homes at the request of the foster parents.
- Four were moves from relative homes at the request of the foster parents and the subsequent move was to a non-relative foster home.
- Two were moves from congregate care settings due to safety concerns with the child.
- All moves were due to the current placement's inability to meet the child's behavioral needs, with the majority citing unmet mental health needs or runaway behaviors.

Focus groups held with VA and LDSS representatives revealed a couple of hypotheses about stability in foster care that warrant additional investigation.

- One is that with the increase in the use of kinship placements comes an increase in moves. Many report children may move between relatives more often compared to how frequently children may disrupt a placement in a non-relative foster home. It was stated that non-relative foster parents are more often better prepared to foster a child than a relative, and though a relative may have good intentions, the placement disrupt more easily, and a new relative is located.
- Another hypothesis is that a child may come into foster care in a non-relative foster home due to safety concerns and later moved to a relative foster home once one is located. Some LDSS report this happens often, while others report that, if possible, they try to wait until a relative is located to place the child in foster care.

OSRI Item 5 – Assesses that appropriate permanency goals are established in a timely manner for children.

OSRI Item	Item Description	CFSR R3 (2016)	PIP Baseline (PUR Start Date 2016-2017)	PIP Follow Up (PUR Start Date 2018)	PQI Review 2023 (PUR Start Date 2022)
Item 5	Permanency goal for Children	28% 11/39	48% 58/120	55% 68/123	72% 81/113

Item 5 was rated as an area needing improvement in Round 3. New York was able to reach the PIP monitoring goal established for Round 3 and has continued to monitor this item. During the 2023 PQI reviews, 72% (81/113) of cases were rated as a strength.

- 100% of the children had a permanency goal and 89% of these goals were appropriate.
- 83% (94/113) had the permanency goal established timely, and of those not established in a timely manner, the untimely filing of the TRP was the reason in 26% (5/19).
- Of the 74 children who were in care for 15 of 22 months, 78% (58/74) had a TPR filed in a timely manner or there was an exception.

Focus groups held with VA and LDSS representatives indicated a significant variation in practice among judges in different counties across the state. Practice ranges from changing a permanency goal to adoption while a TPR is in process, to others that will not change a permanency goal until a child is freed for adoption. As court processes tend to take a significant amount of time, this variation can result in permanency goals that meet the needs of the child to not being established timely.

OSRI Item 6 – Assesses whether concerted efforts were made, or are being made, to achieve reunification, guardianship, adoption or another planned permanent living arrangement (APPLA).

OSRI Item	Item Description	CFSR R3 (2016)	PIP Baseline (PUR Start Date 2016-2017)	PIP Follow Up (PUR Start Date 2018)	PQI Review 2023 (PUR Start Date 2022)
Item 6	Achieving Permanency goal	33% 13/40	39% 47/120	53% 65/123	57% 64/113

Item 6 was rated as an area needing improvement in Round 3. New York was able to reach the PIP monitoring goal established for Round 3 and has continued to monitor this item. During the 2023 PQI reviews, 57% (64/113) of cases were rated as a strength. Of the forty-nine cases rated as area needing improvement, 57% (28/49) had the permanency goal of adoption.

- 56% of cases of children with guardianship goal were a strength (5/9)
- 64% of cases of children with reunification goal were a strength (39/61)
- 100% of cases of children with a goal of APPLA were a strength (9/9)

Focus groups held with VA and LDSS representatives indicated an increase in delays with court processes that began with the COVID-19 pandemic due to court closures but have continued into 2024. Stakeholders discussed the automatic appeals filed by lawyers for the parents, even when the judgement is for abandonment and the parent cannot be located. Additionally, most agreed that unless the parent agrees to a termination of parental rights, it may be years before there is a court decision on termination of rights due to a neglect petition. The focus group indicated these that delays in court decisions have increased and result in children and foster

parents being in flux for long periods of time before permanency can be achieved. The negative impacts on the child's mental health and foster parents' willingness to foster a child in the future were noted.
Since CFSR Round 3, OCFS and the Office of Court Administration have engaged in efforts to increase collaboration to support timely achievement of permanency for children. Below are some of those efforts:

- Alignment leadership meetings with the commissioner of OCFS and other OCFS leadership, the Deputy Chief Administrative Judge for Courts Outside New York City, and the Deputy Chief Administrative Judge Office for Justice Initiatives began in 2017 and extended into 2022. The meetings included standing data discussions, including creating a workgroup tasked with brainstorming a direct and useful way to get data into the hands of individual judges to assist in informed decision making. Over the years the meetings covered topics such as OCFS' LEAN project, reinforcement of kinship placements and efforts, shortening the length of stay in foster care, scaling the Child Welfare Court Improvement Project (CWCIP) statewide, re-entry into foster care, and efforts to resolve court backlogs. There were discussions about OCFS' regulatory change which expanded the definition of kin for approved foster boarding homes. This aligned with adjustments to section 1028 of the New York Family Court Act to expand the definition of kin to certain other non "relatives."

- New York State's strategic plan from 2016-2021 had many priority areas including LEAN and enhancing the quality of permanency hearings in New York State. The activities included:

    - Developing a guiding questions document to better prepare attorneys for proceedings. This document aims to ensure attorneys have meaningful conversations with their clients in advance, so that parents and children will be engaged in the process and motivated to change.
    - Improving the content and timeliness of reports provided by child welfare staff to courts. These reports offer in depth information concerning the progress of the child and family in advance of the permanency hearing so that conversations are thorough, efficient, and represent the most current information.
    - Encouraging judges to actively engage with and question the parties before them, including youth, on key topics. This approach ensures that decisions are made that promote the advancement of timely and appropriate permanency for all children and youth in out-of-home care, which includes increasing the proportion of children who reach permanency by 12 and 24 months.
    - Reducing the number and percent of youth who are assigned an APPLA goal and increasing the number and percent of youth who exit out of home care by achieving legal permanency were other priorities for the state.

    - New York's Strategic Plan for CWCIP, which covers years 2021-2026, prioritizes quality legal representation as a strategy to improve the number of children who

remain in their home and with their parents or reunified with their parents. Data supports that parents not represented by counsel are more likely to have their child removed at an initial appearance.

Permanency Outcome 2: The Continuity of Family Relationships and Connections is preserved for Children

Permanency Outcome 2 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for 63% (25/40) of the cases reviewed. In PQI reviews conducted in 2023, Permanency Outcome 2 has been substantially achieved in 93% (105/113) of cases.

OCFS monitors the continuity of family relationships and connections of children in foster care during PQI reviews using OSRI Items 7, 8, 9, 10, and 11.

- *Based on internal QA reviews, all five items have improved since CSFR R3, and three meet the 95% standard to be a strength.*
- *The most significant progress has been made in item 9, preserving connections.*

OSRI Item 7 – Assesses the concerted efforts to ensure siblings are placed together when appropriate.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 7	Placement with Siblings	83% 19/23	85% 46/54

Item 7 was rated as an area needing improvement in Round 3. During the 2023 PQI reviews, 85% (46/54) of cases were rated as a strength. Of the eight cases rated as area needing improvement, the barrier in the majority of cases was the agencies inability to locate a foster home to accommodate large sibling groups. Some of the children were place together, but not all of them. In other cases, the barrier was inability to locate a home to support the special needs of all the siblings, resulting in the separation.

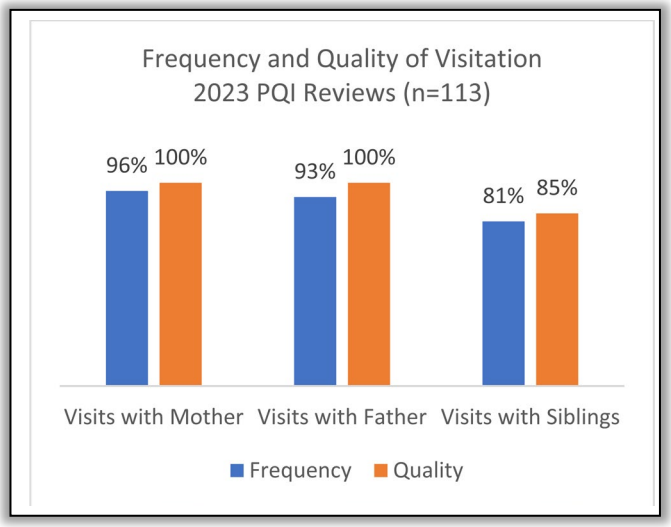
OSRI Item 8 – Assesses the concerted efforts to ensure that visitation between a child in foster care and their mother, father and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 8	Visiting with Parents and Siblings in Foster Care	73% 22/30	89% 73/82
Item 8	Visitation with Siblings	86% (12/14)	77% (20/26)
Item 8	Visitation with Mothers	78% (18/23)	96% (69/72)
Item 8	Visitation with Fathers	53% (8/15)	93% (39/42)

Item 8 was rated as an area needing improvement in Round 3. During the 2023 PQI reviews, 89% (73/82) of cases were rated as a strength. As noted in the chart below, the frequency of visitation between child and his/her mother was sufficient in 96% (69/72) of cases and the quality of visitation was sufficient in 100% (68/68) cases. Visitation between child and father was

of sufficient frequency in 93% (39/42) of cases and sufficient quality in 100% (35/35) cases. Visitation with siblings was met with the lowest frequency (81%, 21/26) and quality (85%, 22/26).

Numerous strengths were noted in providing opportunities for visitation including providing transportation and/or gas cards, facilitating visits in person and virtual visits with incarcerated parents, and coordinating visits with foster parents and parents. Of the eight cases rated as area needing improvement, barriers to sibling visitation included facilitating visits outside parental visitation, location of siblings in different institutions, and in one case a sibling was placed outside NYS.



OSRI Item 9 – Assesses concerted efforts that were made to maintain the child's connections to their neighborhood, community, faith, extended family, kin, Tribe, school, and friends.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 9	Preserving Connections	38% 15/39	93% 104/112

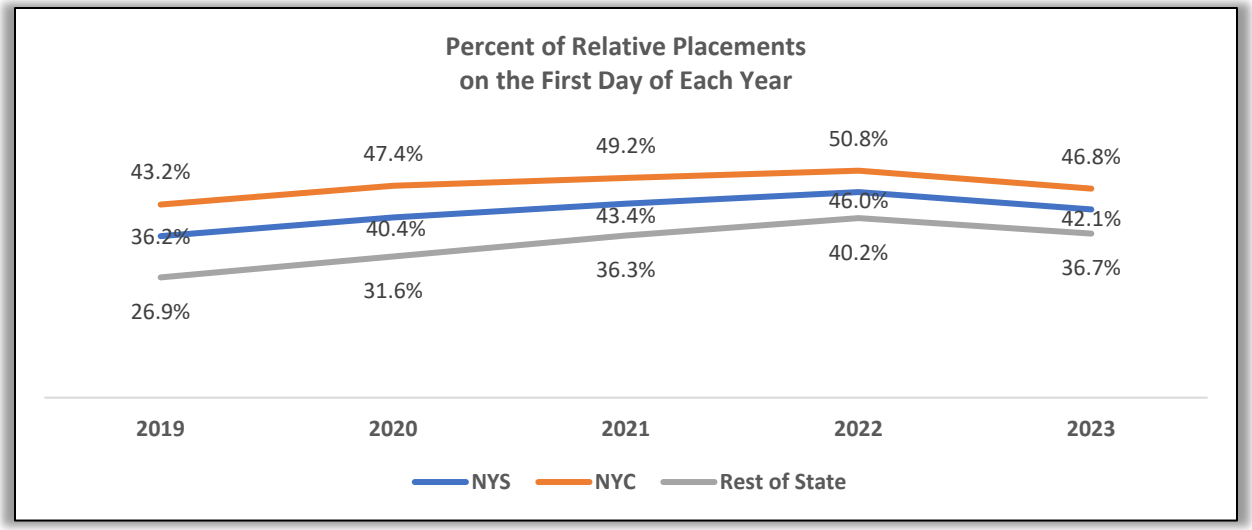
Item 9 was rated as an area needing improvement in Round 3. During the 2023 PQI reviews, 93% (104/112) of cases were rated as a strength. Of the eight cases rated as an area needing improvement, barriers to maintaining connections included lack of contact and visitation with close extended family members, and lack of exploring connections of the child in foster care.

OSRI Item 10 – Assesses whether concerted efforts were made to place the child with relatives when appropriate.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 10	Relative Placement	50% 18/36	98% 94/96

Item 10 was rated as an area needing improvement in Round 3. During the 2023 PQI reviews, 98% (94/96) of cases were rated as a strength. Twenty-eight of the children (29%) were living in a stable placement with a relative and in all except one the remaining sixty-seven cases, efforts were made to locate, inform and or evaluate relatives as placement.

These findings demonstrate the effectiveness of statewide efforts to promote family placements whenever possible. The percentage of children placed with relatives has increased since 2019. Although the increase is more pronounced in New York City compared to the rest of the state, the overall trend is the same.



OSRI Item 11 – Assesses whether concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and mother and father or other caregivers.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 11	Relationship of child in care with parents	62% 16/26	86% 69/80

Item 11 was rated as an area needing improvement in Round 3. During the 2023 PQI reviews, 86% (69/80) of cases were rated as a strength. Concerted efforts with mothers was a strength in 67 of the 74 applicable cases (91%) and with fathers in 37 of 43 cases (86%). Numerous strengths were noted including providing encouragement, transportation, and gas cards to parents to support participation in school and medical appointments, involvement in holiday celebration with foster parents, and support with attending family therapy. Barriers to involvement included incarceration of a parent and not involving parents in all medical appointments.

Since CFSR Round 3, OCFS and the Office of Court Administration have engaged in efforts to increase the continuity of family relationships, which contributed to the improvements in items 7-11 as shown above. Below are some of those efforts:

- Research indicates that the relationship between birth parents and foster parents significantly influences success of permanency planning and the well–being of the child. The Shared Parenting/MAPP training equips foster parents with essential skills for working effectively with birth parents in support of child safety, permanency, and well–being. This program was developed by the Statewide Multidisciplinary Child Welfare Work Group in 2015 and is documented in the 2016 APSR.

- During a meeting between OCFS and OCA leadership, OCFS presented the new Family Visiting Policy for Children in Foster Care (17-OCFS-ADM-14). To guide decision-making about parenting time and family visiting, each LDSS and VA is required to have a written policy that is consistent with the principles expressed in this ADM. This policy

must be made available to parents, other caretakers, foster parents, attorneys for children, and attorneys for parents when a child is placed in foster care. The ADM requires LDSSs and VAs to facilitate contact by providing transportation or financial assistance, to follow up when visits do not occur, and arranging visits in a private, safe, and comfortable location for the child and their family, when safe and appropriate.

- New York State fully implemented the Family First Prevention Services Act (FFPSA) on September 29, 2021. The FFPSA reforms federal financing to prioritize family-based foster care, preferably with kin, over residential care by limiting federal reimbursement for certain residential placements. In August of 2022, OCFS successfully implemented provisions of FFPSA with the goal to significantly transform the foster care system by supporting interventions that promote foster placement with family or close friends (kin) rather than in group homes or institutions. The plan's success, as shown in the Percent of Relative Placements graph above, demonstrates the exceptional work being done by the state, LDSSs, and providers to keep children with kin and in family-based settings, and keep family members connected under this far-reaching federal law.

- In 2021, New York State expanded its Putative Father Registry and Acknowledgment of Parentage Registry to include information on parentage of a child born out of wedlock. The acknowledgment of parentage form (LDSS-5171) explains the rights to birth parents and legal duty to support the child. Fathers or parents listed on the registry have the right to receive legal notice of court proceedings involving the child, which include foster care, guardianship, custody, and, in some circumstances, adoption of the child. The courts, LDSSs, and VAs in New York State use the Putative Father Registry to search for the name and address of fathers or parents of a child born out of wedlock in order to notify parents of court proceedings impacting the custody of the child and to identify persons whose consent is required for the adoption of a child in foster care.

Well-Being Outcomes 1, 2 and 3

Well-being outcomes include: (A) families have enhanced capacity to provide for their children's needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs.

Performance Data Highlights

The New York State is committed to ensuring families have enhanced capacity to provide for their children's needs and New York's statutes, policies, practice model, practice manuals, and commitment to a CQI approach all support this well-being outcome.

Well-Being Outcome 1: Families Have Enhanced Capacity to Provide for their Children's Needs

Well-Being Outcome 1 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for 39% (25/64) of the cases reviewed. In PQI reviews

conducted in 2023, Well-Being Outcome 1 has been substantially achieved in 83% (170/205) of cases.

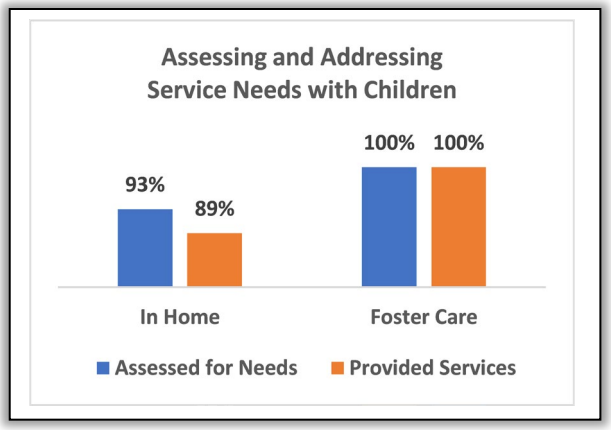
OCFS monitors concerted efforts to assess the needs of children, parents, and foster parents, and to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family and provide the appropriate services during PQI reviews using OSRI Items 12, 13, 14, and 15.

- *Improvements in all four items have been made since CSFR R3, and Item 12A is now a strength for NY.*
- *The most significant progress has been made in involving children and families in case planning and caseworker visits with parents.*

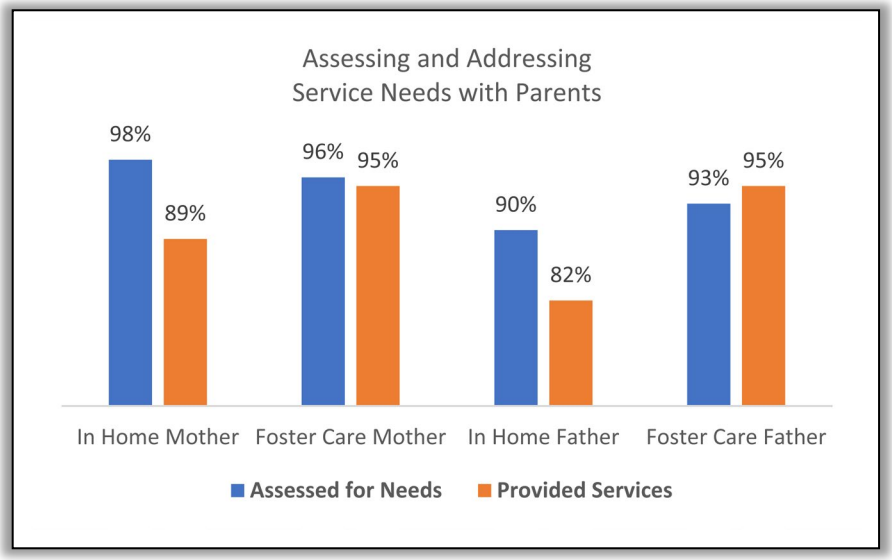
OSRI Item 12 – Assesses concerted efforts made to assess the needs of children, parents, and foster parents to identify service and provide appropriate services.

OSRI Item	Item Description	CFSR R3 (2016)	PIP Baseline (PUR Start Date 2016-2017)	PIP Follow Up (PUR Start Date 2018)	PQI Review 2023
Item 12	Needs and Services of Child, Parents, and Foster Parents	39% 25/64	52% 91/175	56% 101/179	84% 173/206
Item 12	In-Home Cases	29% (7/24)	N/A	N/A	80% (74/93)
Item 12	Foster Care Cases	45% (18/40)	N/A	N/A	88% (99/113)
Item 12A	Needs Assessment & Services to Children	70% (45/64)	80% 140/175	84% 151/179	97% (201/207)
Item 12A	In-Home Cases	46% (11/24)	N/A	N/A	94% (87/93)
Item 12A	Foster Care Cases	85% (34/40)	N/A	N/A	100% (114/114)
Item 12B	Needs Assessment & Services to Parents	40% 21/52	86% 150/175	62% 96/155	87% (153/175)
Item 12B	Mother	66% (31/47)	N/A	N/A	92% (152/165)
Item 12B	Father	34% (14/41)	N/A	N/A	88% (104/118)
Item 12C	Needs Assessment & Services to Foster Parents	77% (23/30)	81% 75/93	79% 82/104	91% (85/93)

Item 12A was rated as an area needing improvement during CFSR Round 3. During the 2023 PQI reviews, 97% (201/207) of cases were rated as a strength. Concerted efforts to assess and address service needs with children were a strength in foster care cases (100%).



Item 12B was rated as an area needing improvement in Round 3. During the 2023 PQI reviews, 87% (153/175) of cases were rated as a strength. Concerted efforts with mothers were a strength in 152 of the 165 applicable cases (92%) and with fathers in 104 of 118 cases (88%). Assessing the service needs of mothers in preventive/protective services cases is the strongest area, while addressing service needs of fathers in these cases is the area of most need.



Item 12C was rated as an area needing improvement during CFSR Round 3. During the 2023 PQI reviews, 91% (85/93) of cases were rated as a strength. In some instances, the service needs of foster parents were not met, such as the need for respite services, transportation, and assistance with supervised visitation with parents. Overall, it is important to note that most foster parents received the supports they needed.

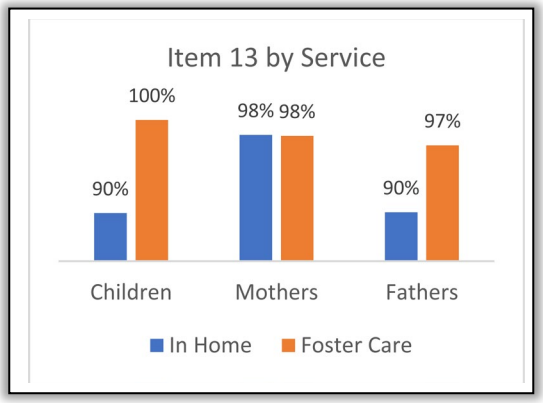
The ACS Family Experience Survey presented the extent to which families reported their satisfaction with services received. For example, 93% (2,686) of participants agree services are helping them achieve their goals; 94% agree that they are happy with the prevention services their families received; 90% agree that they would recommend services to a friend and/or family member; and 91% agree that they would go to their prevention provider for help in the future.

OSRI Item 13 – Assesses concerted efforts made to include children and parents in case planning.

OSRI Item	Item Description	CFSR R3 (2016)	PIP Baseline (PUR Start Date 2016-2017)	PIP Follow Up (PUR Start Date 2018)	PQI Review 2023
Item 13	Child and Family Involvement in Case Planning	63% 40/64	62% 103/166	71% 120/168	94% 175/186

Item 13	Children	73% 36/49	N/A	N/A	96% 164/166
Item 13	Mother	83% 40/48	N/A	N/A	99% 164/166
Item 13	Father	50% 17/34	N/A	N/A	93% 110/118

Item 13 was rated as an area needing improvement during CFSR Round 3. However, in the 2023 PQI reviews, 94% (175/186) of cases were rated as a strength. The concerted efforts to include mothers in case planning was the strongest area, 99% (164/166). The area needing most improvement is the inclusion of fathers, at 93%. The chart at the right shows a breakdown of the involvement in case planning by preventive/protective services cases (in home) and foster care is shown. Based on this data, mothers are consistently engaged in case planning at a high rate, and though performance is at 90%, involving children and fathers in case planning is an area to be explored.



The ACS Family Experience Survey presented the extent to which families reported positive interactions with prevention case planners. Most families that participated in the survey reported that their case planner is available (97% or 2,687 participants); that they trust their case planner (97%); feel safe telling their case planner about their family (96%); feel listened to when setting goals for their family as part of their work with the case planner (96%); and feel their case planner respects their cultural practices (97%).

OSRI Item 14 – Assesses concerted efforts of caseworkers to meet with children at a frequency and quality to ensure their safety, permanency, and well-being, and promote achievement of case goals.

OSRI Item	Item Description	CFSR R3 (2016)	PIP Baseline (PUR Start Date 2016-2017)	PIP Follow Up (PUR Start Date 2018)	PQI Review 2023
Item 14	Caseworker Visits with Child	77% 49/64	81% 141/175	88% 157/179	92% 189/206
Item 14	In-Home Cases	58% (14/24)	N/A	N/A	85% (79/93)
Item 14	Foster Care Cases	88% (35/40)	N/A	N/A	97(110/113)

Item 14 was rated as an area needing improvement during CFSR Round 3. During the 2023 PQI reviews, 92% (189/206) of cases were rated as a strength. Caseworker visits with children in foster care were conducted at a higher frequency and quality than those in preventive/protective services cases. In cases rated as needing improvement, the most cited concerns were caseworkers not meeting on a regular basis with all children in the family and at times having multiple months pass without a casework visit.

OSRI Item 15 – Assesses concerted efforts of caseworkers to meet with parents at a frequency and quality to ensure their safety, permanency, and well-being, of children and promote achievement of case goals.

OSRI Item	Item Description	CFSR R3 (2016)	PIP Baseline (PUR Start Date 2016-2017)	PIP Follow Up (PUR Start Date 2018)	PQI Review 2023
Item 15	Caseworker Visits with Parents	56% 29/52	50% 74/147	63% 97/154	81% 140/172
Item 15	Mother	68% 32/47	N/A	N/A	88% 144/163
Item 15	Father	41% 14/34	N/A	N/A	80% 92/115

Item 15 was rated as an area needing improvement during CFSR Round 3. During the 2023 PQI reviews, 81% (140/172) of cases were rated as a strength. Caseworker visits with mothers were conducted at a higher frequency and quality than those with father. In cases rated as needing improvement, the most cited concerns were caseworkers not meeting with parents with the required frequency necessary and in some cases, the incarceration of a parent was a barrier to casework visits.

Since CFSR Round 3, significant improvement has been observed statewide, demonstrating concerted efforts to assess the needs of children, parents, and foster parents, and to identify the services necessary to achieve case goals. There has also been improvement in adequately address the issues relevant to the agency's involvement with the family and provide the appropriate services to meet family needs. The utilization of the ORSI instrument in quality assurance reviews has made a significant difference in the state's ability to communicate clear expectations to LDSSs for meeting child and family outcomes. Following each PQI review, LDSSs are provided with the completed ORSI instruments for each case reviewed to support program improvement efforts at the local level.

Well-Being Outcome 2: Children Receive Appropriate Services to Meet Their Educational Needs

Well-Being Outcome 2 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for 87% (45/52) of the cases reviewed. In reviews conducted in 2023, Well-Being Outcome 2 has been substantially achieved in 97% (149/153) of cases.

OCFS monitors that children receive the appropriate services to meet the educational needs of children during PQI reviews using OSRI Item 16.

- *NY identifies meeting the education needs of children as a strength*

OSRI Item 16 – Assesses concerted efforts of caseworkers to assess and address the educational needs of children.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 16	Educational Needs of the Child	87% 45/52	97% 149/153

Item 16 was rated as an area needing improvement during CFSR Round 3. During the 2023 PQI reviews, 97% (149/153) of cases were rated as a strength. In most cases, caseworkers demonstrated concerted efforts to meet the educational needs of children by communicating with schools, monitoring attendance, supporting the family with advocacy for supports in school, and assisting older children with enrolling in GED classes.

The ACS Youth Experience Survey asked youth what their educational needs were and if they were met. Pages 24-27 of the report details the responses which were overwhelmingly positive. Some examples include:

- Youth in grades 9 and up – Help applying for school: 90% of the 545 youth who needed this education service reported that they received it, while 10% did not.
- Youth in grades 5-8 – Tutoring: 90% of the 111 youth who needed tutoring services received it, while 10% did not.
- 90% of youth identify reaching their educational goals as a need they have from foster care agencies and of these, 93% report support is received from the foster care agency.

Well-Being Outcome 3: Children Receive Adequate Services to Meet Their Physical and Mental Needs

Well-Being Outcome 3 was not in substantial conformity during CFSR Round 3, as the outcome was found to be substantially achieved for 66% (39/59) of the cases reviewed. In reviews conducted in 2023, Well-Being Outcome 3 has been substantially achieved in 89% (158/178) of cases.

OCFS monitors that children receive the adequate services to meet their physical and mental health needs during PQI reviews using OSRI Items 17 and18.

OSRI Item 17 – Assesses concerted efforts of caseworkers to assess and address the physical health needs of children.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 17	Physical Health of the Child	79% 38/48	94% 127/135

Item 17 was rated as an area needing improvement during CFSR Round 3. During the 2023 PQI reviews, 94% (127/135) of cases were rated as a strength. In most cases, caseworkers demonstrated concerted efforts to meet the physical health needs of children by assisting with doctor and dental appointments, assisting parents with finding providers, and keeping up-to-date medical and dental records. In records where this was an area needing improvement, documentation of ongoing medical and dental appointments could not be located.

The ACS Youth Experience Survey presented the extent to which youth reported their healthcare needs were met. Noted on page 41 of the report, almost all youth (95.8%) reported having their physical health met and 92% reported having their sexual health/family planning needs met. Ninety three percent of youth had their emotional and mental health needs met, 96.8% reported having their alcohol/drug use met, 91.8% had their eye needs met, and 90.5% of youth reported their dental care needs were met.

OSRI Item 18 – Assesses concerted efforts of caseworkers to assess and address the mental and behavioral health needs of children.

OSRI Item	Item Description	CFSR R3 (2016)	PQI Review 2023
Item 18	Mental Health of the Child	68% 34/50	91% 90/99

Item 18 was rated as an area needing improvement during CFSR Round 3. During the 2023 PQI reviews, 90% (90/99) of cases were rated as a strength. In most cases, caseworkers demonstrated concerted efforts to meet the mental and behavioral health needs of children by providing initial and ongoing assessments of needs, working with families to update goals when appropriate and making referrals to mental health providers. In cases where this item was an area needing improvement, documented assessments were completed, but services to meet the assessed needs were not provided, and in other cases, when new mental and/or behavioral health concerns arose during the PUR, these new concerns were not addressed.

SECTION IV- ASSESSMENT OF SYSTEMIC FACTORS

A: Statewide Information System

New York assessed the state's performance on this systemic factor based on the state's performance on Item 19. New York believes the state ***is not in substantial conformity*** with this systemic factor, despite having assessed the Statewide Information System as a strength in our recent APSR. This item was rated as an area needing improvement in CFSR Round 3.

Item 19: Statewide Information System

How well is the statewide information system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

Background

A flexible and functional statewide information system that houses comprehensive, accurate and timely administrative data is foundational to a modern child welfare system. In NYS, CONNECTIONS is the statewide information system of record and is used by approximately 28,000 workers located within OCFS, LDSSs, and VAs to document child welfare practice. Casework staff who have appropriate security (such as a designated role within a particular case) and supervisors/administrators can enter, view and/or edit information on CONNECTIONS screens organized by case type and practice stage. The system is classified by the ACF as an "operational transitional" system and is currently in year six of a nine-year plan to become a comprehensive child welfare information system (CCWIS).

CONNECTIONS development and governance is overseen by the Bureau of Strategic System Innovations (BSSI) within OCFS, which coordinates and prioritizes all system change requests through the Change Management Committee. The Committee is comprised of OCFS child welfare, legal, policy, research/reporting, and fiscal staff, upper managerial level staff from ACS, implementation specialists who represent LDSSs and VAs, OCFS regional offices program staff, and ITS technical staff. BSSI also houses the CONNECTIONS Implementation Team. Implementation specialists are former child welfare and CPS case workers who specialize in supporting LDSS and VA users. The team is involved in nearly all aspects of the CONNECTIONS software development lifecycle. Typical tasks assigned to CONNECTIONS Implementation Team members include submitting new functionality requests, providing clarity to requirements, developing new business processes in preparation for new functionality, user acceptance testing, and end-user support and training. Implementation specialists support data quality initiatives with field level workers, develop tip sheets for improving CONNECTIONS data entry, and provide suggestions to the OCFS data and reporting team regarding needed data quality reporting tools.

Oversight and monitoring of data quality is shared across multiple OCFS bureaus, including BSSI, the Bureau of Continuous Quality Improvement (CQI), and the Bureau of Research, Evaluation and Performance Analytics (BREPA). CQI performs detailed reviews of child welfare activities with a goal of improving outcomes, participates in the data governance framework, and

plays a lead role on the data quality workgroup. BREPA is responsible for all federal reporting, oversees the OCFS Data Warehouse (the reporting module for CONNECTIONS), and facilitates the data quality work group that identifies, prioritizes, and monitors cross-divisional efforts aimed at improving CONNECTIONS data quality.

Improvements since Round 3

Under the auspices of its CCWIS, data governance, and data quality work groups, OCFS has continued to improve its system and practice infrastructure to support comprehensive, timely, and accurate data collection.

CONNECTIONS Enhancements

Built into CONNECTIONS are to-dos (e.g., tasks, alerts, and email reminders) that serve to inform users and supervisors of deadlines for certain tasks and/or potential inconsistent data entries. Similarly, various decision points within CONNECTIONS require entry of specific information before the caseworker can proceed. Examples include requiring completion of safety and risk assessments prior investigation closure and completion of case-planner summaries before a Family Assessment and Service Plan (FASP) can be submitted. Notable CONNECTIONS based improvements implemented since CFSR Round 3 to promote comprehensive, accurate, and timely data include:

- creation of pop-up messages to promote linkage of records/reduce individuals with duplicate identities (IDs) by instructing workers to perform a new person search when demographics are updated in CPS investigations,
- adding caseworker and supervisor email reminders of upcoming deadlines for required Family First Qualified Individual assessments and court reviews, and
- implementation of a data exchange with NYS Department of Health to import Medicaid claims data. Ten additional application programming interfaces (API) are also in development to support data exchanges with local applications used by agencies and districts to reduce duplicate data entry.

Data Warehouse Enhancements

In 2022, the OCFS Data Warehouse added a “Casework Monitoring/Data Quality” folder to its landing page. The folder contains pre-defined reports that OCFS, LDSS, and VA users can leverage to evaluate and improve data quality. Included in this folder are reports focusing on upcoming and/overdue casework activities, individuals with potentially duplicated IDs, and the timeliness of data entry for movement records. Reports provide users with a high-level overview of performance and the ability to drill down to case specific records needing attention.

Monitoring

In response to CFSR Round 3 feedback, OCFS initiated practices to verify the accuracy of CONNECTIONS entries pertaining to children’s vital records and placement location against a secondary source, such as the child’s birth certificate, medical records, court documents, interviews, or written progress notes where possible. As described below, verification activities were integrated into the County Planning process and the Program Quality Improvement (PQI) case review procedures.

Data Quality Workgroups

In the past three years interdivisional workgroups have been formed to identify address strategies to:

- Reduce the creation of duplicate person IDs,
- Improve the comprehensiveness and accuracy of items that serve as the basis for AFCARS reporting and Family First Prevention Services Act documentation,
- Review and address potential errors in dates of birth, trial discharge status, and coding of respite stays, and
- Reduce casework burden and/or facilitate efficient practice through use of technological solutions.

Analysis

In evaluating system performance, states are instructed to consider the extent to which their statewide information system contains accurate information on the status, demographics, placement location and goals of children in foster care. OCFS used a combination of administrative data, case reviews, and focus groups to analyze and assess recent performance in these areas.

Assessment of Comprehensiveness/Missing Data

To assess the extent to which CONNECTIONS collects comprehensive information on children served by the child welfare system, compliance with federal reporting was reviewed. NYS' AFCARS submissions for both the 2023A and 2023B files were deemed non-complaint. As shown in the summary table below, while key elements pertaining to child demographics, placement settings, and permanency goals exceeded compliance thresholds, missing and inconsistent data related to foster homes, foster parent demographics, and reasons for removal were problematic in both submissions.

Missing/incomplete data entry is responsible for several of the non-compliant findings. Information on removal environment was only recently added as a data field in CONNECTIONS. Consequently, children who entered care before this element was added frequently do not have complete records as workers do not have time to retrospectively update records. Similarly, caseworkers did not select at least one reason for removal on the CONNECTIONS removal screen for a substantial number of children entering care; this missing data resulted in an inconsistency error finding, as children are expected to have at least one factor associated with removal. Non-compliance on foster home status and parent demographics is complicated by current CONNECTIONS design. An independent question asks for home marital status, while a person grid is used to collect information on home members. The two questions are not contingent on each other, allowing a worker to indicate a married household and later to identify only one adult as a foster parent in the person grid. This creates inconsistency in the home record that cannot be reconciled without manual review and correction by a caseworker.

Percent Missing Percent Inconsistent					
Item	**Quality Threshold**	**AFCARS 2023A**	**AFCARS 2023B**	**AFCARS 2023A**	**AFCARS 2023B**
Child Sex	100%	0%	0%	0%	0%
Child Date of Birth	100%	0%	0%	0%	0%
Child Race (e11-e21)	100%	0%	0%	0%	0%
Placement Setting (e113-e121)	90%	0%	0%	0%	0%
Permanency Goal	90%	0%	0%	0%	0%
Removal Environment	90%	40%	37%	N/A	N/A
Removal Reasons (e71-e105)	90%	0%	0%	8%	11%
Marital Status of Foster Parent	90%	N/A	N/A	15%	16%
Foster Parent Demographics (e136-e146)	90%	0%	0%	15%	15%

Compliance with National Youth in Transition Database (NYTD) data files was stronger. NYTD compliance reports for 2023A and B found NYS exceeded the threshold for error-free records for all 58 items, including those related to children's date of birth, gender, demographics, and foster care status.

Assessment of Accuracy

In response to CFSR Round 3 feedback, OCFS initiated practices to verify the accuracy of CONNECTIONS entries pertaining to children's vital records and placement location against a secondary source, such as the child's birth certificate, medical records, court documents, interviews, or written progress notes where possible.

As part of their 2022 County Plan Annual Update, OCFS provided each LDSS with demographic data pulled from the CONNECTIONS for ten children in foster care in their district. LDSS staff were asked to check the accuracy of this data against available secondary sources and to provide a self-assessment of how readily they can identify the status, demographic characteristics, location, and goals for the placement of children who are in foster care in their district. As reported in the 2023 Annual Progress and Services Report, 98% of the LDSSs considered this area an area of strength, with self-assessment scores ranging from 80%-100%, with an average score of 96%. Many of the LDSSs reporting 100% accuracy on the case review have dedicated staff to review such information and ensure completion.

The accuracy of vital records is also reviewed by the OCFS Oversight and Monitoring Unit when conducting PQI reviews (see item 25 for more detailed information). If no secondary source is available for cross-verification, the item cannot be coded. As of December 2023, 110 children with active foster care placements in 2023 had verification checks completed on one or more data elements (e.g., date of birth, race/ethnicity, foster care admission date, placement, permanency planning goal, and discharge date if applicable). As shown below, CONNECTIONS entry was confirmed to be accurate for most entries.

	Foster Care Entry Date	**Foster Care Exit Date**	**DOB**	**Race**	**Ethnicity (Hispanic or Not Hispanic)**	**Placement Location**	**Permanency Goal(s)**
Number Reviews Completed	67	45	104	103	102	104	104
Number Accurate	66	43	104	102	102	103	101

Percent Missing Percent Inconsistent					
Item	**Quality Threshold**	**AFCARS 2023A**	**AFCARS 2023B**	**AFCARS 2023A**	**AFCARS 2023B**
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Number Reviews Completed	67	45	104	103	102	104	104
Number Accurate	66	43	104	102	102	103	101
Percent Accurate	99%	96%	100%	99%	100%	99%	97%

Assessment of Timeliness

Despite attempts to reduce data entry burden and assist staff in monitoring casework activity, timely entry of key casework elements remains a challenge, with stakeholders citing the volume of administrative demands and caseworker turnover as significant contributors.

As part of its CFSR Round 3 PIP, OCFS created new data warehouse monitoring reports focused on measuring timely data entry. In accordance with OCFS Administrative Directive 15-OCFS-ADM-25 and 17-OCFS-ADM-03, which directs local departments to enter all foster care movements into CONNECTIONS within 30 days, these reports assess the timeliness of all movement entries by comparing the length of time between the stated movement date and the data entry transaction date. Timely entry is critical to having an accurate understanding of children's in-care status and/or placement settings. As shown below, recent data suggests that OCFS has yet to reach its stated goal of having 90% of all movements into and out of foster care entered within a month of the actual movement date.

2022 Movement Records by Type	Total Movements	Movements Entered <=30 Days	Percent Entered <=30 days
Admission	6423	4847	75%
Discharge	6907	4719	68%
Absence	9839	7658	78%
Return from Absence	8593	6760	79%
Trial Discharge	1590	1201	76%
Return from Trial Discharge	345	258	75%
Inter-agency Transfer	6907	4719	68%
Intra-Agency Transfer	2862	2443	85%

CONNECTIONS data as 10/25/23

OCFS also examined the timeliness of case planning activities. A FASP must be completed on all children in foster care no later than 60 days after the child's admission and every six months thereafter. FASPs contain key information about a child's needs and services and are integral to understanding the status of a child's case.

Time to First Approved FASP Post Foster Care Admission: CY 2022		
	Count	Percent
Total Admission Episodes1	5339	100%
FASP Approved within 60 days	3177	60%
FASP Approved within 180 days	1327	25%
FASP Approved after 180 days	382	7%
Missing FASP	453	8%

To assess adherence to this requirement, the time to first FASP approval post-foster care admission was examined for all foster care entries in 2022 lasting at least 60 days. As shown in the adjacent table, a FASP was completed and approved within 60 days for only 60% of admissions. An additional 25% of admissions had a FASP completed within six months of admission.

Stakeholder feedback

Stakeholder feedback on the ability of CONNECTIONS to serve as an accurate and timely source of information on casework practice was gathered through two focus groups. Group 1 was held on September 19, 2023, with members of the CONNECTIONS Implementation Team. Group 2 was held on October 25, 2023, at OCFS' annual directors of services (DOS) conference and included DOS from multiple counties. Themes voiced by these groups are highlighted below.

- CONNECTIONS is a large and complicated system that can be difficult to navigate, particularly for new workers.
- Administrative and documentation demands are too high.
- High caseloads negatively impact timely and comprehensive data entry. Workers cannot effectively balance all the required paperwork and still perform field functions. Workers may delay entry and or not have time to fully document practice.
- Frequency of worker turnover makes it difficult to keep up with training demands; workers may not fully understand what needs to be done and the global impact of data quality.
- OCFS needs to prioritize and clearly communicate goals and revisit performance; Communicate realistic/pragmatic expectations.
- It is time-consuming to toggle between CONNECTIONS and Data Warehouse to correct identified issues.

Conclusions and Continuous Quality Improvement Activities

Since CFSR Round 3, NYS has grown its data governance and data quality infrastructure, enhancing the system's capacity to prevent, identify and address data quality issues through a multitude of mechanisms (e.g., systems enhancements, practice improvements, monitoring tools). Despite these efforts, room for improvement remains. While current findings suggest that CONNECTIONS supports the collection and display of comprehensive information that is accurate when entered, timely entry of key casework elements remains a challenge, with stakeholders citing the volume of administrative demands and high caseloads as significant contributors. OCFS should continue to explore ways to streamline data entry, expand data exchanges, reduce worker burden, and prioritize targeted clean-up efforts.

B. Case Review System

New York assessed the state's performance on this systemic factor using the state's performance on Items 20-24. New York believes the state ***is not in substantial conformity*** with the systemic factor of the case review system as Items 23 and 24 are identified as areas needing improvement.

Item 20: Written Case Plan

How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?

Summary of Performance

New York State assesses Item 20 a **strength** as OCFS has a well-functioning system to ensure that each child has a written case plan that is developed jointly with the child's parent(s). OCFS rated this area as a strength in the Statewide Assessment for Round 3 of the CFSR. This area was assessed as needing improvement in the CFSR R3, as stakeholders were mixed in how effectively the agency ensures parental involvement in case planning. Since then, OCFS has updated the case review process to better gather data on family and youth involvement in the development of their written case plan as part of a local district's review of practice.

Analysis

Each child has a written case plan that includes the required provisions

NYS requires that local districts develop written Family Assessments and Service Plans (FASP) and maintain these plans as part of the standard case record. A FASP must be created for all families receiving child protective services, preventive services, or foster care services. For a child legally freed for adoption, there is a required child-specific assessment and service plan[4]. Since 2005, the FASPs are documented electronically as part of NYS' CONNECTIONS system. The FASP template includes a child's permanency planning goal, as well as specific assessments of safety, risk, strengths, needs, and service needs. The FASP also includes a services plan, which includes descriptions of the activities and services that will address the circumstances or conditions that need to change to achieve permanency, enhance well-being, and/or reduce risk (FASP-Ref-Guide-2017.pdf (ny.gov)).

The initial FASP for the family is required within seven days of a determination of a CPS report of abuse or maltreatment if the case will be opened for child welfare services, or within 30 days of a foster care placement, a court order, or receipt of an application for services, whichever is earliest. A comprehensive FASP is required within 90 days of the case opening and the first reassessment FASP within seven months of case opening and continuing reassessment FASPs every six months thereafter. Within these timeframes, all case plans must be approved by the case manager, who is the local district representative with the authority to authorize service

[4] 18 NYCRR 428.6

provision and determine eligibility. Plan amendments are required at points of significant change in the case, such as a child moving from one foster care setting to another or a child becoming legally freed[5], and on-going progress notes are also required. The FASPs serve not only as the official source of documentation for the case, but also as tools to help support and guide caseworker and supervisory decision making.

OCFS provides data management reports to local districts and voluntary agencies so they can monitor compliance with FASP timeframes. These reports can also aid supervisors in managing workloads. Below are reports available to districts through the OCFS Data Warehouse.

FASP Reports

Reports about the processing and completion of Family Assessment and Service Plans

FASP Status Summary	Provides Local Districts with the number and percentage of Initial, Comprehensive, and Reassessment FASPs and their respective statuses for a specific month. This report is for Districts only.
FASPs Due	Provides Local Districts with the number and percentage of FASPs that are currently overdue or coming due within 60 days of the current date. This report is for Districts only.
FASPs Due Detail Organized by Worker	Provides a detailed list of FASPs that are currently overdue or coming due within 90 days of the current date. This report is organized by worker name. There are VA and LDSS versions of this report.
Overdue FASP Activities	Provides the number of submissions, rejections, and approvals for FASPs overdue on a specified date. Also includes the length of time the FASPs have been in the submittal-approval process. This report contains a link to a detailed list of submission, rejection, and approval activities for a selected FASP. There are VA and LDSS versions of this report.
FASPs Due Calendar	Provides a chronological list of FASPs in "Not Launched," "In Process," and "Pending" statuses that are due during a specified date range. There are VA and LDSS versions of this report.

To evaluate the timeliness of written case plans, OCFS looked at the children that entered foster care in 2022 and extracted the dates of the first approved FASP after the child's entry date from CONNECTIONS. It is noted, children that entered foster care with no prior FASP had an approved FASP within 60 days at a much higher rate that children that entered foster care with a current FASP from a services case.

- Of the 5,339 children that entered care in 2022 and were in care at least 60 days, 35 (0.7%) did not have a FASP approved during their foster care spell.

- Children that entered foster care without a previous services case record are expected to have an initial FASP within 30 days of the entry to foster care.

    - Of the 2,240 children in this category, 1,212 or 54.1% had an initial FASP within 30 days, and by 60 days, 81.5% (1,826 children) had an initial FASP.

- Some children enter foster care with a FASP that was completed either while the child was receiving preventive services or Child Protective Services. Children with an existing FASP prior to foster care entry will have either a Plan Amendment, Comprehensive

[5] 18 NYCRR 428.7

FASP or Reassessment FASP depending on the date of the previous FASP. All, however, should have a FASP approved within 60 days of foster care entry.

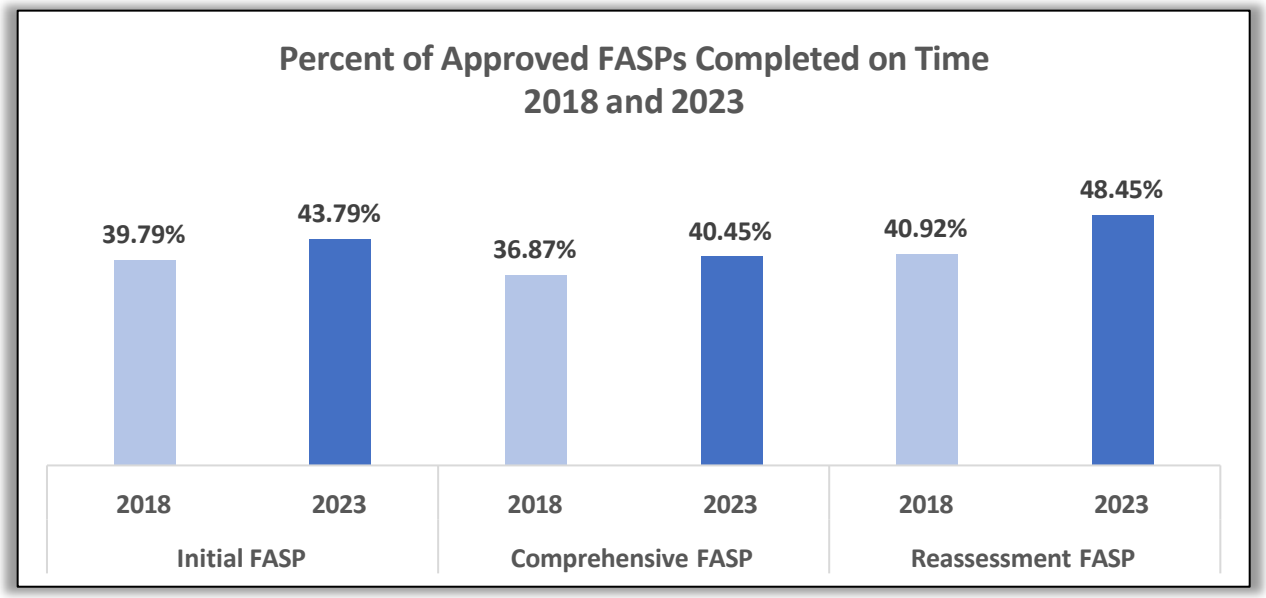
Of the 3,064 children in this category, 44% (1,340 children) had an approved FASP within 60 days and 66% (2,022 children) had an approved FASP within 120 days of foster care entry.

Initial FASP (within 30 days)

Day Length	Cumulative Count	Cumulative %
By 30 days	1,212	54.1%
31-60 days	1,826	81.5%
61-90 days	2,025	90.4%
91-120 days	2,107	94.1%
121-150 days	2,139	95.5%
151-180 days	2,157	96.3%
over 180 days	2,240	100.0%

Previous FASP before Foster Care Entry

Day Length	Cumulative Count	Cumulative %
By 30 days	791	25.8%
31-60 days	1,340	43.7%
61-90 days	1,738	56.7%
91-120 days	2,022	66.0%
121-150 days	2,221	72.5%
151-180 days	2,405	78.5%
over 180 days	3,064	100.0%



Timeliness of approved FASPs of all types has improved since 2018. It should be noted that this improvement occurred during a time period with significant staffing shortages and increased documentation requirements. Of all the FASPs that were approved in 2018 and 2023 the table below displays the timeliness of the FASP by type of FASP. Source: CONNECTIONS

Case plans are developed jointly with the child's parent(s)

OCFS regulations require local districts to include, among others, a child's parents and/or guardians in the development of the FASP[6]. Each FASP must contain documentation about the

[6] 18 NYCRR 428.6(a)(1)(vii-x)

involvement of the parent(s) or guardian(s) and, where appropriate, children 10 years or older in the development of the plan or must document efforts to involve them in the development of the plan.[7] Such efforts must include, but are not limited to:

- Encouraging parent(s) or guardian and the children to participate in the development and review of the plan, and attempting to obtain the parent(s)' or guardian's signatures documenting their review of the plan; and
- Where parent(s) or guardian and/or children are not able to participate in the development of the plan and arrangements cannot be made to allow participation, conveying the contents of the service plan and any recommendations to them, and attempting to obtain the parent(s)' or guardian's comments and signatures documenting their review of the plan.

OCFS monitors compliance with these requirements as part of the PQI case review process. Information from PQI case reviews (as described in more detail in item 25) is collected each year from a sample of LDSSs of varying sizes and locations to monitor the delivery of services and supports to children and families in NY. OCFS monitors that each child has a written service plan that is developed jointly with the child's parent(s) during PQI reviews using OSRI Item 13 and Question 9 on the "Data Quality Review Form." It is evident from these reviews that LDSSs are making efforts to include families in the development of the case plan.

OSRI Item 13 - Child and Family Involved in Case Planning

OSRI Item	Item Description	PQI Review 2023 (PUR Start Date 2022)	
Items 13B/13C	During the PUR, did the agency make concerted efforts to actively involve the parents in the case planning process?	13B Mother-	
		White (child)	98% (118/120)
		Non-white (child)	95% (46/48)
		13C Father-	
		White (child)	94% (89/95)
		Non-white (child)	89% (23/26)

Data from the 2023 PQI reviews shows that in 98% of 168 cases reviewed, mothers were involved in case planning for their child. Additionally, fathers were involved in case planning for their child in 93% of applicable cases. Involvement in case planning is demonstrated through efforts to involve parents in activities such as regularly scheduled service plan reviews, caseworker visits to parents, phone calls to parents, and appearances at court. Caseworkers also involve incarcerated parents with letters, face to face visits, and support participation in court proceedings via video conferences. When separating this information by the race of the child, children identified as white had a higher percentage of involvement in case planning by both mothers and fathers.

OCFS also provided an opportunity for LDSSs to self-assess and address the functioning of their local practice during the 2022 Local County Plan Annual Update. Each LDSS was provided an Excel document with information from a random selection of foster care records of up to 10 children who were in foster care for at least 15 months as of July 2022. Districts that had less than 10 children meeting this criterion were given the maximum number of records that did meet the criteria. The LDSS was asked to assess if there was evidence in the case record that the child's service plan was developed jointly with the child's parent(s) and/or guardian(s). This self-

[7] 18 NYCRR 428.3(d)

assessment included a review of FASPs and other documentation. However, it should be noted that

> 66% of districts identified opportunities for improving the documentation of caregiver voices in the development of service plans and many reported having strategies in place to improve this.

interviews with children and families were not part of this self-assessment.

Data Quality Review Form – The Data Quality Review Form is completed for each foster case reviewed during the PQI review to monitor areas not specifically captured in the OSRI tool. In 2023, reviewers found evidence of parent involvement in 97% of the cases. Evidence was found recorded in the FASP, through interviews with parents and caregivers, and/or in progress notes.

Data Quality Review Form	Item Description	PQI Review 2023 (PUR Start Date 2022)
Question 9	Is there evidence that the family was involved in the development of the FASP?	97% (82/85)

Findings from the case reviews are shared with the LDSS as areas of strength and areas needing improvement. When 75% of the cases reviewed for the item are determined to be an area needing improvement, a program improvement plan (PIP) is required by the LDSS that must include underlying factors impacting performance and development of strategies to be put in place to enhance practice. Strategy implementation and effectiveness are monitored by OCFS regional office through quarterly site visits, review of the LDSS PIP, and in subsequent PQI reviews.

> In 2023 PQI reviews,
>
> - 100% of the 13 LDSSs had a strength in involving mothers in case planning.
> - Two LDSSs were required to develop a PIP to improve their practice of involving fathers in case planning.

As part of NYS's participation in the Round 4 CFSR review, various stakeholder focus groups and surveys were conducted (see stakeholder involvement for details). When asked about their involvement in the development of their case plan, if there was an adequate assessment of their needs, and if they felt they had a voice in their services, *it is clear the intention of the work done by caseworkers is not always realized in the experiences of the people receiving the supports.*

Some takeaways from the surveys and focus groups:

Family survey

- I was involved in the development of my family's service plan:
  - 70% strongly agreed, agreed or responded neutrally.

Youth focus groups – Older youth in foster care and recently discharged from foster care

- Most of the youth expressed that they knew what the service plan review was and had attended reviews on their case. They attended Service Plan Review or Treatment Plan meetings and were part of developing their goals, especially as they got older. They received a packet that included a copy of the SPR, Permanency hearing court information, their goals, and plan. They were made sure to sign every treatment plan, indicating their agreement and understanding of the plan.

- Not all experiences were positive. Despite participating in meetings, many youths felt that their voices were not heard or taken seriously. They felt that their goals were often decided for them, and they were not given a choice in the matter. Some youth refused to sign their plans because they thought it would hinder something in the future, indicating a lack of trust or understanding of the process.

Parent Advisory Board Focus Group

- Parents expressed being invited to case planning meetings and recommended that OCFS messaging around case plans should lead with the importance of family voice to encourage and support the involvement of families.

Conclusions and Continuous Quality Improvement Activities

Item 20 is rated as a ***strength*** as OCFS does have a system to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and those plans can be found in the case record. However, New York State recognizes the need to improve the way families experience the child welfare system and has the following efforts underway:

- Youth and parent focus group findings highlight the need for more consistent and meaningful family involvement in the development of their service plans. This will require ongoing efforts to improve transparency, communication, and support throughout the process. OCFS continues to explore opportunities to receive feedback from consumers of child welfare services such as the development of focus groups and surveys to families, with specific questions regarding engagement and inclusion in the development of their case plans.
- In 2022, OCFS contracted with the University of Kentucky to begin the development of the Universal Assessment Tool. In 2026, this tool will replace multiple assessments in NYS's current documentation system which will allow for streamlined assessments focused on a family's needs, strengths, and protective factors. The assessment is described as a communication tool, meant to be done in collaboration with a family and supports consensus building with families and their supports, to better identify their needs and develop plans for action. OCFS has also aligned this tool with family led practices such as Signs of Safety, Safe and Together, and Family Assessment Response, to continue to strengthen and build collaboration with families in the NYS Child Welfare system.

- In 2023 OCFS was able to partner with Families Together of NY to add Family Policy Advisors to all OCFS regional offices and central office. These Family Policy Advisors

conduct reviews of local district practice, alongside OCFS staff, to assess for increased family involvement in case plans. They also provide recommendations on improvements to practice and policy to increase engagement of families impacted by the child welfare system. OCFS also encourages local districts to support hiring of parent advocates to assist with engagement of families impacted by child welfare.

Item 21: Periodic Reviews

How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

Summary of Performance

New York State assesses Item 21 as a **strength** as OCFS has a well-functioning case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every six months, either by a court or by administrative review. This item was a strength in the CFSR R3, where interviews with stakeholders showed that periodic reviews for children in foster care occur no less frequently than once every six months.

Analysis

OCFS requires periodic reviews of the FASP for foster care cases and other out-of-home placement cases, where a child is directly placed by the court with a relative or other suitable person as a result of an abuse or neglect petition.[8] LDSSs and VA may also conduct a periodic review of the FASP in non-placement cases, but this is not required. These administrative reviews, known as Service Plan Reviews (SPR), are case conferences involving the parents, guardians, any foster child over 10 years of age, the child's foster parents, and service providers, and a third-party reviewer who not directly responsible for the case. SPRs are required to be held prior to the completion of each FASP and must be held no later than 90 days from the date the child was removed from the home. Subsequent SPRs must be held every six months thereafter.

Court reviews are also considered periodic reviews, and as described in item 22, New York State regulation requires an initial permanency hearing review (PHR) shall be commenced no later than six months from the date which is sixty days after the child was removed from the home and every six months thereafter for all foster care children placed for abuse or neglect or voluntarily placed.

How well is this system working?

Permanency hearing data was reviewed to determine how many of the children who entered care or were in care during a specified period had at least one periodic review, either administrative review or by court, within the required timeframe. See item 22 for additional data.

[8] 18 NYCRR 430.12

- CONNECTIONS data showed that **78%** out of 1,968 youth who entered care between 7/1/2021-12/31/2021, who were in care for at least 8 months, had a PHR within the first eight months after entering foster care.

- Of the 1,527 youth who had their first periodic review on time, 1,245 were in care long enough (at least 6 months after initial review) for a second review. Of these 1,245 youth, **74%** had a periodic review within 6 months of the first review.

Periodic reviews in the form of an administrative review (SPR), may have been held during this time for the children that did not have a court review. OCFS currently does not have access to quality SPR data in CONNECTIONS and cannot verify these reviews occurred timely, however**,**

- **81%** of case workers (102/126) responding to the caseworker survey reported that periodic reviews (service plan reviews or PHRs) occur timely every six months. When they do not occur timely, some barriers identified were high caseloads and court adjournments.

- **88%** of directors of services (22/25) reported that periodic case reviews were occurring in their county on a timely basis every six months and subsequent permanency hearings were also occurring on a timely basis.

As a part of the 2022 New York State Child and Family Services Plan, each LDSS was asked to complete a self-assessment of performance on selected systemic factors to assess performance. Case review system, including an assessment of periodic reviews, was an area LDSS were asked to self-assess. Each district was asked to document the date of the most recent permanency hearing and the date of the permanency hearing prior to that one. The district then calculated the number of days between the permanency hearings. The target number of days was less than 180.

OCFS noted through the self-assessments done by districts that permanency hearings are occurring 86% (386/477) of the time as required.

- Thirty-two of the fifty-eight LDSS reported 90% completion within six months.
- Twenty-four of those LDSSs reported 100% completion within six months.

Conclusions and Continuous Quality Improvement Activities

Item 21 is rated as a **strength** as OCFS does have a system to ensure that a periodic review for each child occurs no less frequently than once every six months, either by a court or by administrative review. Survey data and administrative data support this rating.

To ensure periodic reviews are occurring timely, LDSSs reported a good system of monitoring and oversight by supervisory staff as well as proper planning and communication between all levels including the courts has been established.

Though this area is rated a strength, there is room for improvement. Barriers identified by stakeholders were staff shortages, high caseloads, time limitations for supervisors to support caseworkers in meeting deadlines and judges scheduling reviews yearly. Additionally, 61% of respondents to the judicial/legal survey agreed or somewhat agreed that continuances impact the timeliness of periodic review hearings.

Item 22: Permanency Hearings

How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?

Summary of Performance

New York State assesses Item 22 as a **strength** as OCFS has a well-functioning system statewide to ensure for each child a permanency hearing occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter. This area was identified as a strength in the CFSR R3.

Analysis

New York State requires an initial permanency hearing that shall be commenced no later than eight months after the child was removed from the home and every six months thereafter for all children placed in care. In order to meet this requirement, the Office of Court Administration (OCA) establishes a "date certain" and the upcoming permanency hearing is scheduled.

The term "date certain" means a specific day set by the court when a permanency hearing will be held. The date certain for the initial permanency hearing is set at the first removal hearing, or the hearing under section 358-a of the SSL approving the voluntary placement agreement or surrender. The date for each subsequent permanency hearing is set at the completion of the previous permanency hearing. The actual timing of the date certain is based on the standards set forth in section 1089 of the FCA as follows:

- Initial permanency hearing: Date of removal from the home, plus 60 days, plus six months = no later than eight months.
- Subsequent permanency hearings: No later than six months following the preceding permanency hearing.
- Permanency hearings for children freed for adoption: Immediately following an approval of a surrender or termination of parental rights disposition, or no later than 30 days after the court hearing completely freeing the child for adoption.

The passage of the Permanency Legislation in 2005 created a schedule for permanency hearings that exceeds the federal requirements. Permanency hearings apply to the following children:

- Children who have entered foster care as abused or neglected children (FCA Article 10);
- Children who have entered foster care through a voluntary placement agreement (SSL §384-a);
- Children in foster care who have been surrendered for adoption (SSL §383-c) and are completely legally free;
- Children who have been surrendered for adoption (SSL §384);
- Foster children determined by a court to be completely legally free for adoption, whether in foster care pursuant to FCA Articles 3 (juvenile delinquent), 7 (PINS), or 10 (abused/neglected), or by voluntary placement or surrender; and

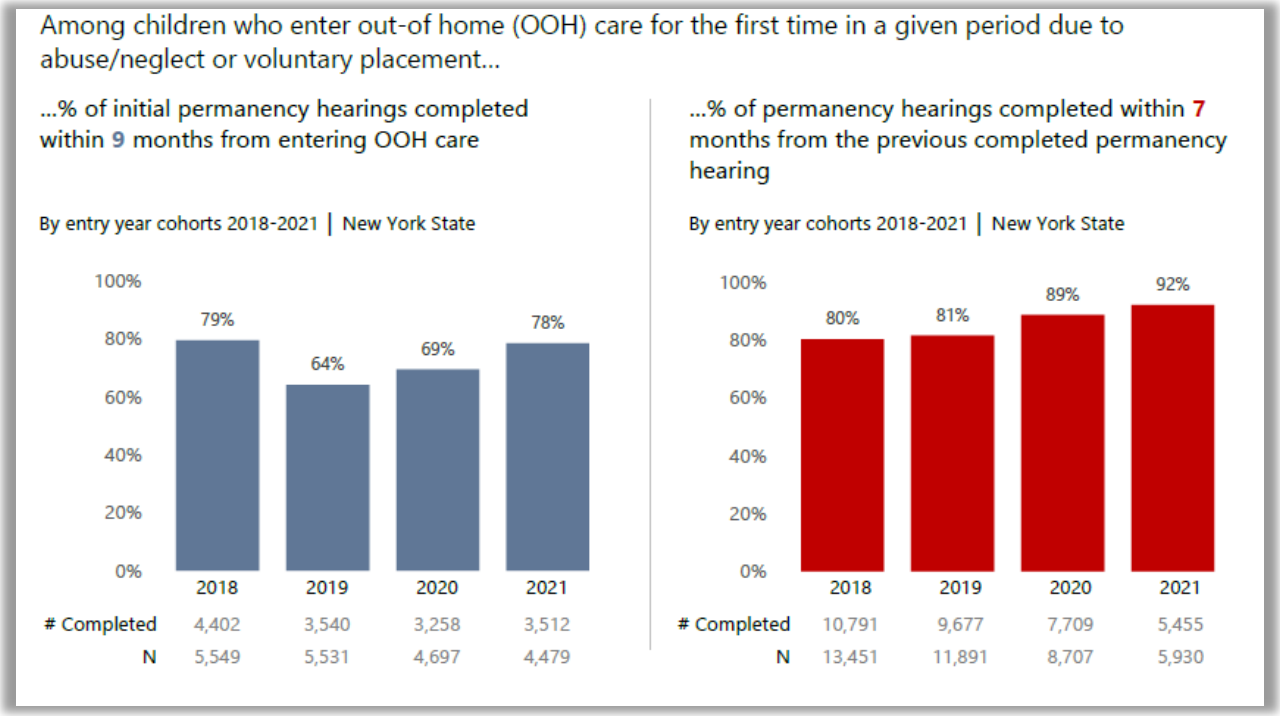
- Children placed by the court directly with a relative or other suitable person as an outcome of an FCA Article 10 proceeding.

Moreover, as of January 1, 2020, each request for an extension of PINS placement triggers a permanency hearing for the respondent youth at which the court must consider the continuing need for placement. PINS youth are required to have a permanency hearing at the time of any extension of placement. The initial placement for a PINS youth is up to 60 days; the first extension of placement can be for a period of no longer than six months. The second extension of placement can be for a period of no more than four months. The law allows for the filing of a third extension of placement in limited circumstances.

How well is this system working?

The Child welfare Court Improvement Project tracks permanency hearing data to monitor compliance with the New York State regulations and includes the following metrics in the annual report. As shown below,

- 78% of children that entered care in 2021 had a completed permanency hearing within 9 months of entry.
- 92% of children in 2021 had a permanency hearing within 7 months of a previous permanency hearing.



As a part of the 2022 New York State Child and Family Services Plan, each LDSS was asked to complete a self-assessment of performance on selected systemic factors, including an assessment of periodic reviews occurring every 12 months. Each LDSS was provided a list of up to 10 children in foster care, who had been in foster care for at least 24 months. Each LDSS

assessed how well the case review records system is functioning in the district to ensure a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

> In 97% of cases reviewed (407/418), a permanency hearing was held within 12 months of the previous hearing.

Additionally, the tables below present permanency hearing data obtained from the CONNECTIONS system. OCFS identified children who entered care in 2021 who had a permanency hearing within 12 months of entering foster care.

- There were 3,824 children with a foster care episode starting in 2021 that was at least 12 months long. Of these, 87% had a timely permanency hearing.

Number of children with PHR within 12 months of entering foster care (FC) 2021

Total #	Total %	# Had a PHR within 12 months	% Had a PHR within 12 months	# Did not have a PHR within 12 months	% Did not have a PHR within 12 months
3,824	100%	3,315	87%	509	13%

To determine the number of children who had subsequent permanency hearings following the initial permanency hearing in 2021, OCFS flagged the date of the child's first permanency hearing and then calculated 12 months after.

- Of the 3,315 children with a timely initial permanency hearing, 568 were discharged before the next permanency hearing.
- Of the 2,747 children that remained, 91% had a second PHR within 12 months.

Total #	Total %	# of PHR within every 12 months	% of PHR within every 12 months	# of PHR within every 12 months	% of PHR within every 12 months
2,747	100%	2,504	91%	243	9%

Conclusions and Continuous Quality Improvement Activities

New York State assesses Item 22 a **strength** with a well-functioning system statewide to ensure for each child a permanency hearing occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

Item 23: Termination of Parental Rights

How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

Summary of Performance

New York State assesses Item 23 is rated as an ***area needing improvement*** as there is not a well-functioning system that ensures the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions. This item was an area needing improvement the CFSR R3 based on a review of cases that showed timely filing for termination of parental rights or documentation of a compelling reason not to file is not occurring statewide as required.

Though efforts were made and some improvement is noted, New York acknowledges this is an area needing additional focused improvement efforts.

Analysis

NYS requires, except as described below, that a petition to terminate parental rights (TPR) must be filed when:

- a child has been in foster care for 15 of the most recent 22 months, a court has determined the child to be an abandoned child, or
- a court has made a determination that the parent has
    - committed murder of another child of the parent, committed voluntary manslaughter of another child of the parent,
    - aided or abetted, attempted, conspired or solicited to commit such murder or voluntary manslaughter, or
    - committed a felony assault that has resulted in serious bodily injury to the child or another child of the parent.

A TPR petition is not required when:

- The child is being cared for by a relative (although a TPR may be filed in such cases); or
- The family has not been provided, consistent with the time period in the case plan, such services necessary for the safe return of the child to the child's home, if reasonable efforts required to be made with respect to the child; or
- The district/agency has documented a compelling reason for determining that filing such a petition would not be in the best interests of the child.

OCFS has developed guidance for districts and agencies around what may constitute compelling reason for not filing a TPR. The guidance has also been placed in the CONNECTIONS system help feature. This list is not considered all inclusive, but compelling reasons may include:

- The child is 14 years old or older and does not want to be adopted.
- A family setting will not currently meet the child’s needs because of the child’s severe emotional, behavioral, or psychiatric problems.

- At least one parent is actively being considered as a discharge resource for the child, and it is anticipated that such discharge is likely to occur within six months.
- The child is in placement with a sibling(s) and the sibling(s) is not being freed for adoption.
- The parent makes regular contact with the child and maintaining their relationship benefits the child.
- The child is in foster care for a child-related problem, at least in part, and there would be little or no benefit to the child in ending the child's relationship with the child's parent(s).
- The parent's death in imminent.
- There are insufficient legal grounds for TPR.
- The child's best/most likely permanency option is something other than adoption.
- The child was placed into foster care pursuant to Article 3 or Article 7 of the FCA and a review of the specific facts and circumstances of the child's placement demonstrate that the appropriate permanency goal for the child is either return to their parent or guardian, or discharge to APPLA.
- The child is a subject of a pending disposition under Article 10 of the FCA, (except where such child is already in the custody of the commissioner of social services as a result of a proceeding other than the pending Article 10 proceeding) and a review of the specific facts and circumstances of the child's placement demonstrates that the appropriate permanency goal for the child is discharge to his or her parent or guardian.

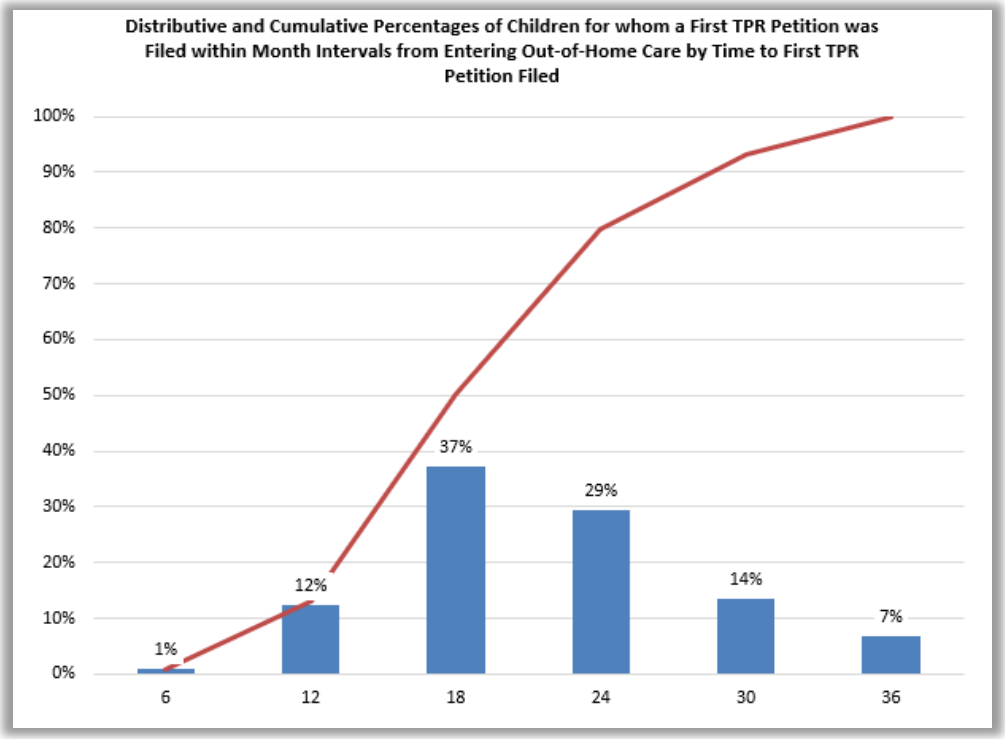
Every case (i.e., child and family) must receive ongoing individualized assessments. The factors that might constitute compelling reasons must be weighed along with other known child and family circumstances and documented in those assessments (FASP).

How well is the system working?

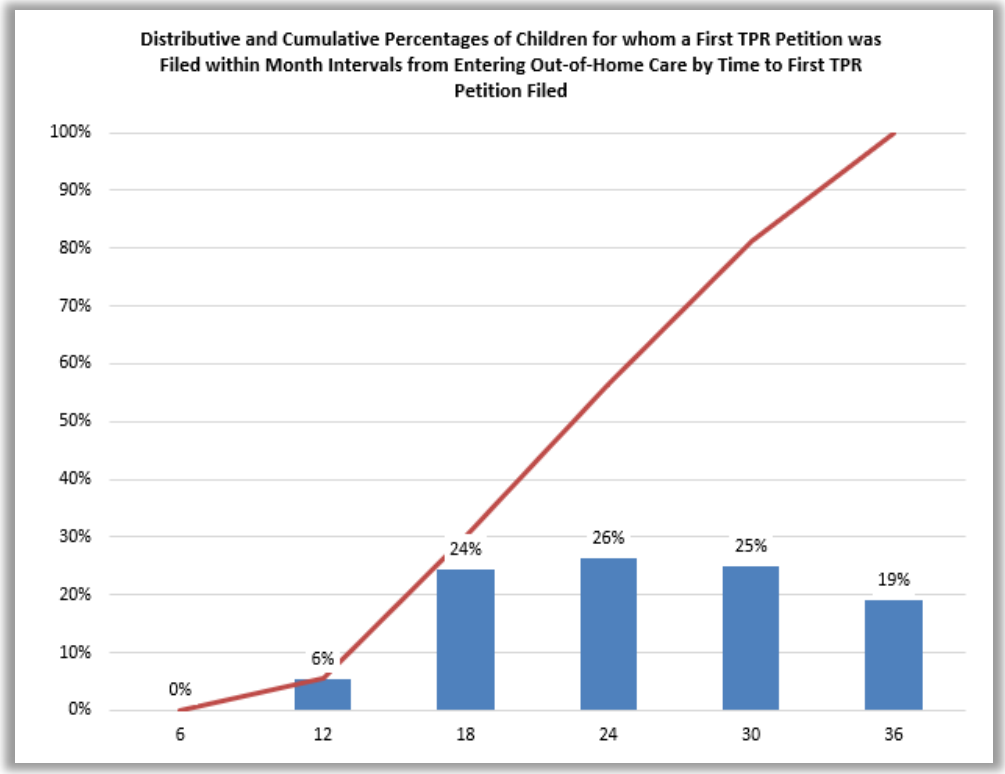
The Child Welfare Court Improvement Project collect data to track TPR filings in New York State. This metric includes all unique children who entered out-of-home care for the first time for reasons of abuse/neglect or voluntary placement and follows each child to identify children for whom a first TPR petition was filed during the designated time period. This population does not include children who entered out-of-home care and were subsequently the subject of a voluntary surrender whereby parents voluntarily relinquish their parental rights without ever having a TPR petition filed, or those who have not had a TPR filed by 36 months.

- In the 2020 entry cohort, of the children outside New York City within a TPR filed with 36 months of first entry to foster care in the time period, 79.6% of them were filed within 24 months.
- In the 2020 entry cohort, of the children in New York City with a TPR filed within 36 months of first entry to foster care in the time period, 56.2% of them were filed within 24 months.

Outside New York City



New York City



OCFS does not have administrative data available that would answer the question: *Of the children in foster care at least 15 of the most recent 22 months or who met other ASFA provisions and are not subject to an exception for filing a TPR, or who have a compelling reason not to file; for how many did the state file or join a petition.*

Current data collection requirements do not support extracting administrative data capable of comprehensively addressing this question. While caseworkers have long had the ability to enter dates of TPR hearings, legal codes intended to capture the filing of a TPR petition were not added to CONNECTIONS until December 2020. These new codes should eventually provide NYS with the ability to identify the numerator of interest (i.e., how many children in care for 15 of the previous 22 months have had a TPR petition filed). At present, however, data quality checks suggest that usage of the new petition filing code has been limited, as many children with documented TPR hearings have not had corresponding petition filing entries.

Similarly, CONNECTIONS entry does not support automated identification of the desired denominator (i.e., count of children reaching the TPR threshold who do not meet compelling reason exemptions). CONECTIONS entries related to compelling reasons are limited to progress notes text fields. As a result, while a count of children reaching the TPR threshold can be determined, narrowing that number down to those children without a compelling reason not to file cannot be done without manual review of case notes.

The administrative data that is available and accessible to LDSS and VA staff to assist with tracking children in care 15 of 22 months, is within the Data Warehouse in LDSS and VA foster care “in care summaries” which identifies the children in foster care in their agency at a point in time and includes a column that identifies which children have been in care 15 of the previous 22 months.

Though administrative data is not available, OCFS monitors the timely filing of a TPR during each PQI review using the OSRI Item 5, sections 5E, F and G. These items assess whether a TPR has been filed, and if not, was an exception documented in the case record. Of the 73 cases that were applicable for this item, 60 (72%) children either had timely TPR’s filed or an exception was applied.

OSRI Item	Item Description	PQI Review 2023 (PUR Start Date 2022)
Item 5D	Child has been in foster care for at least 15 of the most recent 22 months.	66% (74/113)
Item 5E	Child meets other Adoption and Safe Families Act criteria for termination of rights	8% (3/39)
Item 5F	The agency filed or joined a TPR petition before the period under review (PUR) or in a timely manner during the PUR or an exception was applied.	72% (60/73)

Additionally, in the 2022 County Plan Annual Update, each LDSS was provided records of up to 10 children in foster care for 15 of the most recent 22 months. LDSSs were asked to provide a self-assessment of how well the case review system is functioning in the district to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions.

- In 67% of the records reviewed, the petition to terminate parental rights was filed in a timely manner, which is in line with the PQI findings.

- Strengths that were noted were having strict oversight with a process and clear timelines. Other strengths that were noted were consistent follow-up and strong collaboration with the legal department.
- One underlying condition noted during the review was there being a backlog in the county court system due to the COVID-19 pandemic. The pandemic also contributed to another noted concern, which was turnover at the district level of both caseworkers and legal staff.

Director of Services (DOS) and Caseworker Survey results

LDSS Directors of Services were surveyed on what challenges exist to the timely filing of TPRs. While the majority reported that TPRs are filed on a timely basis, there were several challenges expressed. Many of these challenges exist within the courts including a lack of attorneys, delays in court proceedings, and the perceptions that judges are not allowing changes in the child's permanency goal or prioritizing timeframes for a TPR. Other challenges include lack of staff and caseloads being too high among LDSS staff.

Caseworker survey responses indicated 58% of respondents agreed that TPRs are filed timely. Barriers identified included caseworker shortages, lack of permanent resources for children, and delays in the courts.

Conclusions and Continuous Quality Improvement Activities

New York State assesses Item 23 is rated as an **area needing improvement** as there is not a well-functioning system that ensures the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions. Based on the data above, TPRs are not filed timely in a substantial number of cases and lack of administrative data makes it challenging to understand the barriers in the system on a statewide level.

OCFS and the Court Improvement Project continue to work together to address systemic issues that create barriers to permanency and the timely filing of TPRs. OCFS is committed to this partnership and completing a deeper exploration of these barriers, as well as understanding the strengths in the system to build upon.

Additionally, OCFS is committed to data quality improvements which include the consistent use of the legal codes that indicate the dates of TPR filings. There is a data quality workgroup within OCFS to address such issues and this topic has been added to the list of projects to be prioritized.

Item 24: Notice of Hearings and Reviews to Caregivers

How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

Summary of Performance

Item 24 is rated as an **area needing improvement** as OCFS does not have relevant quality data to support the existence of a well-functioning system to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child. This area was an area needing improvement in the CFSR R3 as the statewide assessment showed that foster and adoptive parents and relative caregivers are not always notified of court hearings. Additionally, information in the Round 3 CFSR Statewide Assessment indicated that although many foster and adoptive parents and relative caregivers feel engaged and heard in agency reviews, there are concerns regarding their ability to exercise their right to be heard in court hearings.

New York continues to see this as an area needing improvement as there is not a standardized way to notify caregivers of hearings or reviews and there is no administrative data available to efficiently monitor the notification. OCFS does monitor the notifications during PQI and VAR reviews, however, improvements need to be made on the collection of data to have an accurate understanding of performance.

Analysis

Required by NYS regulation, the foster parent caring for the child or any pre-adoptive parent or relative providing care for the child shall be provided with notice of any permanency hearing by the Office of Children and Family Services or the commissioner of social services with whom the child was placed. This foster parent, pre-adoptive parent or relative shall have the right to be heard at any such hearing, however, the failure of the foster parent, pre-adoptive parent, or relative caring for the child to appear at a permanency hearing shall constitute a waiver of the right to be heard and such failure to appear shall not cause a delay of the permanency hearing nor shall such failure to appear be a ground for the invalidation of any order issued by the court pursuant to this section.[9]

Fourteen days prior to the permanency hearing, foster parents, pre-adoptive parents and relatives caring for a child (among others) are provided with the PHR by the caseworker, which contains specific information regarding a child's well-being, including health, educational progress, and current placement; parenting time plans; parent status and progress; services offered to the parent and any barriers to the delivery of appropriate services; and reasonable efforts made by the LDSS to effectuate the permanency plan. Additionally, a case consultation is required in conjunction with the development of the child's PHR to seek input from the foster parents, pre-adoptive parents and relatives caring for a child. Compliance with this requirement

[9] NYS FCA §1089(b)(2) and FCA §355.5(6)

is monitored during routine case record reviews (see data quality review form below), but data is not collected to track this information over time.
In the case of Person in Need of Supervision (PINS) and Juvenile Delinquents (JDs), notice is provided in the form of a petition and summons. The right to be heard applies equally to foster parents, pre-adoptive parents, and relatives caring for a foster child.

Additionally, foster parents, pre-adoptive parents, and relatives caring for the child are encouraged to participate as members of each SPR, conducted at 60 and 90 days of a child's removal (or placement in foster care for PINS and juvenile delinquency) and every six months thereafter. Caseworkers provide a written invitation, which can be system generated if the county chooses, or done manually. Letters of invitation are required to be sent two weeks in advance of the SPR.

OCFS monitors the notification of permanency reviews and court hearings to foster, adoptive and relative foster parents during PQI reviews using the data quality review form and through surveys and focus groups.

Data Quality Review Form – Notification and Right to be Heard in Reviews

The Data Quality Review Form is completed for each foster case reviewed during the PQI review to monitor areas not specifically captured in the OSRI tool. In 2023 the form was used in collecting the following information in 108 of the 113 foster care cases reviewed. Reviewers found evidence of notice of court hearings and right to be heard in such hearings, through interviews with foster parents and in progress notes in 96 of the 97 applicable cases (99%).

Data Quality Review Form	Item Description	PQI Review 2023 (PUR Start Date 2022)
Question 8	Is there evidence that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?	100% (96/97)

Foster/adoptive Parent Stakeholder Survey and Focus Group

In November 2023, focus groups were held and a survey administered to foster and adoptive parents (see stakeholder involvement for more information). Foster/adoptive parents were asked if they were provided timely notification of service plan reviews and permanency hearings, and if the meetings were held at a time that they could attend. Additionally, the survey asked about notification of these reviews and their overall feelings about how they were engaged in these meetings and proceedings.

The responses varied from those who are provided timely notification and attend both the service plan reviews and permanency hearings to those who felt that the notification was not timely (notified the day of the service plan review) or the review or hearing is held during a time when they cannot attend, typically during work hours. The findings from the survey were similar to the findings from the focus group. Some highlights:

- 58% of respondents stated they are always or sometimes notified of court dates.
- 58% of respondents stated they always or sometimes and attend court dates.

- 33% stated they are sometimes asked for input from judges.
- 42% stated they always or sometimes feel engaged and involved in court hearings.

This data is in line with information gathered from the legal/judicial community, which reported in a survey:

- 58% stated they agree or somewhat agree that caregivers are provided opportunities to be heard in court or to provide information.
-

Conclusions and Continuous Quality Improvement Activities

Item 24 is rated as an **area needing improvement** as OCFS does not have relevant quality data to support the existence of a well-functioning system to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child.

There is a significant difference in information gathered from data quality reviews and survey responses when it comes to notification of reviews and hearings. This is an area for additional exploration and analysis to understand where the breakdown in the system may be.

C. Quality Assurance System

New York assessed the state's performance on this systemic factor using the state's performance on Item 25. New York believes the state ***is in substantial conformity*** with the systemic factor of the Quality Assurance System.

Item 25: Quality Assurance System

How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

Summary of Performance

New York State assesses Item 25 as a **strength**. This was an area needing improvement in the CFSR R3 as information in the statewide assessment showed that only some CQI elements were in place throughout the state at the time, and the lack of evaluation for implemented program improvement measures was identified as an area of particular concern. New York noted that although they had several case review processes in place across the state, processes were not consistently implemented in every county and improvement was needed to ensure consistency among case reviewers. Additionally, during CFSR R3 stakeholders identified the need to streamline reports used to assist in the assessment of strengths and needs for the purpose to improve efficiency and to enable the state to focus on key areas. Stakeholders also said that a lack of resources was a barrier to enhancements to CQI processes across the state.

Immediately following CFSR R3, New York has made a significant investment in CQI both at the state and local levels. As detailed in the analysis below, activities to improve the quality assurance system include:

- Development and implementation of PQI reviews of LDSS practice, based on the core tenets of CQI, implemented in LDSSs outside of NYC to assess, understand, and improve CPS, preventive services, and foster care practice. The review is centralized, with consistent training of case reviewers and includes a level of quality assurance during each case review by unit supervisors. This was the first time that NYS implemented a case review process to include an assessment of in-home cases outside of NYC. Each review collects consistent data and after each PQI review reports are streamlined with a focus on identifying practice strengths and areas for program improvement.

- PIPs have been evolving since the CFSR R3 to achieve greater consistency statewide, including in NYC. Throughout 2023, a workgroup was formed consisting of OCFS staff with varying roles. A revised process and form were developed to document required PIPs with consistent language adapted from the assessment tools. This has resulted in a more consistent process for assessing and documenting when sufficient progress has

been made to close a PIP. This updated process is being implemented by all six regional offices in 2024. The process has also been shared with the domestic violence and fatality units within OCFS to promote greater consistency between OCFS bureaus.

- Since 2016, allocation of resources has led to a 260% increase in CQI staff in the OCFS central office.

Analysis

Operating in the jurisdictions where the services included in the CFSP are provided

OCFS's QA and CQI system operating in all six regions of the state is aimed at improving the safety, permanency and well-being outcomes of children youth and families. The Department's CQI functions operate within the division of Child Welfare and Community Services and are co-administered by the Continuous Quality Improvement and Oversight and Monitoring Bureaus in partnership with the six regional offices (RO). Following the R3 CFSR, NY began the process of aligning existing quality assurance activities with the methodology The Children's Bureau utilizes during a federal CFSR review of state child welfare practice. After years of planning, which included input from a variety of stakeholders, NY began the implementation of the PQI review process in 2020 with all LDSSs outside of NYC. OCFS is currently in its second cycle of PQI reviews, and continues to work to align existing NYC and VA quality assurance activities with the methodology of the PQI reviews. In this description of NY's PQI process, areas where NYC and VA quality assurance differ will be explained and opportunities for continued improvement will be discussed.

Program Quality Improvement Reviews

The PQI review is a collaborative process with LDSSs modeled after the fundamentals of the evidence based CQI process and the CFSR. The core elements of the PQI review are identifying current performance, understanding factors that contribute to performance, designing and implementing strategies to address the underlying conditions, and monitoring effectiveness of the strategies. NYS has developed a methodology to identify a sample of child protective, foster care and in-home preventive service cases based upon the population of children and families receiving child welfare services in each county.

LDSS child welfare population size	CPS Investigations	Preventive/ Protective	Foster Care
Small	10	5	5
Medium	15	5	5
Large	15	5	7
X-Large	20	5	10

OCFS engages in a formal PQI review with each LDSS, except NYC, on a 3-year cycle, and the schedule ensures a sample of LDSS from each region are reviewed annually. The cases are selected at random, and the sample is determined by the size of the child welfare population in the district[10]. The NYC Regional Office reviews CPS Investigations annually, and preventive/protective cases on a 3-year cycle. Foster care reviews in NYC follow the VAR

[10] Comparable Groups were established by the Bureau of Research, Evaluation, and Performance Analytics at OCFS to permit meaningful comparison between counties with similar child welfare populations. In 2019, the comparable groups were revised by using 2016-2018 child welfare data.

process schedule as outlined below. As part of this engagement, OCFS reviews CPS data, placement data, and disproportionality rates prior to each PQI review to identify some possible strengths and possible performance concerns.

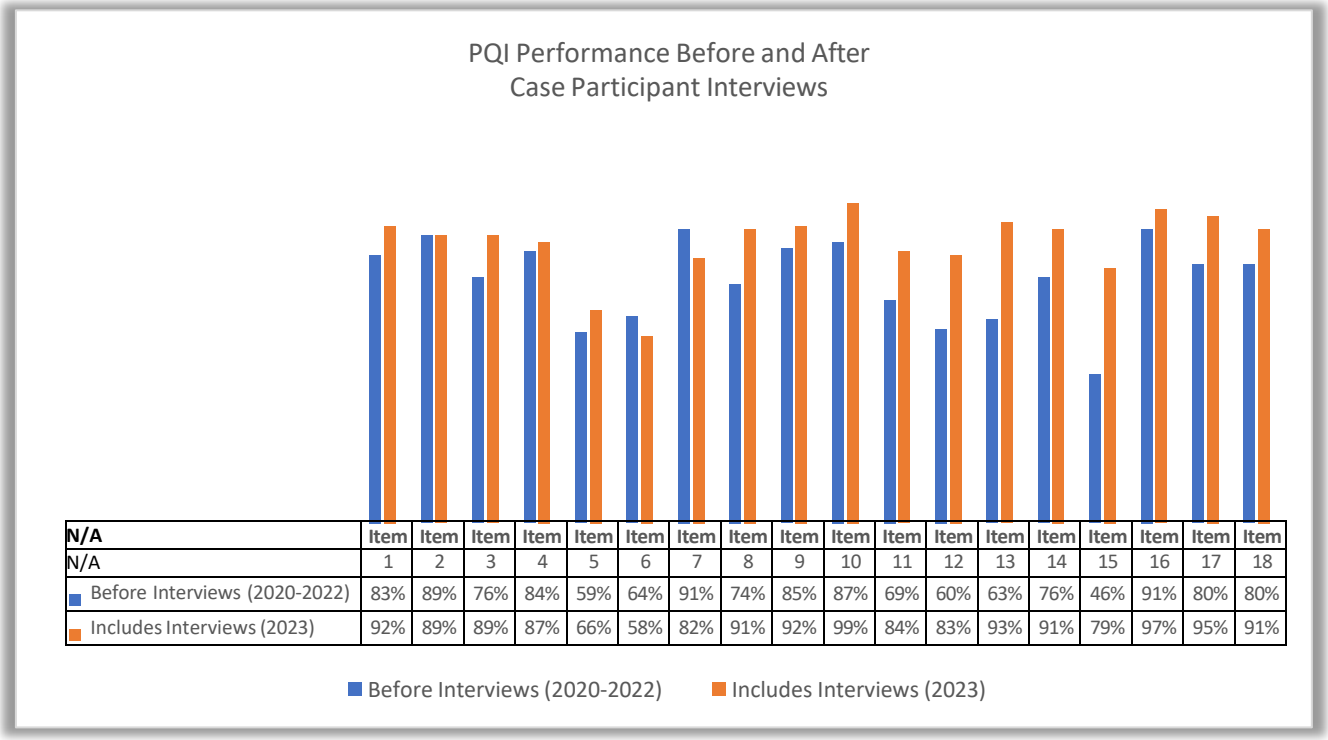
To begin this collaborative process, a planning meeting is held between the review team, regional office staff, and the LDSS to discuss trends, initiatives, and concerns the LDSS would like to explore. During this meeting, sample parameters and the review process are discussed to promote a clear understanding of what to expect. The LDSS has the opportunity to provide input into any objectives they hope to learn from the PQI review. This assists them in assessing progress on strategies they have implemented, identifying a specific practice area they may be concerned about, or advocating for more resources to serve families. OCFS identifies some case types that are included in every review, including cases that require a Plan of Safe Care, a safety plan, and those with informal out of home placements.

To the right is the PQI review schedule for 2023.

2023 PQI Cases Reviewed				
LDSS	**NYS Region**	**CPS**	**Prevention**	**Foster Care**
Dutchess	Westchester	15	5	7
Wayne	Rochester	15	5	5
Albany	Albany	20	5	10
Allegany	Buffalo	10	5	5
Wyoming	Buffalo	10	5	5
Oneida	Syracuse	20	5	10
Herkimer	Syracuse	15	5	5
Rockland	Westchester	10	5	7
Warren	Albany	15	5	5
Yates	Rochester	10	5	5
Westchester	Westchester	20	5	10
Genesee	Buffalo	15	5	5
Tioga	Syracuse	10	5	5
Chemung	Rochester	15	5	7
Greene	Albany	10	5	5
Chautauqua	Buffalo	15	5	7
Rensselaer	Albany	15	5	7
Cortland	Syracuse	10	5	5
New York City	NYC	187	91	50

From 2020-2022, PQI reviews were based solely on information gathered from documentation in the CONNECTIONS system of record and additional documents provided to OCFS by the LDSS. To better align with the CFSR and for a more comprehensive understanding of local practice and outcomes for children and families, interviews with case participants were added to the PQI preventive/protective and foster care reviews in 2023. As a result, performance is significantly better after the incorporation of interviews. Additionally, the interviews have been well received. LDSS administrators have expressed appreciation for the opportunity to have caseworkers and families participate in the review process.

Data from the 2023 PQI reviews is included throughout this assessment as NY believes it reflects a more comprehensive and accurate portrayal of current practice.



N/A	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item	Item
N/A	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Before Interviews (2020-2022)	83%	89%	76%	84%	59%	64%	91%	74%	85%	87%	69%	60%	63%	76%	46%	91%	80%	80%
Includes Interviews (2023)	92%	89%	89%	87%	66%	58%	82%	91%	92%	99%	84%	83%	93%	91%	79%	97%	95%	91%

Similar to the PQI review, quality assurance reviews of VA practice (VARs) are completed every three years for each voluntary agency licensed to provide foster care services in the state. The VAR review is managed and completed by regional office staff and consists of a target child case record review, interviews of key case participants, observation of programming, a health and safety review of congregate care settings, and a review of the foster/adoptive home certification record when applicable.

The case review sample size for a VAR is 10% of the population being served by the agency, up to 10 records. The schedule for VARs is maintained by the Voluntary Agency Licensing Unit and is verified each calendar year with regional offices. OCFS tracks the completion of VARs and confirm that all required documents have been uploaded into a central SharePoint site. As of February 2024, 96% of voluntary foster boarding home agencies and 100% of the congregate care agencies have had a completed VAR within the last 3 years.

OCFS embraces and supports a CQI culture throughout the agency. In addition to PQI Reviews, various quality assurance and CQI activities are performed by OCFS to evaluate quality of services and compliance with state policy and regulations in all jurisdictions in the state. Below is a sample of the QA/CQI activities that result in the identification of strengths and areas needing improvement for LDSSs, VAs, and other programs in the child welfare system.

OCFS Division	Quality Assurance/CQI Activity	Purpose	# of Reviews in 2023
Child Fatality Review Team (CFRT)	As required by statute, the CFRT conducts a case review of each CPS investigation of a child fatality and the family's previous involvement with the child welfare system in the three years prior to the fatality.	To review LDSS adherence to state regulation and policy. PIPs are issued for identified areas needing improvement. To identify systemic factors contributing to child fatalities.	200 reviews
Bureau of Domestic Violence (DV)	OCFS licenses and monitors all residential DV programs. OCFS conducts site visits to each residential program, which consist of interviews with staff, walk-through of the facility, a review of policies/procedures, and applicable case record reviews.	To monitor adherence to state/federal service provision requirements. PIPs are issued for identified areas needing improvement.	100% of the 92 DV programs had a site visit
Voluntary Agency Reviews (VAR)	OCFS licenses and monitors all voluntary foster care agencies. OCFS conducts site visits and case record reviews for all VAs.	To review VA adherence to state regulation and policy. PIPs are issued for identified areas needing improvement.	34 of 103 agencies Occur once every 3 years
Long Stayer Reviews (LSR)	As required by federal Family First Prevention Services Act (FFPSA), OCFS conducts a comprehensive review of every child's congregate care placement and plan for permanency.	To prioritize family-based foster care over residential care and to promote preventive interventions that keep children and youth safely with their parents/caretakers or if necessary, and whenever possible, with relatives or others in their community.	339 required and reviewed

Has standards to evaluate the quality of services

Practice and service standards from intake to permanency are defined through federal law, state law, and OCFS policy and procedures. These standards are compiled in the CPS, Prevention, and Foster Care Manuals, which are located on the OCFS website[11]. OCFS process and outcome measures are based on federal requirements, such as the federal CFSR data indicators, and state policy.

PQI case reviews are conducted using standardized instruments developed based on the standards described in law and policy. The CIT is an OCFS developed instrument and is based on NYS statue. It evaluates the collection of information to inform the assessment of risk and safety, the sufficiency of safety planning to control safety threats, and the accuracy of decisions related to substantiation of allegations, service provision, and case closure (see Appendix C). Preventive/protective services (in home) and foster care cases are evaluated using the OSRI to align with the standards that The Children's Bureau uses to assess practice of NYS. The PQI case record reviews are completed by a centralized team of dedicated case reviewers that receive training in child welfare practice from the OCFS Bureau of Training. Training on the use of the review instruments is provided through the CFSR portal and included a review of practice and procedure manuals.

Each regional office is responsible for conducting VARs every three years with agencies located in their region. When an agency has a presence in more than one region, efforts are made for the regional offices to collaborate on conducting one review across offices. This allows an

[11] https://ocfs.ny.gov

agency to have a comprehensive view of their overall practice. An orientation meeting is held with the VA, where OCFS provides an overview of the VAR process, and the case review tools to be used.

Currently, there are two different case review instruments used for the VARs, depending on the regional office conducting the review. However, there is a current workplan in place to transition all regional offices to the same instrument by 2025. Although different, both instruments were created by OCFS and evaluate compliance with NYS regulation and federal standards. The newer instrument incorporates the same elements as the federal OSRI instrument, as well as state specific items used to monitor compliance with NYS statute. It includes a practice guide to better support reviewer reliability. Regardless of which tool a regional office uses to complete a VAR, regional office staff are trained in their use by experienced staff and supervisors. Additionally, new reviewers participate in on-the-job training prior to partnering with an agency staff to complete a VAR review.

Identifies strengths and needs of the service delivery system

Using the PQI and VAR reviews is one-way OCFS identifies strengths and areas for improvement within the child welfare service delivery system. PQI review findings are detailed in a report issued to the LDSS, outline the areas of strength and areas needing improvement identified during the review. To assist LDSSs with understanding and organizing the strengths and needs within their system, the findings from PQI case reviews are grouped into three caseworker practice skill categories. Questions from the review instruments are organized within each of these areas and performance scores are provided on both a caseworker practice skill and review instrument question level.

Casework Practice Areas

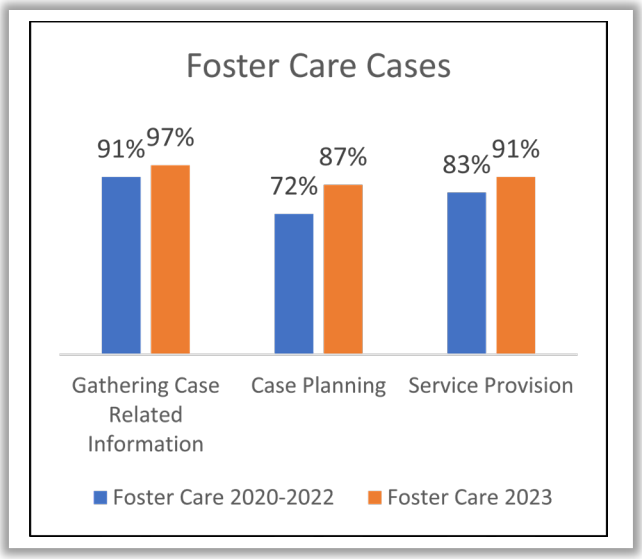
Gathering case related information – The agency gathers sufficient information from various sources to adequately understand child(ren) and families' strengths and needs.

Case planning – The agency, with concerted efforts to include children, parents, family, and community supports, develops an appropriate plan, consistent with case circumstances, to address safety, permanency, and well-being of children.

Service provision – When needed, the agency provided or made concerted efforts to provide, needed services to children, parents, family, and community supports.

Gathering case related information, which includes assessing family members for service needs, is the area LDSSs perform at a high level across the state. Case planning is the area that benefits the most from interviews. Family members can describe the involvement they have had in the development of their case plan. Most LDSSs have the lowest scores in services provision, which as noted in Item 29, is an area needing improvement for New York. Many families are placed on waitlists for services and service providers are struggling with workforce challenges.

The graphs below illustrate both the groupings of OSRI questions into practice areas and the change in performance from the 2020-2022 reviews without interviews and the 2023 reviews with interviews.



In foster care cases, 100% of LDSSs have strengths in gathering information, as written case plans (FASPs) and permanency hearing reports are required and document the goals of the families. However, many districts need improvement in the area of case planning, as timely and appropriate goal setting is directly impacted by the courts and practice varies by judge. Placement changes and placement with siblings are another area many LDSS are challenged by. Both require the availability of trained and dedicated foster parents to support the needs of the children in care. By grouping items this way, New York can help LDSSs focus improvement efforts in targeted areas.

VAR reviews also result in a report to the VA that identifies strengths and areas needing improvement in practice identified during the review. When required performance improvement is identified, the regional office issues a PIP which is monitored quarterly. The VAR workgroup is currently building upon the structure of the PQI review to finalize a review tool which imbeds areas assessed in the OSRI and NYS requirements. The statewide use of the revised tool will allow for aggregate data to be produced to identify strengths and needs of across all VAs in the state which is currently not available.

PIP Process

At the LDSS level, findings from PQI and VAR reviews are analyzed locally, in collaboration with the regional office, in a PIP development process modeled after the CFSR PIP development process. Through this collaborative process, root causes impacting performance are identified and strategies to improve practice are developed. A plan to monitor improvement and evaluate effectiveness of the strategies are also identified. There is a standard PIP template used by every regional office where a required action has been identified. When a practice area falls below 75% compliance, a PIP is required.

The regional offices are located within the six regions of New York and are comprised of over 150 employees who work directly with LDSSs and VAs to provide ongoing programmatic oversight and technical assistance. When PIP items are identified across program areas, they are compiled by the regional office into a LDSS or VA Master PIP and it is monitored through quarterly site visits, interviews with children and families, and case record reviews. Strategies are identified that could impact practice, but also help to address the underlying factors. Strategies could be locally led such as developing an internal quality assurance process, or a strategy could include OCFS assisting an agency implement Administrative Case Conferences which are comprehensive, collaborative reviews of open cases with the goal of building the critical thinking skills of caseworkers.

At the state level, strengths and areas needing improvement from individual PQI reviews are pulled together and findings are analyzed and discussed quarterly by the PQI executive team. This team is made up of OCFS staff representing policy, training, regional offices, CQI, and senior administration, where recommendations for practice and policy updates are made to leadership. Strengths in practice are discussed and ways to leverage what works well and share those practices across the state are also discussed.

In 2023, of the 19 LDSSs with a PQI review, all resulted in a local PIP with the number of items to be addressed ranging from three to nine depending on the findings from the PQI review. The most common findings were:

- Improvement in casework with families where domestic violence is present
- Involving fathers in case planning and services
- Achieving permanency timely

Where areas are identified that a state strategy may be needed, sub committees are developed. Subcommittees include staff with different roles from home office, regional offices, and other state or local stakeholders when appropriate. Various sub committees and strategies for statewide improvement born out of the work of this team include:

- Working with families impacted by domestic violence has been identified as an area many LDSS need support with. To support this work, OCFS adopted the Safe and Together Model and supports LDSSs with caseworker training and technical assistance. When specific technical assistance is identified by a regional office, the Bureau of Domestic Violence will provide case consultation and other supports as needed. Additionally, domestic violence casework practice is highlighted in every PQI review and report. To date, 20 LDSSs have received training in the model with seven more to be trained in 2024.

- Grand Rounds Webinars: A strategy developed in 2021 to build casework competencies in challenging areas of case practice through an analysis of one case that demonstrates positive practice and outcomes. Topics for Grand Rounds are generated by fatality reviews, PQI reviews, and submissions from regional office staff based on their reviews of case practice and identification of areas needing support. Quarterly webinars are offered to all child welfare staff in the state and have highlighted: domestic violence, engaging fathers, supporting kinship foster care, and supporting families with substance use disorder. These webinars are facilitated by our training partners at the Professional Development Program of the SUNY Albany Research Foundation and subject matter experts.

- PIP Workgroup: An identification of inconsistent practice across regional offices in the issuance, monitoring and closure of local PIP items was identified during the implementation of the PQI reviews. To address this, a workgroup with representation from all regional offices and CQI staff was developed in 2022. This workgroup developed standardized letter templates to be used when a PIP is issued, approved, and when all PIP activities have been completed. The workgroup also developed written process guidelines to support consistent implementation of practice across regional offices.

- VAR workgroup: The PQI executive team recognized the need to have and analyze performance data from VAR reviews in the same way it is accessible for LDSS

performance from PQI reviews. This workgroup's goal is to develop statewide consistency with VARs and accessible statewide data by 2025.

Provides relevant reports

PQI reviews, VARs, and child fatality reviews all result in a report that identifies practice strengths and areas needing improvement. Additionally, after a PQI review, the review instruments used to evaluate each record, and the reviewers detailed comments explaining ratings, are provided to the LDSS to assist with a root cause analysis. In September 2022, the administrators of the 36 LDSSs that had completed a PQI review were surveyed. Of those who responded, 87% indicated that the reports and supporting documentation provided during the PQI review were used during the PIP development process. OCFS has a workgroup that is actively working towards replicating this model with VAs during their scheduled reviews. When findings are identified during a child fatality review, the regional office works with the LDSS to assess whether new strategies need to be developed or existing strategies need to be modified to address the practice concerns.

OCFS also produces administrative data reports for LDSSs and VAs for internal monitoring and quality assurance activities. Published on the OCFS website[12] are numerous district level data reports including CFSR Outcome Indicator data, LDSS Monitoring and Assessment Profiles (MAPS), a Disparity Rate Dashboard, and Foster Home Data Packets. Additionally, OCFS issues an annual New York State Child Fatality Report which provides administrative data and a summary of noted trends, concerns, recommended prevention strategies, and action plans. The OCFS Data Warehouse also provides access to various CPS and Child Welfare data points and is available state and LDSS staff with appropriate permissions.

An example of a report produced and shared monthly is the CPS performance report. This is provided to LDSSs and includes a measure of timely closure of investigations based on the sixty-day regulatory timeframe, the percent of open investigations that are overdue, and the percent of workers in the LDSS with 15 or more open CPS reports and provides statewide comparisons. A graph with a year look back of an LDSSs performance is included in the PQI report to draw attention to a district's performance over time and the relationship of these metrics to each other. For example, a LDSS with a very high percent of timely safety assessments and high number of caseworkers with large caseloads may indicate the LDSS has a good business process for completing safety assessments timely despite high caseloads. This strength can be built upon in other areas of the LDSSs practice and the information can support regional office engagement with the LDSSs on targeted strategies including improving business processes, recruiting and retaining staff, and sharing lessons learned across districts. A sample report can be seen in Appendix D.

Additional reports to support improvement in data quality are available to LDSSs in the OCFS Data Warehouse.

Evaluates implemented program improvement measures

[12] https://ocfs.ny.gov

Local Program Improvement Plans

When local PIPs are developed, evaluation methods are identified and documented as part of the plan. These methods, which are designed to evaluate effectiveness of implemented strategies, can include additional case reviews, tracking and monitoring of identified data elements, surveys or other methods identified by the LDSS, VA or OCFS. Regional staff complete quarterly site visits with all LDSSs and VAs, which includes a review of current PIP implementation progress, identification of possible barriers, and discussion of strategy effectiveness. PIPs can be continued, modified or closed based on progress towards the previously identified PIP measurement plan. New strategies are developed as needed, particularly when a previous strategy is determined to not be improving case practice. OCFS continues to support LDSSs and VAs in implementing their own CQI system, encouraging the use of the OSRI tool as part of their assessment process.

As PQI reviews occur on a three-year cycle, many improvement activities are monitored during those three years and evaluated in the follow up review. As of January 2024, four LDSSs had both a Cycle 1 and Cycle 2 PQI review and the following improvement is noted:

- A total of 21 PIP items remained active from Cycle 1
- 18 PIP items (86%) were closed after the Cycle 2 Review
- 14 new PIP items were identified

State Strategies

Effectiveness of state improvement strategies are monitored through training evaluation surveys, tracking of administrative data, attendance at webinars, stakeholder surveys, and other methods identified at the time of strategy development. Some examples are:

- Each Grand Rounds Webinar concludes with a survey and analysis of these surveys have resulted in new training topics, modification of the training structure, and adjustments to the delivery methods.

- The PIP workgroup has produced a variety of deliverables that support the group's intentions. This group has developed standardized PIP letters, a standard PIP form, and a standardized procedures for issuing, monitoring, and closing PIPs. The documents and processes are currently being piloted and will be evaluated quarterly until a full implementation occurs.

- As new policies and procedures are developed, OCFS is committed to identifying evaluation methods and targets prior to implementation so appropriate infrastructure is built to have the resources for evaluation.

- Each year, the PQI review process is evaluated through input from OCFS and LDSS staff. This is done through surveys and discussion during the PQI Executive Team meeting. Based upon the feedback, adjustments are made as necessary. For example, at the end of 2022, interviews were added to in-home and foster care reviews, Additionally, the CPS case review instrument was modified at the end of Cycle 1 to

provide districts more detailed information on performance to assist them with root cause analysis. This process is ongoing.

Conclusions and Recommendations

New York assesses Item 25 as a **strength**. Significant investments have been made in developing a robust continuous quality improvement system with consistent quality assurance practices that drive program improvement and improved outcomes for children and families. Some strengths include:

- New York develops and makes available numerous process and outcome data reports to assist internal and external decision makers.
- New York's PQI process is aligned with the CFSR and carried out by a dedicated team of trained case record reviewers.
- New York uses data to evaluate program improvement efforts and monitor and track performance.
- New York continues to make adjustments and revisions to improve the quality improvement system through surveys, feedback during leadership forums, discussions during quarterly meetings with local districts and voluntary agencies and review of data.

Recommendations and opportunities for ongoing improvement:

- Continue to evaluate the PQI process annually and work towards full compliance with the CFSR state led review standards.
- Build on the strengths of the PQI review to improve statewide consistency in the VAR reviews.
- Develop permanency outcome focused data reports for LDSSs to support local CQI efforts.
- Continue to more broadly support LDSSs and VAs in implementing an internal CQI process.

D. Staff and Provider Training

New York assessed the state's performance on this systemic factor using the state's performance on Items 26-28. New York believes the state ***is not in substantial compliance*** with the systemic factor of staff and provider training.

Item 26: Initial Staff Training

How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the CFSP so that*:*

- Staff receive training in accordance with the established curriculum and timeframes for the provision of initial training; and
- The system demonstrates how well the initial training addresses basic skills and knowledge needed by staff to carry out their duties?

Summary of Performance

New York State assesses Item 26 an **area needing improvement**. This area was also an area needing improvement in the CFSR R3 as New York does not require all caseworkers to attend initial training. Since then, New York has made a significant investment in initial staff training at the state and local levels. Since the last review New York has transformed child welfare training landscape, including opening state of the art training centers focused on building skill competency and designing onboarding programs dedicated to improving consistency and general competency. This transition has been met by many obstacles for the state and local agencies. The following analysis and stakeholder feedback will demonstrate the challenges and the development New York State is experiencing.

Background

The New York State Office of Children and Family Services (OCFS) has the overall responsibility for the provision and oversight of workforce and professional development programs that support the staff of the public human services systems to effect proper and efficient administration of the programs of the OCFS. Training goals are accomplished through a combination of direct training provided by state employees, those administered by OCFS under Memoranda of Understanding (MOU) with educational institutions, and contracts with community-based training providers.

In addition to mandated training, staff development needs are met through a variety of workforce development projects that enhance and build skills necessary to support the agency's mission. Within OCFS, the Bureau of Training and Development (BTD) oversees and coordinates the necessary state-administered training functions through contract monitoring, curriculum development and direct training.

Analysis

While New York State agrees with the importance of training all contracted/non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent

living services, the state mandates for training do not coincide. Currently the only mandate in statue is related to Child Protective Services[13].

> (a) Each child protective service worker, including supervisors, must satisfactorily complete a basic training program in child protective services within the first three months of their employment in the child protective service. Such a program must be approved by OCFS and must focus on the skills, knowledge, and attitudes essential to working in the child protective service. Such training program must include, but need not be limited to: basic training in the principles and techniques of child protective service investigation, including relationships with other investigative bodies; legal issues in child protective service matters; diagnostic assessment of child abuse and maltreatment cases; methods of remediation, treatment and prevention of child abuse and maltreatment; and case management and planning of child protective services cases, including the relationship of the child protective service issues to permanency planning for children who remain at home or who are in out-of-home care

Initial Training Requirements

The training system in New York is split into two parts: **New York City (NYC)** consisting of the five boroughs, which are serviced by Administration for Children Services (ACS) and its training system; and what is referred to as the **rest of the state (ROS)** consisting of the other 58 Counties, serviced by OCFS Bureau of Training and Development (BTD). Caseworkers as defined by this systemic factor are employees of County Local Districts of Social Services (LDSS) and Voluntary Agencies (VAs) contracted to work in differing capacities. All caseworkers work in one system of record called CONNECTIONS and are identified by role in this system.

NYC

- **CPS Practice Core:** ACS provides a mandated 41-day CPS Practice Core to all newly hired CPS with 3 months of hire. During this training, new CPS workers learn the skills and expectations of child protection investigations including fundamentals of safety and risk assessment; family engagement; engagement of collaterals; fundamentals of safety interventions; child welfare legal process and many other aspects of gathering relevant information and completing required documentation according to standards. Learners participate in practice scenarios, simulations, and structured on-the-job experiences to learn more about their responsibilities and roles in the Child Welfare system.

  During CPS training, trainees are assigned to a training unit where on-the-job learning (OJL) is incorporated into the onboarding training. Trainees shadow CPS staff on calls, home visits, conferences, etc. When they return to the classroom, they discuss their experiences. Additionally, OCFS regional office staff provide training/technical assistance as needed to supplement scheduled training sessions.

- **Prevention**: ACS requires an initial training for all newly hired direct-service staff in provider agencies contracted with ACS to provide prevention family support services. The training includes the foundational knowledge and skills necessary for new staff to begin their work. This virtual learning program consists of a combination of eLearning

[13] 18NYCRR 432.2(e)(5)(ii)(a)

courses and virtual, instructor-led sessions. It is delivered in three phases. Participants learn skills on how to assess abuse and maltreatment, safety and Risk, Motivational Interviewing as a tool to engage and gather information and how to effectively document their interactions and assessments. Learners also learn about the history of child welfare and are exposed to many different topic areas that they will face in their practice such as Understanding and Undoing Implicit bias, Intimate Partner Violence, Mental Health Principles, Understanding Trauma, Conducting Family team Conferences, assessing for asthma symptoms, medicine safety, and child support resources. See Appendix E for the training structure and requirements.

ACS continuously monitors its continuum of services to better meet the needs of children and families in New York City. Findings from the Prevention Family Experience Survey is used to inform program and practice improvements. One example of how survey findings have been used to improve service delivery is the partnership between the Public Policy Lab, ACS' Division of Prevention Services, and the NYC Department of Health and Mental Hygiene Bureau of Children, Youth, and Families, which produced a set of training resources and conducted a series of provider onboarding sessions to integrate intake, feedback, and referral guides into frontline staff workflows and improve the service experience for families, youth, and frontline staff members

- **Foster Care:** ACS offers but does not yet require its Foundational Foster Care Onboarding Program for newly hired case planners, supervisors, and managers. The training program includes foundational knowledge and skills necessary to begin their work in Foster Care services. This virtual course consists of a combination of eLearning courses and virtual, instructor-led training. This learning program is delivered in three phases. Participants learn skills on how to assess abuse and maltreatment, safety and Risk, Motivational Interviewing as a tool to engage and gather information and how to effectively document their interactions and assessments. Learners also learn about the history of child welfare and are exposed to many different topic areas that they will face in their practice such as Understanding and Undoing Implicit bias, Intimate Partner Violence, Mental Health Principles, Understanding Trauma, Conducting Family team Conferences, assessing for asthma symptoms, medicine safety, and child support resources. ACS is currently developing a new mandated onboarding course for all foster care direct-service staff. ACS-contracted foster care agencies are required to provide their own training for newly hired foster care staff, which ACS plans to replace to institute a standard universal training program for the system. See Appendix F for the training structure and requirements.

Rest of State

- **Child Welfare Foundations Program (CWFP)-** BTD provides a six-week required prerequisite course for child protective workers and is open to foster, preventive caseworkers, and voluntary agency workers as many LDSSs cross train their caseworkers, so caseworkers with other functional roles, such as preventive, foster care and adoption services who fulfill child protective duties are participating in the CWFP training as well. This course provides an overview of the Child Welfare Practice Model, foundational information about the New York State child welfare structure and process including topics like assessing safety and risk, making safety decisions, legal process within child welfare, interviewing and engagement skills as well as other skills practice components. See Appendix G for the training structure and requirements.

This six-week course is held over a 10-week period allowing for on-the-job learning (OJL) in the trainees LDSS or VA. The structure and objectives of the OJL are set by BTD, however each LDSS and VA follows internal policies and procedures with their employees with regard to job shadowing, case assignments and local training requirements.

- **Child Protective Services Response Training (CPSRT)-** Upon completion of the CWFP training, staff who are assigned as a child protective services worker or will have on call responsibilities in investigations, are required to attend. This eight-day training is the core training required by law for CPS Investigative and Family Assessment Response (FAR) staff. This course builds on safety and risk and critical thinking skills acquired via the foundation courses and applying them to CPS Response. It focuses on the principles and techniques of investigation, determination of allegations, relationships with other investigative bodies, tasks in the CPS Response, and legal issues.

- **Supervisory Training-** BTD provides LDSS supervisors and administrators a supervisory training to gain and build supervisory skills through a multi-component training, coaching, and consultation system to implement the "Keys to Excellence in Your Supervision (KEYS)" model of supervision. This program focuses on the needs of new supervisors and the competencies they most need within the first six months of assuming a supervisory position. Transitioning from worker to supervisor, the process of supervision, and case consultation are some topics included in the program. In addition, "KEYS Core Training" provides new supervisors with the knowledge and skills necessary to effectively support, develop, and supervise child-centered, family-based, and strengths-based child welfare practice.

Development of Training Content

OCFS began restructuring the training system to address the issue of an ever-increasing demand for caseworker and voluntary agency training in 2017 and continues to date. The increase was caused, in large part, by the high turnover rate of workers in the human services field, which continues to this day and has been exacerbated by the global pandemic, COVID-19 and its continued aftermath. The goals of the restructuring and transformation of the training system were, and continue to be, converting existing curricula to competency-based training, building capacity to train more staff, and maximizing the resources entrusted to us.
OCFS made progress in converting curricula to be more competency-based in 2017, 2018, and 2019, however, forward progress was halted in 2020 through the first half of 2022 as we dealt with the issues caused by COVID-19. Given our state responsibility to train local child protective caseworkers, we needed to immediately pivot our focus on how to continue to provide this critical training in a virtual world. We converted the full classroom training experience to a fully virtual one focused on imparting the basic knowledge needed by a caseworker to effectively do their work.

In 2021 an in-person skills demonstration was developed that affords staff the opportunity to practice the skills that they only learned about on the virtual platform. The skills demonstration is a required component for all caseworkers that complete the child protective service training on the virtual platform. These sessions will continue to be offered through 2024 in person at the Human Services Training Center (HSTC).

In 2022, we resumed in-person classroom training for local child protective caseworkers while simultaneously offering the virtual training due to workforce travel issues. Additionally, a

workgroup was established in to review the curriculum for Child Welfare Foundations Program to determine the best ways to incorporate the benefits of the virtual platform while maintaining a competency-based approach. The goal for 2022-2023 was to develop and implement a hybrid, in person and virtual, construct that would meet the challenges of the workforce, i.e., reduce the amount of travel required for training and using the in-person time to focus on skill building. At the request of the OCFS Commissioner and the LDSSs, training continues to be offered both in person and on the virtual platform to address the workforce issues.

Pre-COVID-19, we had met our goal of expanding the number of training slots to meet the demand for the training by the counties. We were at the point of beginning to cancel some classes due to low enrollment as we had exceeded the demand. We have continued to meet demand virtually throughout COVID-19, and as previously stated, continue to meet the demand through a combination of in-person and virtual trainings.

Each course provided to child welfare staff has a pre-test administered before the course and a and post-test administered immediately following the course to evaluate learning. The evaluation questions are based on the learning objectives of each module. The results of these evaluations are taken into consideration when curriculum is developed or modified. The table below displays the pre and post-test data collected in 2022.

Course	Pre-Test%	Post Test%	% Change
Child Welfare Foundations Program	53%	88%	35%
COVID-19 Webex Child Welfare Foundations Program	53%	86%	33%
Child Protective Services Response Training	47%	66%	19%
COVID-19 Webex: CPSRT	48%	64%	16%

Training Data Collection

There are two Learning Management Systems in New York, the Human Services Learning Center (HSLC) Management System, and Cornerstone, used by ACS in NYC to manage the NYC learning management, however HLSC is considered the permanent training record for the state. All courses offered to caseworkers in New York State have a pre-test and a post-test to track learning objectives.
Rest of State

The number of CPS personnel from counties outside NYC completing CPS trainings each year is tracked in an administrative database managed by OCFS. This database can be used to produce annual statistics on the number of CPS workers who attended training, number of classes attended and number of class hours, and average hours of training per worker, sample table at end of this report. Each worker also has a training profile in the HSLC data base.

NYC

ACS used its Cornerstone learning management system to track training completion of onboarding programs by new CPS and new contract provider agency direct service staff. The ACS – Workforce Institute tracks completion of trainings through Cornerstone and notifies VAs through reports.

Oversight and Compliance of Initial Training

As CPS personnel are employees of a county or of NYC, OCFS does not have direct access to those workers' training records and does not monitor if the training regulation is met. Information on the specific education level, demographics, and workforce qualifications beyond those required by state law must therefore be obtained directly from each local department of social service (LDSS). As noted above, by state requirements, each CPS caseworker statewide must satisfy minimum educational and training qualifications.

Tracking of training and assuring training compliance is a role defined in every LDSS and VA typically known as a staff development coordinator or training coordinator. Staff in these roles meet quarterly with the OCFS Bureau of Training to review training curriculum, discuss training needs and availability of training as well as new initiatives.

When OCFS completes a Voluntary Agency Review (VAR), the agency provides OCFS with a list of current employees and OCFS chooses a random sample of 10 employees to review training records. Compliance with the VAs policies for an employee initial orientation and ongoing training, as well as restraint training if the VA has a restraint policy is reviewed. If OCFS finds the VA cannot demonstrate staff have received required training, the VA must complete a program improvement plan to address the identified concern.

OCFS does not check the training records of LDSS staff and identifies this as a gap in its oversight responsibilities. OCFS has identified the local staff development coordinators as the stakeholders to engage with to understand local training oversight processes and develop a state oversight process.

Rest of State Training Compliance

New York State can gather information about training compliance from three separate locations since each LDSS is responsible for hiring and training their employees. New York State used its CONNECTIONS casework system, and isolated new profiles created in 2022 as all caseworkers assigned cases would be in this system.

Using the CONNECTIONS casework system and isolating new profiles created in 2022, OCFS can identify 1,344 new profiles created in calendar year 2022 in Rest of State LDSSs. As all caseworkers must utilize CONNECTIONS, OCFS if using this metric to estimate the number of new staff hired in 2022. Each profile is associated with a unique user and gives information on the employing agency, a category of work, role, when the profile was created, and when the first assignment was received. It should be noted that the assignment of category and role is not a consistent process throughout the state, making it difficult to know exactly how many CPS, foster care and preventive workers were hired in 2022. The table to the right is a breakdown of the roles in this data set.

LDSS CONNECTIONS Role	# of Employees
Administrator	2
Adoption Services	1
Caseworker	285
Child Protective Services	75
Conversion	712
Foster Care Services	104
Home Finder	12
Legal/Court	11
Manager	3
Nurse	5
Parent Advocate/Mentor	2
Preventive Services	73
Senior Caseworker	2
Social Worker/Clinician	44
Supervisor	9
Supervisor II	1
Trainee	3
Total	**1344**

Based on training records from the Human Services Learning Center (HSLC) Management System, there is evidence of:

- 771 employees attended at least one session of Child Welfare Foundations Program (CWFP) in 2023.
- 650 employees attended at least one session of Child Protective Services Response Training (CPSRT) in 2023.
- 98 employees attended at least one session of the initial supervisor training, KEYS Core Training

OCFS acknowledges that to ensure all staff have required training, a process must be developed to be able to accurately identify all new employees, their role, and the training they have attended. Without this information, or a robust monitoring plan, NYS cannot say definitively all staff outside NYC are trained.

VAs are not required to access the OCFS trainings and do so at the low rate of 5.5%. VAs are required to train their caseworkers and do so within their own training departments or through contracted trainers. Training records are reviewed during VARs which were referenced above. Aggregate data on compliance with training requirements in VAs is not available. However, when agencies are found to be non-compliant with training requirements, a PIP is issued and monitored by the regional office. The collection of aggregate data on Voluntary Agency training compliance is an area OCFS identifies as needing improvement.

NYC

NYC used its Cornerstone learning management system to track training completion of onboarding programs by new CPS and new contract provider agency direct service staff. Numbers are below. Note that numbers for CPS are based on CY 2022 while numbers for contract provider agencies are based on the NYC FY 2022 (July 1, 2021 – June 30, 2022).

Training Course	Target Population	# Staff Required to Attend	# Trained	Rate of Compliance
NYC Child Protective Specialist Practice Core	New Caseworkers serving as CPS or CPS on-call	555	555	100%
NYC Interim Prevention New Worker Training	Required for New Prevention Direct Service Staff	370	244	66%
NYC Foundational Foster Care Onboarding Program	New Foster Care Case Planners (not required)	N/A – not required	67	N/A – not required

As with ROS, NYC CPS caseworkers are trained with 100% compliance as required by NYS regulation. Training for Prevention staff is required in NYC and the compliance rate in 2022 was 66%. Foster care training by ACS is not required, and though few caseworkers take this training, it does not reflect specific agency provided training caseworkers attend. In line with ROS, NYC Regional Offices reviews training records during Voluntary Agency Reviews and when agencies are found to be non-compliant with training requires a Program Improvement Plan is issues and monitored by the Regional Office.

Process for Case Assignment

Case assigning is done by each LDSS and VA based on internal policies that must meet the state requirement of “within the first three months employment.”

Stakeholder Input

Many focus groups engaged people from differing perspectives to assess how well the initial training address the basic skills and knowledge needed by staff to carry out their duties.

- The tribal leaders shared that training for caseworkers is difficult since it is being prioritized by the state to be in Albany and not always accessible for far away counties.

- The majority (56%) of the Directors of Service (n=25) surveyed agreed that the training addressed the basic skills and knowledge needed to carry out their duties, while 28% disagreed and 16 were neutral. The following were some of the comments on how the training could be improved:

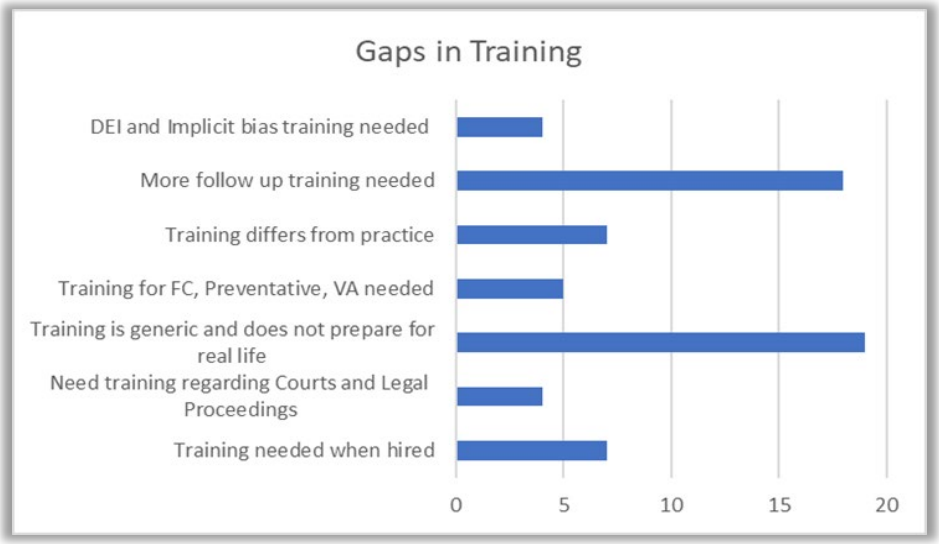
    - The topics of minimum degree of care, safety/risk, and critical thinking are all missed.
    - The basic training is very CPS focused. Gaps exist in the legal components for other areas.
    - More has been added but more is still needed regarding trauma-informed care.
    - Need more focus on child interviews and critical thinking skills.

- Caseworkers were surveyed and they were asked: Caseworkers are provided an initial training program that addresses basic skills and knowledge needed to carry out their duties.

- Of the 126 surveyed 82 (65%) agreed or strongly agreed with this statement, 18 (14%) disagreed or strongly disagreed and 26 (21%) neither agreed nor disagreed.

- When parents(n=17) were interviewed they were asked about certain skills taught in the basic programs. They were asked “The caseworker that engaged me and my family had been sufficiently trained to help me and my family?”

    - 59% agreed with this statement, 29% disagreed and 12% provided a neutral answer.



The “Gaps in Training” graph is a summary of the training gaps identified by the caseworker group.

To obtain feedback from trainees, the OCFS Bureau of Training and Development (BTD) measures project and course effectiveness to ensure resources are appropriately allocated. The evaluation is conducted under the framework of the Kirkpatrick 4-level model, known as "The Four Levels of Learning Evaluation”.

The two major initial upstate training programs outlined above are evaluated using two of the four levels: (1) Reaction, and (2) Learning. Results are reported by the OCFS training partners

quarterly, summarized annually and used to inform curriculum development and modification of existing trainings.

Level 1 uses the OCFS Participant Reaction Form below. The reaction tables are based on a scale with one being strongly disagree and five being strongly agree. The level 1 evaluations are given after each module.

The level 2 evaluation/ learning is based on a pretest/ posttest that is administered before and after the course. The evaluation questions are based on the learning objectives of each module at Level 2 by a Pre-/Post-Test of trainee knowledge.

Level 1 – Reaction
This level of evaluation measures how the participants reacted to the training – i.e., what they thought about the quality of the training program. This is the most basic level of evaluation; it measures participant satisfaction with the training.

Level 2 – Learning
The evaluation of learning measures the extent to which participants acquired knowledge or improved skills as a result of the training program.

Level 3 – Behavior
The evaluation of behavior examines the extent to which improvement in job performance occurred because the participant attended the training program. This level of evaluation is designed to measure transfer of learning to the workplace.

Level 4 – Results
The fourth level of evaluation assesses the organizational outcomes that occurred because of the training program.

The following table is created by HSLC for CWFP

Question	Average	Total Answered
I would recommend this course to others.	4.35	5416
The content of this training program was relevant to my job duties.	4.5	5443
The course supported my learning.	4.43	5443
The delivery method (e.g., classroom, iLinc, webinar, webcast) was effective for this training content.	4.3	5440
The learning objectives were achieved.	4.45	5443
The learning objectives were clearly stated.	4.49	5444
The materials reinforced my understanding of the content.	4.43	5443
Trainer(s)/Presenter(s) taught effectively.	4.46	5442
Trainer(s)/Presenter(s) were knowledgeable about the content.	4.52	5443
Trainer(s)/Presenter(s) were well prepared.	4.51	5444

The following table is created by the HSLC system for CPSRT.

Question	Average	Total Answered
I would recommend this course to others.	4.26	2593
The content of this training program was relevant to my job duties.	4.4	2594

The course supported my learning.	4.34	2594
The delivery method (e.g., classroom, iLinc, webinar, webcast) was effective for this training content.	4.15	2594
The learning objectives were achieved.	4.37	2594
The learning objectives were clearly stated.	4.41	2594
The materials reinforced my understanding of the content.	4.35	2594
Trainer(s)/Presenter(s) taught effectively.	4.37	2594
Trainer(s)/Presenter(s) were knowledgeable about the content.	4.44	2594
Trainer(s)/Presenter(s) were well prepared.	4.43	2594

Conclusions and Continuous Quality Improvement Activities

Initial staff training continues to be an area New York is working on improving. There have been many transitions since the last CFSR. New York has established the Human Services Training Center, has developed a new training vendor, transitioning all initial training products into virtual during COVID and working with the districts on assuring the staff has the skills to carry out their initial duties of casework. NYS wants to ensure the infrastructure is solid before mandating all caseworkers to attend the program. OCFS has plans to continue to develop the training system to serve all caseworkers and is currently assessing the resources needed.

OCFS could improve assessing training by including a training review in its oversight and monitoring plan. This review would check the training history of newly hired workers and ensure they were adequately trained before case assignment. OCFS could also establish a process to do an administrative review of new caseworkers and supervisors. Contract agency initial training programs should be assessed to a set of standards.

Regarding the question: does the training address basic skills and knowledge needed to carry out their duties? It appears the child protective services training meets the basic needs of child protective services workers to carry out their duties. Feedback shows job specific training for Preventive and Foster Care workers needs to be developed.

Item 27: Ongoing Staff Training

How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

Summary of Performance

NYS assesses Item 27 as an **area needing improvement**. This item was an area in need of improvement in CFSR R3 as New York did not have ongoing training requirements for non-CPS staff. While New York reported that Local Department of Social Services (LDSS) Staff Development Coordinators are expected to track compliance with the ongoing training requirements for CPS workers and supervisors, no data regarding compliance was available.

NYS continues to mandate on-going training for CPS staff. Both CPS caseworkers and CPS supervisors are required to satisfactorily complete the NYS approved program and meet the annual in-service training requirements. However, NYS does not have the same requirement for all child welfare staff. OCFS does not have a consistent way to determine the number of non-CPS staff hired by districts and voluntary agencies but does provide an abundance of training.

Analysis

Ongoing Training Requirements

NYS regulation[14] includes the following language specific to ongoing training for LDSS staff within Child Protective Services (CPS) and Child Protective Services Supervisors.

> (b) All persons employed by a child protective service on or after December 1, 2006, must satisfactorily complete six hours of annual in-service training approved by OCFS, beginning in their second year of employment. Pursuant to section 421(5) of the Social Services Law, such annual in-service training shall include, but not be limited to: review of the protocols for identification and investigation of child abuse and maltreatment; any developments in legal, treatment, and prevention issues in child protection; and review and analysis of field experiences of child protective workers.
>
> (c) All persons hired or assigned to be a supervisor by a child protective service on or after April 1, 1986, must satisfactorily complete a course in the fundamentals of supervising and managing child protective practice approved by OCFS, within three months of their employment as a supervisor. Any person employed as a child protective supervisor who has not completed such a course by the effective date of this regulation must satisfactorily complete such a course no later than three months following the effective date of this regulation. The content of such training shall be determined by OCFS, in compliance with paragraph (c) of subdivision 5 of section 421 of the Social Services Law. Additionally, all such supervisors must attend the core training required for child protective services caseworkers, if they have not already done so, and

[14] 18NYCRR 432.2(e)(5)(ii)(b)(c)

participate in an annual in-service training program that is specifically tailored for child protective service supervisors.

Topics of Ongoing Training

Child Protective Services Ongoing Training

OCFS offers ongoing training based on the needs identified through trends identified during quality assurance activities and in annual LDSS and VA needs assessments.

OCFS offers ongoing training based on the needs identified during quality assurance activities and in annual LDSS and VA needs assessments. Trends identified through quality assurance activities are discussed quarterly at Program Quality Improvement (PQI) executive team meetings. Attendees of this meeting include representatives from policy, training, and child welfare senior leadership. The agenda for the meeting includes a review of LDSS practice performance based on case review data, discussion of current initiatives impacting casework, and updates from subcommittees tasked with developing and implementing statewide improvement strategies. Representatives from the OCFS Bureau of Training gain awareness of current practice trends to inform the development and availability of ongoing trainings. If child welfare leadership decides they want to explore the development of a curricula based on these discussions, they contact the Bureau of Training and Development and discuss their ideas to see if the Bureau of Training is able to support them.

Staff development coordinators from each LDSS meet quarterly to discuss training needs and staff development concerns. These needs are then discussed with the Bureau of Training to see what can be done by OCFS to support the training needs of LDSS staff. Annually each Staff development coordinator at an LDSS is responsible for completing a local training needs assessment. The Bureau of training uses these needs assessments to help provide CPS In-Service courses that will support training requests for agencies while at the same time qualify for CPS In-Service credit.

Type of CPS training	Count of Courses
Engagement, Assessment, Planning	37
Child development and parenting	15
Sex Trafficking	9
Domestic Violence	5
Legal	10
Substance misuse	9
other	3
Mental Health	4
Supervision	3
Grand Total	95

In 2022, there were 95 different courses offered that meet the ongoing training requirement for CPS staff and or supervisors. These courses can be broken down into eight major themes.

Prevention and Foster Care Training

OCFS has many other trainings and programs to support preventive and foster care workers but none of these are mandated by law. Each LDSS chooses an appropriate staff development path for their workers based on their specific role or work assignment. These paths do not need to be approved by OCFS. Some smaller counties cross train their workers to meet multiple needs while other, larger counties focus more on specialty areas.

The OCFS supported system provides the access and tracking to support the necessary local decision making regarding the training needs of staff. OCFS supports on-going training projects

specifically designed to meet individualized local district performance improvement initiatives. The following Table demonstrates the volume of training provided to LDSS and VA staff.

OCFS has six different contracts focused on delivering training outside of mandated training. These contracts provided 76 different courses and 590 days of training trained to 8,501 trainees. The local districts made up 59% of the training population, the contracted agencies 36% and state staff 4%. These trainings were provided virtually and in the classroom.

Contract	Different Courses	Training Days
Case Documentation	7	116
Working With Alcohol and Substance Affected Families	9	29.5
Sexual Abuse Dynamics and Intervention Training and Interviewing Children: A Skills Clinic (23-24)	4	46
Domestic Violence Training for Child Welfare	5	42
Targeted Training to Support LDSS Permanency Planning	19	189.5
Statewide Youth Services Training	32	167
Total	76	590

Training Data Collection

Please refer to Item 26.

Oversight and Compliance of Ongoing Training

The oversight of ongoing training compliance is the same as for initial training and can be found in item 26.

Rest of State Ongoing Training Compliance

As noted in item 26, OCFS does not currently have a method to provide administrative data reflecting the number of staff who should have had ongoing training in a period of time and how many of them met the requirement. The information OCFS has available is the number of courses that were offered and how many people attended the courses.

- In 2022, OCFS offered 95 different courses, which were attended by 7,997 local district staff of that 1,718 were supervisors. All of these courses meet the mandatory six-hour annual requirement for CPS staff as they provide information that helps to increase their knowledge and skill set.

Type of CPS training	Count of Course Name	Sum of Attendees	Sum of Supervisors	% of total
Engagement, Assessment and Planning	37	3226	571	40.34%
Child development and parenting	15	1053	197	13.17%
Sex Trafficking	9	926	69	11.58%
Domestic Violence	5	860	259	10.75%
Legal	10	551	198	6.89%

Substance misuse	9	521	109	6.51%
other	3	416	172	5.20%
Mental Health	4	363	91	4.54%
Supervision	3	81	52	1.01%
Grand Total	95	7997	1718	100.00%

- In 2022, 27 out of 59 Districts were in substantial compliance and in 2023, 52 of 59 Districts were in substantial compliance.

	CPS Staff	# Trained	% Trained	Substantial Compliance 75% or better	Non-Compliance Under 75%
2022	3409	2434	71%	27 LDSS	31 LDSS
2023	3471	2971	86%	52 LDSS	7 LDSS

Supervisors are required to attend the course "Supervising CPS" following their completion of a new initial supervisory course, KEYS Core Training.

- In 2023, 74 employees completed the Supervising CPS training.

Ongoing foster care and prevention training is not required, however, there were 590 training days, in 76 courses were made available in 2022.

- 5,011 LDSS employees and 3,035 VA employees attended the following offerings:

Contract	Different Courses	Training Days	State Trainees	LDSS Trainees	VA Trainees	Other	Total Trainees
Case Documentation	7	116	9	651	392	7	1,059
Working With Alcohol and Substance Affected Families	9	29.5	18	704	464	1	1,187
Sexual Abuse Dynamics and Intervention Training and Interviewing Children: A Skills Clinic (23-24)	4	46	3	333	36	3	375
Domestic Violence Training for Child Welfare	5	42	37	608	216	3	864
Targeted Training to Support LDSS Permanency Planning	19	189.5	157	1,974	425	5	2,561
Statewide Youth Services Training	32	167	144	741	1,502	68	2,455
Total	76	590	368	5,011	3,035	87	8,501

NYC

- All supervisors were trained in the supervision model in NYC.

Stakeholder Input

Focus Groups were conducted with many stakeholders.

- Twenty-five Directors of Services were interviewed, and they were asked is there sufficient ongoing training, only four of them disagreed. Most of them would like to see more coaching based training and find sending staff to ongoing training to be overwhelming.

- One-hundred and twenty-six (126) caseworkers were surveyed and asked to rate on a five-point Likert scale the following question: There is sufficient ongoing training (beyond initial training) offered to all staff to continue to develop skills and knowledge? The response was favorable.

    - The top items identified as gaps were; not enough time for training, more training, a training path is desired and more training on prevention.

- Foster parents from around the state (12) were surveyed and asked: Do you feel that the foster care staff are sufficiently trained to promote safety, permanency, and well-being of children in foster care, as well as the parents of the children? 33% said they were, 25% said mostly, and 42% said no.

Continuous Evaluation of Training Content

Evaluation on each of the courses provided through the six contracts referenced above is evaluated at least at the Level 1, Participant Reaction Questionnaire (PRQ) and those that are offered more than three times per year also have a Level 2, Learning Gain evaluation. See Item 26 for a full description. The Bureau of Training monitors these courses quarterly through quarterly reports completed by the vendor. These evaluations capture whether the training addressed the skills and knowledge needed to carry out their duties. If a PRQ's overall rating drops below a 3.5 on a scale of five in a class training vendors are required to provide an account of the rationale for this unfavorable result.

Conclusions and Continuous Quality Improvement Activities

OCFS continues to deliver ongoing trainings, which include specialty and advanced training, as well as refresher training for experienced CPS, preventive and foster care caseworkers, supervisors, and administrators. In addition to using our own trainers to deliver child welfare training, OCFS collaborates with several vendors to develop and deliver training to LDSSs and VAs, child welfare workers, supervisors, and administrators.

OCFS has a full catalog of training to assist caseworkers in building their skills in assessing the strengths and needs of families. All training goes through a rigorous approval process to ensure the competencies of workers are strengthened in areas identified as needing improvement. Formal training deliveries are evaluated using a pretest/post-test instrument. OCFS in collaboration with its vendors has developed just-in-time training, offering sessions on identified systemic needs from PQI reviews. These topics have been offered through town halls, summits, grand rounds and learning exchanges. Finally, OCFS has a contract that provides regional office training specialists who work with VAs and LDSSs to identify needs and broker training or technical assistance to help develop the staff.

Item 28: Foster and Adoptive Parent Training

How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (who receive title IV-E funds to care for children) so that:

- Current or prospective foster parents, adoptive parents, and staff receive training pursuant to the established annual/biannual hourly/continuing education requirement and timeframes for the provision of initial and ongoing training; and
- The system demonstrates how well the initial and ongoing training addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children?

Summary of Performance

New York assesses item 28 as an **area needing improvement**. This area was an area needing improvement in the CFSR R3 as information from the statewide assessment and confirmed in stakeholder interviews showed inconsistencies across the state concerning foster and adoptive parent training and concerns with the adequacy of the training used to prepare foster and adoptive parents to carry out their duties with regard to foster and adopted children. Stakeholders reported varied experiences with the effectiveness of ongoing training. Stakeholders also reported that ongoing training requirements, access to training, and monitoring of training varies across the state. Voluntary agencies reported close monitoring of compliance with training requirements; however, the state does not monitor compliance outside of the agency reviews that occur every 3 years, and there is no process in place to ensure that local offices are complying with training requirements.

Since Round 3, New York continues to provide prospective foster parents, adoptive parents, and staff of licensed and approved facilities with adequate training and is continuing to improve its monitoring system. New York State is dedicated to continually improving this systemic area by monitoring electronic case records, current district and agency training records and incident reports. New York State has made a strong commitment to explore hybrid training options for foster and adoptive parents and has dedicated resources to develop a statewide foster/adopt recruitment and retention tracking system.

Analysis

Initial and Ongoing Training – Foster and Adoptive Parents

New York State requires authorized agencies to provide training to each certified or approved foster parent in a training program approved by OCFS which will prepare foster parents to meet the needs of children in their care so that the best interests of the children placed by the certifying or approving agency will be met. Before a child is placed in a foster home, authorized agencies must prepare the foster parent with appropriate knowledge and skills to provide for the

needs of the child. Such preparation must be continued, as needed, after the placement of the child.[15]

Foster parents who receive a higher level of board rate (such as special or exceptional) are required to actively participate in annual training. They must complete 4 hours to receive the special rate and 5 hours to receive the exceptional rate.

The current NYS training program for foster/adoptive parent leader certification includes multiple components including Group Preparation and Selection II/Model Approaches to Partnerships in Parenting (GPSII/MAPP), Caring for Our Own, Shared Parenting, and Deciding Together. These training programs prepare local district and voluntary agency staff and foster/adoptive parents to lead training groups in their areas.

A description of components follows:

- GPSII/MAPP: A 30-hour preparation and selection program delivered over a period of 10 weeks by districts and agencies to prospective foster and adoptive parents to assess, develop, and strengthen the attitudes, skills, and knowledge needed by parents intending to foster or adopt children.
- Caring For Our Own: A preparation program specifically for relative caregivers given over a period of nine weeks.
- Shared Parenting: An eight-week program focusing on relationship building between foster parents and birth parents for best outcome of children in care.
- Mini-MAPP: Provides an overview of the basic concepts in the GPSII/MAPP training program to child welfare staff and foster and adoptive care staff within the agencies.
- Deciding Together: Seven consultations are provided in this model to individual families to prepare them to foster or adopt

[15] 18NYCRR 443.2(e)

Current Initiative

To advance the goal of proper training, OCFS has developed a New York State (NYS)-specific model using The National Training and Development Curriculum for Foster and Adoptive Parents (NTDC) curriculum consistent with NYS foster and adoptive training requirements. NTDC implementation brings foster parent training to a current standard and assists foster parents with being Trauma Informed and culturally competent.

The NYS model includes NYS-specific materials such as the

- Foster Parent Agreement with Authorized Agency,
- Confidentiality Requirements for Foster Parents and Removal of a Child from a Foster Home Desk Aids,
- Reasonable and Prudent Parent Standards; and
- Panel preparation information.

There are two training paths in the NYS model, one for foster and adoptive applicants and one for relative/kin foster applicants.

OCFS is currently delivering Facilitator Training with the intention that LDSSs and VAs are fully trained in the NTDC by the end of 2024. The NTDC replaces GPS II/MAPP and its associated curriculum (i.e., Caring for Our Own and Deciding Together).

By January 1, 2025, all LDSSs and VAs should be utilizing NTDC training products.

Initial and Ongoing Training – State Licensed Facilities

The training mandated for residential foster care and childcare workers is to enable them to create a safe environment for the children and youth in care. OCFS provides a comprehensive system of initial, specialty, and advanced in-service training that allows staff to meet the mandates. There is not a set curriculum for our residential staff, however they must support the services and practice that the program they are working operates. These are often decided by program description and agency policies. For example, if the agency behavior management plan (BMP) policy states the facility will use restraints they need to have an OCFS approved training program for restraints, currently TCI by Cornell is required.

New York State Social Services Law Section 441.17 specifies that staff working in residential child care settings receive specific training about the procedures and use of restraint. All staff involved in the use of restraint must complete at least six hours of training in the agency's policy concerning: preventive methods and procedures for situations which might lead to the use of restraint, appropriate alternatives to restraint, the circumstances when restraint might be necessary; methods of applying restraint and the rules which must be observed in so doing. In addition, staff are required to complete and annual update.

Training Data Collection

Initial and ongoing training dates of foster and adoptive parents is required to be entered into the FAD module in CONNECTIONS by the agency the certifies the foster/adoptive parent. Tracking ongoing training requirements is also the responsibility of the certifying agency.

Maintaining the initial and ongoing training records of residential childcare workers is the responsibility of the employing VA. Regulation requires the VA be able to produce training records to OCFS upon request but does not dictate how those records should be maintained.

Compliance with Regulations- Foster and Adoptive Parents

While each district and agency are responsible to train their recruited foster/ adoptive parents, OCFS monitors training compliance through the FAD module in CONNECTIONS and in Voluntary Agency Reviews. To check data quality and to get a statewide picture, OCFS used data from CONNECTIONS to evaluate training compliance.

The FAD module has many training fields and does not provide a way to distinguish between initial vs ongoing training. Additionally, there is no requirement for a LDSS or VA to use a specific training for foster parents and as a result, these further challenges the state to differentiate initial vs ongoing training based on the name of the training the foster parent attended.

To assess this systemic factor, administrative data from CONNECTIONS of all foster parents certified in 2022 (n=5,845) was reviewed. Due to the fact that there is variation in the type of training and duration of training available in LDSS and VA in the state, if there was at least one training date in CONNECTIONS, the parent was counted as trained.

- Of the Foster parents certified in 2022, 72% had at least one training listed in CONNECTIONS.

2022 initial Training Analysis	Foster Parent Has Training	No Training in CONNECTIONS	Total	% trained
Adoptive Subsidy Home	1,405	337	1,742	81%
Adoptive Home	137	65	202	68%
Approved Relative Foster Home	1,040	684	1,724	60%
Certified Foster Home	321	126	447	72%
Foster/Adoptive Home	973	327	1,300	75%
Kinship Guardianship	323	107	430	75%
Total	**4,199**	**1,646**	**5,845**	**72%**

A manual sampling was conducted on some of the homes that had missing training dates in CONNECTIONS. Evidence of training was present in all records manually checked, leading to question the data quality of the information used to evaluate this systemic factor.

Current Initiative

In 2022, OCFS began piloting a web-based tool developed by Binti which helps simplify the certification/approval process for prospective foster parents, adoptive parents and kinship foster parents. Training hours, including the expiration of training hours, is also monitored in the software system. OCFS intends to implement this software for all LDSSs and VAs that do this work in New York State. The Binti software pilot is continuing at this time.

Each VA and LDSS have certified trainers who manage and provide the trainings to the foster and adoptive parents. OCFS regional offices conduct quarterly monitoring of the foster/adoptive records by randomly selecting cases for review. This review includes assessing that the foster/adoptive parents have met all the training requirements. If concerns arise, the regional office works with the LDSS or VA through a PIP process to remedy systemic concerns.

Compliance with Regulations- State Licensed Facilities

In NYS, VAs are responsible for the training and tracking training, of all employees with residential childcare responsibilities. Compliance with mandated training is monitored by a Voluntary Agency Review (VAR) which is conducted every three years by the OCFS Regional Office. A sample of agency training records are reviewed during the VAR and compared to the agency policy and needs of the population.

Aggregate data on compliance with training requirements in VAs is not available, however, when agencies are found to be non-compliant with training requires a Program Improvement Plan is issues and monitored by the Regional Office. The collection of aggregate data on Voluntary Agency training compliance is an area OCFS identifies as needing improvement. Regional offices also monitor agencies during quarterly site visits and after reported incidents.

Stakeholder Feedback

OCFS has multiple way to gain stakeholder input in the training available to foster and adoptive parents. OCFS has a training evaluation system (see item 26) to assess how the current training is addressing competencies. Each region has a home finders' group to advise OCFS on trends or concerns. OCFS also facilitates a home-finders annual conference to support the development of the trainers.

In a small focus group (n=12) conducted by OCFS 92% of the foster parents do not believe they are adequately prepared to handle the range of needs of the children in their care. Some of the concerns they identified were:

- Failure of some agencies to adequately train their staff on the varied list of available services and resources.
- More education on trauma, LGBTQ, race differences, and parents is needed.
- Train foster parents about what kind of disabilities these kids will have.
- Substance abuse training for the children and birth families that foster parents deal with.

A group of the Directors of Service (n=25) were interviewed and asked to rate on a 5-point scale if Foster and Adoptive parent training is meeting the needs of foster parents. In summary 36% reported in a positive manner, 28% were neutral, and 36% responded in a negative manner. The areas they felt need to be emphasized were:

- More training on trauma.
- Building stronger relationships with birth parents.
- Working with challenging children's behaviors.

OCFS is currently in the beginning phase of changing the initial training provided to foster parents and adoptive parents. The directors were asked if they are aware of the new training. Of the 25 interviewed 88% of them were aware of the training shift.

Though foster parents express concerns about how well prepared they are to foster, the ACS Youth Experience Survey revealed that of the 892 youth responding, 75% said they felt “very supported” and another 19% felt “somewhat supported” by their foster parents. Additionally, 76% of straight or heterosexual youth and 72% of bisexual, gay, or lesbian youth reported feeling very supported by their foster parent.

Conclusions and Continuous Quality Improvement Activities

In 2022, OCFS began piloting a web-based tool developed by Binti which helps simplify the certification/approval process for prospective foster parents, adoptive parents and kinship foster parents. The Binti software pilot is continuing at this time. OCFS will seek to procure a software toolset that will assist in recruiting prospective foster and adoptive parents and shepherding them through initial certification/approval, emergency approvals and annual reauthorizations. OCFS intends to implement this software for all LDSSs and VAs that do this work in New York State. A customized web portal would expedite the process and allow prospective foster/adoptive parents to submit their documentation, review their certification/approval status, sign up for trainings and communicate with LDSS and VA workers electronically. LDSS and VA workers could complete their review and approval process, view the status of applications in progress, and communicate directly with the prospective foster/adoptive parents. Training hours, including the expiration of training hours, will be monitored in the software system.

It is recommended that New York encourage their Counties and agencies to engage Foster, Resource, and Adoptive Parents and incorporate their feedback and share this feedback with the state to improve practices that impact them and the youth they serve. An area of improvement would be to create standard Foster Parent Survey to capture important feedback to capture that data statewide so New York can continue to improve practice.

E. Service Array and Resource Development

New York assessed the state's performance on this systemic factor using the state's performance on Items 29 and 30. New York believes the state ***is not in substantial conformity*** with the systemic factor of service array and resource development.

Item 29: Array of Services

How well is the service array and resource development system functioning to ensure that the range of services specified below is available and accessible in all political jurisdictions covered by the CFSP?

- Services that assess the strengths and needs of children and families and determine other service needs;
- Services that address the needs of families in addition to individual children in order to create a safe home environment;
- Services that enable children to remain safely with their parents when reasonable; and
- Services that help children in foster and adoptive placements achieve permanency.

Summary of Performance

NYS assesses Item 29 as an **area needing improvement**. This area was an area needing improvement in the CFSR Round 3 as stakeholders noted a lack of accessible services and gaps in and waitlists for services in a variety of areas. Since that time, New York has made a variety of key investments in services to improve upon the service array in NYS for children and families involved in every aspect of the child welfare system. Some examples, which are explained in further detail below, include:

- Service linkage resources – Care Portal, HEARS Family Line
- Expansion of Healthy Families New York
- Wendy's Wonderful Kids Partnership
- NYS Medicaid Redesign

NYS acknowledges there is still work to be done to ensure sufficient services exist and are available to meet all the needs across the State in all jurisdictions and to ensure they are accessible to the children and families that need them. With NYS being a state supervised, county administered system, many child welfare related services are delivered under other state agency systems (example: mental health, developmental disabilities, substance abuse, etc.). There has been support from the NYS Governor's Office for leadership of these state agencies to meet monthly and collaborate on solutions that would assist children and families to better access needed services. This is an area still needing improvement, but a more formalized communication plan between state agencies has been developed to begin addressing these service gaps.

Analysis

In NYS, services to meet the needs of children and families involved in the child welfare system are determined primarily by the LDSS. LDSS may provide services directly to families, may contract with not-for-profit agencies to provide in-home and foster care services, or may utilize other public services, such as county mental health services, often with a written administrative agreement for appropriate availability.

While there are many regulations in place to ensure required services are provided[16] and many programs implemented throughout the State, insufficient administrative data is available to demonstrate that services available uniformly across the State are accessible to the families and that the service delivery is of the quality needed to support children and families meet their goals.

Stakeholder interviews and surveys revealed the following:

- In a survey of the legal judicial community, only 24% of respondents agreed or somewhat agreed that steps are being taken in New York to address access to available services.
- In a survey of parents, only 35% of respondents agreed or strongly agreed that the services to best support their family are available in their county.
- In a survey of caseworkers, only 38% of respondents agreed or strongly agreed that the services in the LDSS are the right ones to meet the needs of families and 20% indicated services they have are accessible.
- In a focus group with tribal leaders, it was noted they felt judges and caseworkers are unfamiliar with tribal resources.

Services that assess the strengths and needs of children and families and determine other service needs

There are various assessment tools available to LDSS to determine the strengths and needs of children and families. These assessments are used to build the FASP, which provides the basis for assessing individualized child and family needs and documents the goals, tasks, and services that the case planner will coordinate to achieve those goals. Some of the most common assessments include:

Safety Assessments – Required within seven days of the initiation of a CPS report and at the time of the determination of the CPS investigation. Safety assessments are in the CONNECTIONS system and approval of them are required to close an investigation, as such, safety assessments are completed in 100% of investigations.

Risk Assessment Profile (RAP) – Required to be completed and approved before the determination of the CPS investigation. The RAP is in the CONNECTIONS system and approval is required to close an investigation, as such, RAPs are completed in 100% of investigations.

Child Adolescent Needs and Strengths (CANS) assessment – A multipurpose tool developed for children's services to support decision-making, including level of care and service planning. This tool assesses strengths and needs of children and families. It is currently used in NYS with youth who are placed in a QRTP for appropriateness of placement in a QRTP.

[16] SSL 409-A

Casey Life Skills Assessment – a set of tools offered through Casey Family Programs that assess the independent skills youth need to achieve their long-term goals. It aims to guide youth toward developing healthy, productive lives and includes several key areas including daily living and self-care activities, maintaining healthy relationships, work/study habits, money management and using community resources. OCFS recommends this tool be used to inform the life skills assessment required on the FASP.

OCFS monitors the completion and quality of assessments of the strengths and needs of children and families to determine service needs during the PQI reviews in item 12 (see below). In most cases reviewed, the agency was able to provide an assessment of the services needed to meet the identified needs of children, mothers, and fathers. As outlined in Item 20, the CONNECTIONS system supports the case plan (FASP) template which includes an assessment of service need.

OSRI Item	Item Description	PQI Review 2023 (PUR Start Date 2022)	
Items 12	During the PUR, the agency conducted formal or informal initial or ongoing comprehensive assessments that accurately assessed the needs of children, mothers, and fathers?	12A1 Children	97% (199/205)
		12B1 Mother	97% (159/164)
		12B2 Father	91% (107/117)

Current Initiative – Universal Assessment Tool

The quality of the completion of these assessment tools, consistent with the circumstances of the families, is monitored by OCFS during LDSS PQI reviews and VA VAR. It has been noted, though the assessments are completed, the quality of the assessments, particularly in the caseworker understanding of the differences between risk and safety, has been an area identified by OCFS as needing improvement for many years. Based on data from PQI reviews, in 2021, 100% of the 18 LDSSs reviewed had safety assessments as an area needing improvement and 6/18 (33%) had risk assessments needing improvement.

In 2022, OCFS contracted with the University of Kentucky to begin the development of the Universal Assessment Tool (UAT). In 2026, this tool will replace multiple assessments in NYS's current documentation system which will allow for streamlined assessments focused on a family's needs, strengths, and protective factors. The assessment is described as a communication tool, meant to be done in collaboration with a family and supports consensus building with families and their supports, to better identify their needs and develop plans for action. OCFS has also aligned this tool with family led practices such as Signs of Safety, Safe and Together, and Family Assessment Response, to continue to strengthen and build collaboration with families in the NYS Child Welfare system.

Services that address the needs of families in addition to individual children in order to create a safe home environment

Services to address the needs of families include housing/emergency shelter services, home maintenance assistance, linkages to programs such as Medicaid, Supplemental Nutrition

Assistance Program, temporary assistance, and child care and linkages to mental health and/or substance abuse supports and services. Since CFSR Round 3, OCFS has issued guidance to ensure that LDSSs have the information they need to utilize their child care dollars for families involved in the child welfare system to protect children and allow them to stay safely in their home (22-OCFS-INF-01).

OCFS monitors the provision of services by LDSS to create a safe home environment during the PQI reviews in item 12 (see below). In most cases reviewed the agency was able to provide the appropriate services to meet the identified needs of children, mothers, and fathers. There is the most room for improvement in service provision for fathers to meet their unique needs. Assessing this data as well as the LDSS survey data we gathered, the primary issues that prevent agencies from filling in those gaps include lack of adequate funds, high turnover, and lack of staffing that led to waitlists for some services. The case review data shows that counties are doing everything they can with the resources they have to provide families with an appropriate service array.

OSRI Item	Item Description	PQI Review 2023 (PUR Start Date 2022)	
Items 12	During the PUR, did the agency provide appropriate services to meet the identified needs of children, mothers, and fathers?	12A2 Children	96% (134/140)
		12B3 Mother	92% (140/152)
		12B4 Father	88% (87/99)

In 2022 OCFS asked each LDSS to analyze the service array in their county and identify if they believed this was an area of strength or an area needing improvement.

- **Forty-two out of New York's 59 counties (or 71%) stated their service array was an area needing improvement.**

The primary reasons identified by LDSSs for the need to improve service array for families are a lack of available staff to provide services and significant staffing turnover. This was felt everywhere across all jurisdictions but especially in our rural areas where sufficient available staffing has always been an issue and was further exacerbated by COVID. In addition to child welfare service provider staffing shortages, deficiencies in quality mental health services are also identified as lacking across the State.

More recent information was gathered from LDSS DOSs from a survey. This provided further data that overall LDSSs have service gaps caused by staffing shortages and a lack of available mental health, substance use, and domestic violence services. Several counties indicated that increased funding would be needed to fill in these gaps.

Current Initiatives

During the CFSR Round 3 PIP, OCFS identified that a lack of concrete supports available to families is a contributing factor to preventing children from being able to live in a safe environment. NYS is current piloting several programs that we are working on expanding statewide to link families with these needed concrete supports:

Care Portal – A software platform that connects families with concrete supports provided by volunteers in their community. Caseworkers can enter requests for the concrete needs of families on their caseload into the portal, which is then sent out to participating churches and community partners to fill the need. Seven counties in New York currently use the Care Portal and OCFS is planning statewide rollout over the next couple of years. To date, over 6,300 families have accessed support through Care Portal since 2018, which has an economic impact of over $2 million.

Direct Cash Transfer (DCT) Research Pilot – Provides flexible financial support to families, which research has shown to decrease child welfare system involvement. NYS will enroll approximately 150 households across three New York counties–Monroe, Westchester, and Onondaga and provide them with a $500 stipend each month for 12 months. The purpose of the DCT pilot is to determine the impacts of a universal cash stipend on participating families' future contact with the child welfare system since preliminary data show that many families are reported to the child welfare system for poverty-related neglect. The pilot kicked off in June of 2023 when the three counties began to enroll families in the pilot.

Mobile Crisis Vans – These are vans that are driven to the home of families in crisis to assist with supportive services. The goal is to reduce child maltreatment, address children's safety, and preserve the integrity of the family unit when the families' needs can safety and adequately be addressed in the home. The response units are being implemented in four counties–Albany, Westchester, Monroe, and Onondaga. The vans have a team of professionals including clinicians, caseworkers, behavioral health specialists and peer advocates to best address the needs of the family. The pilot kicked off in May 2022 and OCFS is working on gathering data and information on the numbers of families served and the impact of the services/supports provided.

HEARS Family Line – A telephone support line for families to access resources and referrals to needed services. HEARS stands for Help, Empower, Advocate, Reassure and Support. The warm line began in April 2022 and has taken over 2,000 calls since it started. Survey data of a sample of callers to the HEARS line were overall positive with a 4.2 out of 5-star rating that the HEARS line was helpful in meeting their needs. The line continues to grow and evolve as call volume increases.

Services that enable children to remain safely with their parents when reasonable

In the past five years there have been some significant changes in the child welfare system.

	12/31/2018	12/31/2022	Percent Change

Number of children in Foster Care	15,544	13,636	-12%
Number of care days in Congregate Care	1,077,965	703,624	-35%
Number of Care Days in Kinship Placements	1,400,639	1,784,802	+21%

Authorized Preventive Services – Decrease of 29%

- 2018 – 48,370
- 2022 – 34,243

OCFS hypothesized that the number of children in foster care decreased due to an increase in preventive services, but the data does not support that. Further assessment on the quality of preventive cases and its impact on families would be needed to assess the quality of the service array and its overall impact on the child welfare system.
Services that enable children to remain safely with their parents when reasonable are largely provided by LDSS through their preventive services programs. State regulations specify the array of preventive services that every LDSS must have available to prevent placement or for use during placement to accelerate the child's return. Each LDSS must provide, either directly or by purchase of service, the following seven core services: day care, homemaker services, parent training or parent aid services, transportation, clinical services, respite care and services, and 24/7 access to emergency services including cash or the equivalent in services, goods, or shelter[17]. Since CFSR Round 3, OCFS has expanded the timeframes of family respite in our regulations to allow more flexibility to meet a child or family's needs.

OCFS has continued to fund a variety of primary preventive contract programs including Family Resource Centers, expanded funding to begin Family Opportunity Centers, home visiting, parenting education, clinical/family support, kinship, and family violence prevention. These contract programs served approximately 2,600 families from August 2022 to July 2023. A wide range of services are provided to families but the most frequently provided services include information and referral, formal parent education, and family support and coaching. OCFS uses the Protective Factors Instrument (PFI) for primary preventive contracts to assess whether the programs are achieving positive outcomes. Pre and post tests are given to participants to assess effectiveness – the data shows that there were increases in each of the assessed PFI areas during this time period indicating the programs services were effective in increasing protective factors for families.

OCFS has also done extensive work on implementing our Family First Prevention Services Act plan to implement more evidence-based programs (EBPs) in the State. This includes expanding Healthy Families NY to every county in the State and to broaden the scope using a child welfare protocol to include families involved in the child welfare system. Families can enroll in the program if they have a child up to age 2 instead of the 3 months. OCFS has also invested funding in training for Motivational Interviewing with the goal of implementing that in every LDSS. OCFS is also investing in building the infrastructure needed to allow districts across the State to implement Brief Strategic Family Therapy (BSFT).

[17] 18 NYCRR § 423.4(d)(1)

Services that help children in foster and adoptive placements achieve permanency.

Services that help children in foster and adoptive placements achieve permanency include many of the services already mentioned. In addition, there are also therapeutic foster care services, counseling services, medical services, adoption support services, kinship services, independent living services for our older youth in care and aftercare services to support a child's return to the home. Since CFSR Round 3 OCFS has built a partnership with Wendy's Wonderful Kids (see item 36) to allow for additional supports and services to children in foster care to find additional or alternative permanency options for children.

One other key initiative that NY State has implemented since CFSR Round 3 that has expanded the service array to children and families across every aspect of the child welfare system is the NY State Medicaid Redesign. OCFS has collaborated extensively with DOH and OMH to provide support to voluntary foster care agencies to provide up to six Children and Family Treatment and Support Services (CFTSS) including Other Licensed Practitioner (OLP), Crisis Intervention (CI), Community Psychiatric Supports and Treatment (CPST), Psychosocial Rehabilitation Services (PRS), Family Peer Support (FPS) Services, and Youth Peer Advocacy and Training.

In 2022 approximately 6,800 children in foster care received services through CFTSS, this is half of the overall population of children in foster care. A majority of the services provided (over 60%) are through OLP for evaluation and counseling services and the next most utilized are CPST (22%) and PRS (13%). In addition, most voluntary foster care agencies were licensed as 29-I Health Facility providers so that all children in foster care were able to access up to five core limited health related services which include skill building, nursing services, Medicaid treatment planning and discharge planning, clinical consultation, and Medicaid managed care liaison. In 2022 over 14,000 children were able to access these services. These services are new and going forward more work will need to be done to assess their effectiveness and to learn more about how available and accessible they are. CFTSS services can be provided to children residing in their home or a foster home. Their services follow them regardless of their placement, which promotes stability and permanency.

An important voice to assess the NY service array is from youth that currently are in foster care or were formerly in foster care. The administrative data to assess the level of services, including independent living services, did not provide enough information into the service array and access to those services. Several focus groups of different age ranges were held to assess the service array provided to children aged 14+.

- Overall, most participants had some level of service provision, but it seemed that the 18+ youth still in care had the most involvement in their service plan and highest participation/access to services.
- The youth 14-17 and those that were age 18+ and no longer in care demonstrated that service provide was inconsistent and that their involvement in their service plan was not meaningful or engaging.

There is an overall need to better involve youth earlier on in their lives, and to better engage youth early on with their transition planning to adulthood so that they can access and engage in the services they need to successfully transition out of care.

Conclusions and Continuous Quality Improvement Activities

Item 29 is rated as an area needing improvement as OCFS does not have quality data to support how well the service array and resource development systems are functioning to ensure that the range of services specified in Item 30 are available and accessible in all political jurisdictions covered by the CFSP.

OCFS has made great strides in improving the child welfare service array since CFSR Round 3. However, despite the strides that have been made to date, there is still much work to be done to ensure that children/families are able to access the necessary supports and services they need to meet their unique needs. As we learned from our data analysis and from the feedback that we gathered from impacted parties who touch the child welfare system, including families, youth, foster/adoptive caretakers, LDSS staff and administrators, attorneys and court personnel, and tribal partners, we need to conduct better assessments of service needs. OCFS also needs to explore ways to gather data and evidence that our service array is functioning uniformly across all jurisdictions. As we continue to implement the New York State Family First Prevention Services Act (FFPSA) Prevention Plan and the UAT, we anticipate continued improvements throughout the State.

Item 30: Individualizing Services

How well is the service array and resource development system functioning statewide to ensure that the services in Item 29 can be individualized to meet the unique needs of children and families served by the agency?

- Services that are developmentally and/or culturally appropriate (including linguistically competent), responsive to disability and special needs, or accessed through flexible funding are examples of how the unique needs of children and families are met by the agency.

Summary of Performance

New York assesses Item 30 an **area needing improvement** as OCFS does not have service array and resource development system functioning statewide to ensure that the services in Item 29 can be individualized to meet the unique needs of children and families served in NYS. This area was also an area needing improvement in the CFSR Round 3 as through stakeholder interviews it was noted the state does not consistently ensure that services are being individualized and that service plans for families are not always individualized to ensure tailored services. Since that time, New York has continued to make improvements on individualizing services for children and families, however, there is a lack of data to confirm that services are being provided to meet the unique needs of children and families across all jurisdictions of the State.

Analysis

Service Planning

The development of the FASP provides the opportunity for families to have a voice in their service plan, including the chance to express preferences in service providers. As families move through services to resolve the concerns that caused them to be involved in the child welfare system, there are ongoing opportunities for them to provide input into their case plans through Service Planning Review (SPR) meetings and court hearings, if applicable. Casework contacts with families and caseworkers assigned to their case also provide opportunities for families to provide input about the services they are referred to and participating in.

A survey of parents with lived experience (see stakeholder involvement) revealed the following:

- 52% Agreed or strongly agreed that the caseworker took time to talk with them and listen to what their needs were and what services would help them.
- 65% Agreed or strongly agreed that the caseworker did an adequate assessment of their family's strengths and needs.
- 53% Agreed or strongly agreed that they were involved in the development of the family’s service plan.

Flexible Funding

NYS has provided flexible, open-ended funding for child welfare services to the LDSSs since 2002 and has maintained State reimbursement levels at 62% of the cost of providing services to

children and families. In the most recent NYS Financial Plan published by the Division of Budget, almost $300 million State dollars were spent on child welfare protective and preventive workers and services in the most recent budget update for FY 2024.

NY believes strongly that LDSSs need flexible funding resources so they can provide services based on the needs of their local community. This funding can be used to invest in services that promote family stability and permanency for children in safe home-based settings. While foster care is an absolute necessary component of all child welfare systems, NYS is committed to this finance structure, which encourages the individualized provision of services that may alleviate the need for foster care or to reduce the time that foster care is necessary.

Language Access

With over 800 languages spoken in NYC alone, according to the World Atlas, there is vast diversity of language and culture throughout the state. In 2023, under Governor Kathy Hochul, NYS's language access policy was codified as part of the FY2023 Enacted Budget, and the Office of Language Assistance was established. Under New York's language access policy, agencies must provide interpretation services in any language and translation services in the top 12 most common non-English languages spoken by Limited English Proficient New Yorkers.

Barriers to individualizing services include lack of workers that can speak to families in their native language, and staff shortages, especially for Spanish speaking workers which is our largest minority demographic. This makes more of a challenge in engaging families to properly identify and address service needs.

Developmentally and/or Culturally Appropriate Services

New York's child welfare system has a disproportionate number of families and children that are Black, Hispanic or Native American at each touch point of the system. Disparity rates over the past five years have decreased slightly, however, children identifying as Black or African American or Hispanic are 2-4 times more involved in the system as compared to their white counterparts. OCFS produces two data packages with LDSS level disparity data for use in understanding the demographics of the locality and planning for services. This data is made available to LDSS through the OCFS website and is updated each year.

- Disparity Rate Packet 2022-Dashboard
- Disparity Rate Packet 2022 County Comparison.PDF (ny.gov)

Since the CFSR Round 3, OCFS has made a variety of changes to encourage more culturally sensitive approaches to service delivery so caseworkers can understand their implicit biases. Mandated reporter training has been updated to include implicit bias and cultural competency when reporting a family for abuse/neglect. Implicit Bias training and Race Equity and Cultural Competency training for caseworkers and administrators was also developed and made available to child welfare staff. Additionally, OCFS implemented a requirement for any placement of a child into foster care to be done so by a blind removal process (20-OCFS-ADM-19). A LDSS team must review the case circumstances without demographic or identifying information prior to making the decision to remove a child from the family's home.

To address the need for tailored and individualized services with developmental disabilities, OCFS partners with OPWDD for assistance in services and supports for families that have developmental or intellectual disabilities. Residential services and supports are the most challenging to access but there are a variety of other services and supports that OPWDD can assist families with. LDSSs can access the OPWDD Front Door, which is the way OPWDD connects people to the services that are needed. This is where a person-centered planning process begins, which helps families learn about and access service options. LDSS can assist families to access the Front Door to determine eligibility for services and connect families to needed services that meet their developmental needs.

- OCFS does not have data that helps us understand the universe of need in this area and whether the appropriate services are being provided that meet unique needs.

Lesbian, Gay, Bisexual, Transgender, Queer or Questioning (LGBTQ+) Population

OCFS has issued various guidance documents over the past decade to enhance child welfare staff's understanding of sexual orientation, gender identity, and gender expression (SOGIE)-related knowledge and practices. In 2013, OCFS amended regulations to include "sexual orientation" and "gender identity and expression" as protected classes from discrimination across OCFS programming. In 2015, OCFS issued 15-OCFS-ADM-18, *New York State Bill of Rights for Children and Youth in Foster Care*, which includes, and is not limited to, the right to receive care and services free of discrimination based on sex, gender identity or expression, and sexual orientation. In 2016, OCFS issued 16-OCFS-ADM-02, *Regulations Prohibiting Discrimination and Harassment in Child Welfare and Youth Programs* advising LDSSs and VAs of regulations that prohibit discrimination and harassment based on SOGIE. Also, in 2016, OCFS issued two Informational Letters announcing a SOGIE-affirming resource for families and SOGIE terminology resources.

In 2021, OCFS released the *LGBTQ+ Community Practice Model*, created in collaboration with community partners and stakeholders, which establishes a vision, mission, and a set of expected outcomes when working with a member of the LGBTQ+ community. This practice model was developed after an extensive review of current best practice, guidance, and research on working with LGBTQ+ community members and was created in partnership with the OCFS Youth Advisory Board and Parent Advisory Board, OCFS regional office staff, OCFS leadership, caseworkers, clinicians, and LGBTQ+ community leaders across the state of New York. OCFS also updated regulations related to creating policies for the treatment of youth of all sexual orientations, gender identities, and gender expressions.

Concurrently, OCFS updated and expanded the website resources available to professionals, families, and youth regarding LGBTQ+ information and conducted listening sessions with youth in foster care who identify as LGBTQ+ resulting in a *LGBTQ+ Youth in Foster Care Listening Sessions Report*. The reported experiences of youth provide examples of how youth have felt supported and many areas in which we need to improve for the youth we serve.

OCFS has also reviewed and revamped all of the LGBTQ+ training available to local stakeholders, held joint LDSS and LGBTQ+ community provider discussions to build partnerships, worked with national leaders in the field to develop additional e-module trainings for foster care providers and caretakers, and provided ready access to varied trainings regarding SOGIE and LGBTQ+ topics to the field. All these efforts are made to enhance the experience and outcomes of the youth and families served by OCFS, the LDSSs, and VAs.

- SOGIE data capability has been provided within the CONNECTIONS system, however to date, there has been no mandate for such data collection and therefore no consistent data that we can rely on across NYS in child welfare. Much consideration over the past years has focused on concerns regarding possible unintentional harms to youth, and we continue to revisit policies around SOGIE data collection in child welfare and how to ensure youth control their identity information and not the "system".

Medicaid Redesign

The Children's Medicaid Redesign transformed the ability of children/youth in foster care to access a more comprehensive network of providers and physical/behavioral health services during placement and when discharged from foster care. On July 1, 2021, more than 70 VAs become licensed under Article 29-I of the NYS Public Health Law as Article 29-I Health Facilities. This gave VAs the ability to provide and bill for Medicaid Core Limited Health Related Services (CLHRS) and an array of Other Limited Health Related Services (OLHRS). The CLHRS are billed on a per diem basis and include five bundled services: Skill Building provided by Licensed Behavioral Health Practitioners, Nursing Services, Medicaid Treatment Planning and Discharge Planning, Clinical Consultation/Supervision Services, and VA Medicaid Managed Care Liaison/Administrator. The OLHRS, which 29-I Health Facilities may be licensed or authorized by the State to provide include: Medicaid State Plan services, CFTSS, and Children's Waiver Home and Community Based Services (HCBS).

Medicaid State Plan services for screening, prevention, diagnostic, and treatment related to physical, developmental, and behavioral health can be provided to children/youth while they are placed with a Licensed Article 29-I Health Facility and up to one year post discharge. CFTSS designed to foster and promote the health and wellness of children/youth and their families/caregivers became available on 1/1/19. HCBS are intended to be provided to a child/youth and family in their home and/or the community. The goal is to assist children/youth in being successful at home, in school, and in their other natural environments to help maintain them in their community and avoid higher levels of care and out-of-home placements. CFTSS and HCBS can be provided to eligible children and youth up to age 21 years old. All these OLHRS are intended to better meet children's needs, expand access to clinical treatment services, and provide a greater array of approaches for rehabilitative interventions. Any child who is Medicaid eligible and is identified as having a health or behavioral health need can access services with greater flexibility and choice[18].

On July 1, 2021, Medicaid Managed Care Plans became responsible for providing all Benefit Package services to enrolled children/youth placed in foster care, promoting continuity of care, and ensuring health care services are delivered in a trauma-informed manner and consistent with standards of care recommended for children in foster care. This includes provision of, and access to LGBTQ+ health and multiculturally competent services. Since children/youth often enter foster care without having access to traditional preventive health care services they often require an increase in the frequency of their health monitoring.

[18] Utilization of services can be found in Appendix I.

In 2022 OCFS asked each LDSS to analyze their service array and how they individualize services in their county and identify if they believed this was an area of strength or an area needing improvement. Most reported this as an area needing improvement. The primary barriers to providing individualized services were identified as lack of training options on bias, poverty, racism, and cultural competence for their staff. They also noted a lack of cross system collaborative approaches to assist people and referenced that silos exist, preventing service delivery in a manner that would benefit children and families most. They also mentioned a lack of staffing resources as a contributing factor as well as a lack of access to bilingual or culturally appropriate providers.

> 71% of districts identified service array as an area needing improvement and that more work needed to be done to individualize services.

Stakeholder Feedback

Stakeholder interviews and surveys revealed the following:

- In a survey of the legal judicial community, only 26% of respondents agreed or somewhat agreed that culturally sensitive services are available to meet the needs of children and/or families.
- In a survey of Directors of Services, 50% of respondents agreed or strongly agreed that the services in the LDSS meet the unique needs of children and families.
- In a survey of caseworkers, only 37% of respondents agreed or strongly agreed that the services in the LDSS meet the unique needs of children and families.
- In a focus group with tribal leaders, it was noted the process of the caseworker and judge approving a “tribal resource” has a lot of limitations on what nations can offer as “approved” in the child welfare system. This creates a larger burden on families to find resources/services that the district has approved upon.

Conclusions and Continuous Quality Improvement Activities

In conclusion, Item 30 regarding individualizing services is an area needing improvement. Our data and analysis show that while there are processes in place to assess a child or family’s needs and funding resources available to help meet those unique needs, we still have much work to do to ensure services are tailored to meet the needs of those touching the child welfare system.

OCFS has identified opportunities to ensure training is available for all caseworkers on bias, poverty, racism, and cultural competence. We will be implementing the UAT to help us further identify unique needs to help children and families reach their case goals. Finally, we need to explore better data collection and continuous quality improvement efforts to better track this across systems and target strategies to improve our measures.

OCFS has already identified the need for more individualized approaches to assessments of children and families that are uniform across the State and across all child welfare programs. OCFS is in the beginning stages of implementing a UAT to further individualize services and tailor them to meet the unique strengths and needs of children and families. OCFS monitors the assessment and provision of services through case record reviews.

New York State's large and very diverse population make providing services in a culturally competent manner challenging and language issues are a barrier.

As we continue to work on rolling out our Family First Prevention Services Plan to allow for more evidence-based services we believe will have an impact on further individualizing services. We believe that as we roll out Motivational Interviewing training to every LDSS and implement the UAT that we will see significant improvements in assess the individual needs of children and families and our open-ended funding will continue to support necessary investments needed to meet those service needs.

F. Agency Responsiveness to the Community

New York assessed the state's performance on this systemic factor using the state's performance on Items 31-32. New York believes the state ***is in substantial conformity*** with the systemic factor of agency responsiveness to the community as ***both items*** are assessed to be strengths.

Item 31: State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR

How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the CFSP and developing related APSRs, the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

Summary of Performance

New York State assesses Item 31 an area of **strength** as OCFS engages many stakeholder groups throughout the year in ongoing consultation to gather major concerns and strengths related to New York State's performance on key goals, objectives, and strategies for improvement. This area was assessed as a strength in CFSR Round 3 and OCFS has continued to expand opportunities to engage stakeholders in order to provide input on state initiatives and implementation of the provisions of the CFSP.

Analysis

New York State engages internal and external stakeholders in substantial, ongoing, and meaningful collaboration in the forms that include advisory panels, standing meetings, and workgroups, to fulfill its mission of supporting safety, permanency, and well-being outcomes of children and families. NYS works with a full array of stakeholders including youth, families, service providers, advocates, and community organizations, along with state and federal agencies in pursuit of this mission.

Internally, OCFS routinely involves a wide range of agency staff in all discussions involving aspects of the delivery of services to children, youth, and families. Staff representing policy, legal, program operations, fiscal, and training participate as appropriate. Based on their expertise, they provide input on issues encompassing the entire range of child welfare services. This includes child protective services, foster care, adoption, preventive services, independent living, juvenile justice, and any of the Social Services Block Grant (SSBG or Title XX) services.

Stakeholder Engagement and Consultation Process

OCFS employs a variety of strategies and mechanisms to facilitate ongoing consultation with diverse stakeholders in the child welfare system. These include the formation of statewide committees and taskforces, where members from communities of interest are invited to

contribute to policy and program development. OCFS also promotes participation in coordinating councils to foster collaboration and information exchange among stakeholders. As a part of the development of this self-assessment, OCFS has continuously consulted with stakeholders through meetings, focus groups, and surveys to evaluate the child welfare system and pinpoint areas for enhancement. In addition, OCFS organized webinars and community-based listening sessions to collect feedback from stakeholders across the state.

Advisory boards, such as the Parent Advisory Board and Youth Advisory Board, have been established by OCFS to gather input and feedback on policy and practice. The office also regularly engages with families served by the child welfare system, service providers, and other stakeholders. Furthermore, proposed policies and procedures are posted for public comment to solicit feedback from interested parties.

Specific examples of ongoing consultation are detailed below and apply to the development of the CFSP, statewide assessment and development of policy and practice. Consultation includes tribal engagement through quarterly and individualized meetings, consumer engagement through the development of focus groups and surveys for families, and service provider engagement through regular interaction with LDSSs and VAs. Foster care provider engagement is facilitated through participation in the Youth in Progress (YIP) advisory board and collaboration with Family Policy Advisors (FPAs), while juvenile court engagement involves alignment leadership meetings with juvenile court judges and collaboration on data sharing and improvement initiatives. Lastly, cross-system collaboration is achieved through bi-weekly Deputy Commissioner's Cross Systems meetings and the Interagency Review Team, which identifies resources for children involved with multiple systems.

Local Department of Social Services Consultations

The NY Public Welfare Association (NYPWA) conference is held twice a year and is facilitated by leaders within the counties of NYS. During each conference the OCFS Commissioner meets with the local commissioners to discuss current issues facing social service districts, and to raise topics of concern on the state level. These sessions are held in January and July of each year. The exchange of concerns and issues is used by OCFS to develop trainings, policies, and other supports to the districts.

Additionally, each year the OCFS Commissioner holds a forum with county commissioners to discuss topics that are current pain points in their day-to-day operations. Possible solutions are explored and much of the focus is on how effective oversight and monitoring of county child welfare practice can be conducted by OCFS, while minimizing impact of workloads to the local districts. During this forum, OCFS also presents new initiatives for input, such as the new Universal Assessment Tool (UAT). The UAT will replace the current way caseworkers assess family strengths and needs and identify services to strengthen family functioning.

Regional Office staff meet at a minimum quarterly with local districts staff. At these meetings, issues and concerns are discussed, focusing on improving practice to enhance outcomes for children and families. During these meetings the following areas are addressed:

- Local district/agency data is reviewed with a focus on several key areas:
    - making sure the data is accurate;
    - the timely entry of data; and
    - the analysis of data in determining strategies.

- The implementation of key strategies that workers have been trained on.
- Progress made on any corrective actions that resulted from case record reviews, child deaths and complaints.
- Review of currently released policy directives for the purpose of providing guidance and clarification.

Issues raised at these meetings are used to inform what additional resources are needed by workers, which includes trainings, services, and funding. Regional Office staff elevate strengths and concerns discussed to OCFS leadership to guide policy decision making.

Tribal Nations

The OCFS Bureau of Native American Services (NAS) coordinates all work related to the federal Indian Child Welfare Act (ICWA) in New York State, and all Tribal interactions that take place through NAS are complemented and strengthened by ongoing interactions between the LDSSs, OCFS, and those who provide services to Native Americans. NAS facilitates semi-annual tribal consultation meetings, Regional ICWA roundtables, and tailored stakeholder meetings with tribal/nation and LDSS caseworkers in both urban and reservation settings with the primary purpose of supporting and improving compliance with ICWA. These meetings also serve in the development of training initiatives, provide input into the CFSP Title IV-B plan and subsequent APSRs, and strengthen service delivery to Native American children and their families. Tribal consultation meetings provide an excellent forum to introduce other OCFS-supported initiatives such as Court Collaboration, Protective Services for Adults, and Chafee Independent Living Services to Tribal and agency staff who need program support to serve their respective Tribal and urban Native American Communities.

The Seneca Nation Peacemaker Courts Collaboration began in 2005 and includes judges and court personnel from the 8th Judicial District, the Seneca Nation of Indians, and the Peacemaker Court judges. This collaboration provides a forum to discuss practices and procedures and provides a welcome point of contact for issues. This collaboration was instrumental in the implementation of ICWA, and the development of a tribal Court Appointed Special Advocates (CASA) program. Both OCFS and the Seneca Nation of Indians attended the Federal-State-Tribal Court Forum held on October 26, 2023.

In 2019 NAS and the Court Improvement Project initiated regional ICWA Roundtables in Western New York, Central and Northern New York, and the Downstate. The purpose of the ICWA roundtables is to address any systemic barriers between the Tribal nations and the office of court personnel. At times and when directed by the Nations, the LDSSs are invited to address specific issues within a particular region. In 2023, the Downstate ICWA Roundtable held its first meeting held on the Shinnecock Indian Territory.

On May 3, 2023, St. Regis hosted the fifth annual Indian Child Welfare Act Conference. The conference was sponsored by The Tribal Court Improvement Project, St. Regis Mohawk Tribe, New York State Child Welfare Court Improvement Project, New York State Unified Courts, OCFS, New York Federal-State-Tribal Courts, and Indian Nations Justice Forum. Tribal nations, attorneys, judges, and caseworkers attended from across New York State.

Children and Family Services Advisory Board

The creation of OCFS was accompanied by a statutorily created Children and Family Services Advisory Board comprised of 24 members. The board's purpose is to help OCFS construct a better system of services for New York's children, families, and individuals. The governor appoints 12 members and the NY Senate and Assembly appoint six each. Its duties broadly include consideration of matters relating to the improvement of children and family services, review of proposed rules and regulations of the OCFS prior to their adoption, advocacy for OCFS programs, and liaison with local stakeholders.

Citizen Review Panel (CRP)

WRI Solutions, Inc. manages the contract to provide assistance and support for the three New York State Citizen Review Panels. The panels meet virtually. The Eastern and Western Panels represent jurisdictions outside of New York City and a third panel was established specifically for New York City to address the issues particular to the City. Panels are required to examine the practices (in addition to policies and procedures) of State and local agencies to evaluate the extent to which the agencies are effectively discharging their child protective responsibilities.

The panels provide for public outreach and comment in order to assess the impact of current procedures and practices upon children and families in the community. The panels submit recommendations annually and OCFS provides a response addressing the recommendations of the panel (where appropriate) to make measurable progress in improving the state and local child welfare systems.

Many of the recommendations align with the work OCFS is implementing, such as improved mandated reporter training and narrowing the front door of families being reported to the New York State Statewide Central Register of Child Abuse and Maltreatment (SCR). Many of the recommendations are aimed at funding and legislation which require collaborative efforts with multiple state agencies. An example of legislative action based partly on recommendations of this group and other similar groups went into effect January 1, 2022, and is known as SCR Reform and described in the Current Initiatives section of this document. Annual Reports and meeting summaries can be found publicly at https://www.citizenreviewpanelsny.org/annual-reports.

Parent Advisory Board

The Parent Advisory Board began in 2020 and is made up of fifteen to twenty foster parents, adoptive parents, adults with lived experience in foster care, parents impacted by the child welfare system, and leadership from OCFS. The group meets with OCFS staff six times a year with the goals of understanding how the policies and procedures of OCFS impact families both to support safety permanency and well-being outcomes as well as how they can be barriers. This group has been a strong advocate for more trauma informed care throughout the system which contributed to OCFS investment in trauma informed care models. The group has provided input in various areas including updates to the caseworker foster care manual, post adoption resources, parental rights documents, and the direct cash transfer pilot.

Youth Advisory Boards

OCFS is also committed to hearing the voice of youth impacted by service systems. To that end, OCFS supported the development and growth of Youth in Progress (YIP), a statewide foster care youth voice initiative. This group of young people, accompanied by adult mentors, works within their regions to address a wide range of topics that impact their experience in foster care and beyond.

OCFS is also committed to hearing the voice of youth affected by service systems and has continued to involve the members of the statewide Youth Advisory Board (YAB), which was developed in 2017. OCFS, in collaboration with DCJS and the University at Albany, supported a Youth Justice Institute to enhance the training, technical assistance, and research knowledge of local stakeholders. The Youth Justice Institute developed a Youth Justice Peer Advisory Council comprised of young adults with lived experience who also provides guidance to OCFS related to materials and policies.

OCFS Family Policy Advisors

Family Policy Advisors (FPAs) became part of the OCFS workforce in 2022, through a partnership with DCJS Families Together. The FPAs are dedicated to strengthening families statewide through Family Peer Support Services. The goal is to promote and implement Family Driven Care at the county, regional, and state level. The FPAs collaborate with OCFS to embed the family voice in the development of policy, regulation, and best practices. There is an FPA stationed in every OCFS region, and they are all valued members of our workforce. The FPAs have become directly involved in the Child and Family Services Review process.

Additionally, FPAs:

- Advise and advocate in matters of policy and education to all family, child, and youth-serving systems.
- Increase parent/caregiver involvement and advocacy across the child welfare system.
- Provide focused outreach throughout the state/region to promote and advance family-driven care across all child/youth-serving systems.
- Support the Youth and Parent Advocates across the child welfare system.
- Develop training material to address the needs of Parent Advocates and provider agencies.
- Provide technical assistance to, and research knowledge for, local stakeholders.
- Partner with all regional Policy Advisors from various other child-serving agencies.
- Engage in the review of training for the child welfare system.

Statewide Implementation Team (SIT)

As part of New York State's response to the CFSR R3, OCFS worked to develop a Statewide Implementation Team (SIT). In 2016, the SIT received development support from the Casey Families Foundation and began to bring together representatives from OCFS, LDSSs, and VAs across the state to improve outcomes for children and families by:

- Working together towards implementation of the NYS Child Welfare Practice Model
- Providing voice from the field
- Producing actionable guidance and tools that will help to improve outcomes for children and families.

The SIT is modeled after the Local Implementation Teams (LITs), which have been developed in some LDSSs that have used the KEYS supervision model. These LITs have proven

successful in several counties as an inclusive approach for communicating across staff and systems, aligning practice, and creating shared ownership for sustained success.

Membership of the SIT has been co-facilitated by a member of the OCFS-CWCS senior management team, a senior member of an LDSS, and a senior member of a VA. Additional team members are tasked with providing a voice both to and from the field, beyond their individual counties and organizations. The team began meeting in person on a bi-monthly basis and held conference calls during the alternate months. Some adjustments were made during the COVID-19 global pandemic, and monthly meetings now occur virtually. Topics to date have included kinship care/KinGap, permanency, family finding, maltreatment of children in foster care, fatherhood engagement, Medicaid re-design for children in foster care, Raise the Age, workforce challenges and the Family First Prevention Services Act.

Some of the actionable items that have resulted from the SIT's work are:

- The requirement for each LDSS and VA to designate a Kinship Champions to support increased use of kinship placements and supports to relatives caring for kin.
- Successful advocacy to have all children in foster care deemed eligible for Medicaid waiver services.
- Collaborative development of a program model that would support residential agencies servicing 16 and 17-year-old youth placed under Raise the Age.
- Establishing a consistent process for programs to be approved as Qualified Residential Treatment Programs.
- Reviewing and assessing survey results completed by the field:
    - September 2019 (survey to determine progress in LIT development in each LDSS)
        - Survey to 104 LIT implementation leads; 63 responses; results showing 53% had created implementation teams
    - January 2021 (survey to assess each VA's preparedness to be approved as a QRTP)
        - Survey of 66 voluntary agencies with residential programs to determine if they plan to apply for QRTP approval; 100% response
- LDSS and VAs provided presentations on implementation of best practices
    - December 2020-Herkimer LDSS presentation on local collaboration of FFPSA
    - February 2021-William George Agency presentation on aftercare model
    - February 2023-Three VAs presented on implementation progress of the Therapeutic Foster Care Oregon Model
- Development of documents to support the field
    - March 2019-the FFPSA Checklist for Voluntary Agencies and separate checklist for LDSS
    - Family First Workbook

Statewide Child Fatality Review Team

The OCFS established a Statewide Child Fatality Review Team (SCFRT) in 2020. This team serves in an advisory capacity and is comprised of a broad range of system-level leaders from various New York State agencies, including DOH, OMH, OASAS, OCA, the State Police, and the Office for the Prevention of Domestic Violence, as well as other state and local agency stakeholders and private partners whose goals align with this team's mission of researching the cause of preventable child deaths and developing strategies to prevent such tragedies from

occurring. OCFS established this statewide team to build up on the work of the 19 county and regional child fatality review teams statewide. The team digs deeply into identifying the most effective means of prevention and best practices and works collaboratively to establish them in statewide child welfare policy and practice. The statewide CFRT also promotes communication within and between state and local agencies. It meets quarterly to identify and execute initiatives to prevent child deaths statewide.

Some of the actionable items that have resulted from the SIT are:

- OCFS continued its initiative of distributing safe sleep kits for caregivers and various stakeholders throughout the state. OCFS distributed 5,545 safe sleep kits across New York State in 2023. The kits include a “Follow the ABCs of Safe Sleep” tote bag, door hanger, magnet, brochure, window cling, and a “Sleep Baby: Safe and Snug” board book. The kit also includes a Halo Sleep Sack for baby.
- OCFS secured funding to purchase 1,391 Pack ‘N Plays and fitted sheets. The Pack ‘N Plays and fitted sheets were shipped throughout New York State to L/R-CFRTs, Child Advocacy Centers/multidisciplinary teams, and to LDSSs. The Pack ‘N Plays were then distributed to families in need.
- OCFS disseminated infant safe sleep messages through its social media sites. These public service announcements were posted on OCFS’s Facebook and "X” sites, including a Spanish version for the latter.
- The “safety science” approach to conducting systems-focused child fatality reviews pilot was first implemented in 2022 with two Local/Regional CFRTs, then was expanded to New York City. These reviews identify systemic issues and recommendations for change gleaned from the “safety science” approach of child fatality reviews, and those recommendations are provided to the SCFRT.

New York State Partnership for Youth Justice

The Partnership for Youth Justice is a state-level, intergovernmental collaborative focused on youth justice policy and practice in NYS. OCFS collaborates with the OCA and the DCJS as the chairs of the New York State Partnership for Youth Justice (PYJ), which includes OMH, SED, OASAS, the Developmental Disabilities Planning Council, and the Youth Justice Institute at the School of Criminal Justice at the University at Albany – State University of New York, as well as regional representatives from localities and local law enforcement agencies. The PYJ focuses on overall continued reform and improvement of outcomes for youth and families involved in the juvenile or criminal justice systems. The partnership meets at least quarterly to identify areas for further reform.

The New York State Child Welfare Court Improvement Project (CIP)

CIP began in 1994 and was administered by the Permanent Commission on Justice for Children until 2006. At that time, the increased focus on court operational issues prompted the transition of the administration of the project to OCA’s Division of Court Operations. OCFS and OCA have built a strong partnership to support effective collaboration between the family courts and the LDSSs. There are currently over 26 county and NYC local collaboratives. OCFS continues to partner with OCA CIP in providing technical assistance to local collaboratives. OCFS will be providing training to family court judges on the Interstate Compact for Placement of Children. Additionally, OCFS and OCA collaborated on an adoption initiative with the New York City for Administration for Children’s Services and the New York City Family Courts to address the

backlog of pending adoptions and KinGAP petitions as a result of COVID-19. Work continues as each entity looks to further streamline the process.

Sister State Agencies

OCFS engages in consultation with a broad spectrum of stakeholder groups which includes collaboration with statewide offices and agencies such as OMH, DOH, OPWDD, OASAS, SED, and OTADA.

One example of collaboration is a meeting with state agency partners every two weeks to discuss cross-systems youth with complex needs. The focus is on how we create holistic, cross-system services because children and families may interface with multiple systems. When we talk about Mental Health, Behavioral Health, and Physical Health, that necessitates conversations with our sister-state agencies about our service delivery across systems. The bi-weekly Deputies cross-systems meeting is a focused service delivery meeting, breaking down system silos and discussing how we can create holistic program models and better serve children and families.

What gaps exist in consultation?

OCFS consults with a wide array of stakeholder groups to gather a comprehensive understanding of the needs, concerns, and perspectives of various populations affected by the child welfare system, as described above. This input is crucial for developing and implementing effective policies and programs that address the unique challenges and strengths of different communities. OCFS did not identify any specific barriers or challenges to stakeholder engagement.

Conclusions and Continuous Quality Improvement Activities

Item 31 is rated as a **strength** as OCFS does have a well-functioning system to ensure that in implementing the provisions of the CFSP and developing related APSRs, the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP.

OCFS values stakeholder collaboration and input and continues to work to find meaningful ways to incorporate the many voices of those served in and impacted by the child welfare system.

Item 32: Coordination of CFSP Services with Other Federal Programs

How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population?

Summary of Performance

New York State assesses Item 32 as an area of **strength** as OCFS has processes in place to ensure services or benefits of other federal or federally assisted programs serving the same population are coordinated. This area was assessed as a strength in CFSR Round 3 and OCFS has continued to coordinate with agencies that serve similar populations.

Analysis

OCFS continues to serve as the Title IV-B Agency for NYS. OCFS is dedicated to improving the integration of services for New York's children, youth, families, and vulnerable populations; to promoting their development; and to protecting them from violence, neglect, abuse, and abandonment. The agency provides a system of family support, juvenile justice, child care and child welfare services that promote the safety and well-being of children and adults.

OCFS is responsible for programs and services involving foster care, adoption and adoption assistance, child protective services including operating the SCR, preventive services for children and families, and protective programs for vulnerable adults. OCFS is also responsible for the functions performed by the State Commission for the Blind (NYSCB) and coordinates state government response on Native American services to support the needs of Native Americans on reservations and in communities in New York.

As OCFS is not the only state agency utilizing federal funding to support children and families, collaboration is imperative. A key approach in cross-systems collaboration which involves bi-weekly Deputy Commissioner's Cross Systems meetings, which bring together sister state agencies such as the OMH, DOH, and SED. These meetings facilitate discussions, partnerships, and collaborations to address the needs of families engaged with multiple systems.

Additionally, OCFS coordinates with various other federal or federally assisted programs through participation in statewide councils, committees, and advisory boards. The agency also conducts meetings with stakeholders to assess needs and service provision while minimizing resource duplication. These collaborations aim to improve service integration and coordination, ensuring a comprehensive and effective support system for children, youth, and families.

OCFS staff are involved in several collaborative efforts related to a wide range of child, youth, and family services. OCFS is committed to working cooperatively with other state agencies, community providers and advocacy groups to forge partnerships to develop and implement effective strategies to address issues that affect New York's children and families. These joint efforts may be formalized through interagency task forces, interagency workgroups, implementation of relevant legislative or regulatory changes, or informal collaborative responses offered in real time to an identified problem. All these efforts have positive effects beyond the

stated issues in forming working relationships and mutual understanding of approaches to populations and problems and have the continuing effect of improving communication and problem-solving ability, thereby promoting improved service delivery.

Social Determinants of Health

A collaboration with OASAS, OMH, and DOH to address inequities that impact marginalized communities. OCFS is committed to addressing the Social Determinants of Health (Economic Stability, Social & Community, Neighborhood & Environment, Health Care access & Quality, Education) by establishing a bureau dedicated to reducing the impacts across all areas of the child welfare system. This effort's mission is to work collaboratively across NYS agencies to create a comprehensive data driven statewide blueprint for addressing SDOH across all sectors.

This group is working to:

- Address Adverse Childhood Experiences (ACES) and applying a trauma focused framework for all policies and initiatives developed and implemented.
- Address the systemic issues (racial disparities, ineffective policies, and practices) faced by the most marginalized members of our state.
- Create or expand a statewide dashboard utilizing benchmarks to highlight improvements across all SDOH domains.

Direct Cash Transfer Pilot

Poverty has been identified as a powerful predictor of child maltreatment and child welfare involvement. Recent research shows that even modest economic and concrete supports are associated with reduced child maltreatment and involvement with child welfare. Toward that end, OCFS, partnered with OTDA, the Center for Guaranteed Income Research (CGIR), University of Pennsylvania, Youth Research Inc. (YRI) and Redlich Horwitz Foundation to launch a Direct Cash Transfer Pilot experiment in Onondaga, Monroe, and Westchester Counties in 2023. The project enrolled 150 households (50 from each of the aforementioned counties) that are receiving $500 per month, unconditionally, for a period of twelve months.

Council on Children and Families

OCFS collaborates with the Council on Children and Families, particularly its Interagency Review Team, which focuses on identifying resources for children interacting with multiple systems. The Council is authorized by law (under powers and duties of the Council, Social Services Law section 483-b) to identify and resolve interagency issues and jurisdictional disputes that impede access to services for children and youth who have complex needs and may require services from multiple agencies.

The Council receives referrals about helping to facilitate services for children and youth with complex conditions. The primary objectives for such referrals are to ensure that individual children and youth receive the most appropriate community-based or residential services at the least restrictive level, and to resolve interagency service disputes. The Council receives referrals for resolution from a variety of sources, including parents, children's advocates, local departments of social services, Committees on Special Education, county probation

departments, state agencies, the Governor's Office, and Senate and Assembly staff, and moves swiftly to resolve each case.

Medicaid Redesign

One key initiative that NYS has implemented since CFSR Round 3 that has expanded the service array to children and families across every aspect of the child welfare system is the NYS Medicaid Redesign. The Children's Medicaid Redesign transformed the ability of children/youth in foster care to access a more comprehensive network of providers and physical/behavioral health services during placement and when discharged from foster care. OCFS has collaborated extensively with DOH and OMH to provide support to voluntary foster care agencies to provide up to six Children and Family Treatment and Support Services (CFTSS) including Other Licensed Practitioner (OLP), Crisis Intervention (CI), Community Psychiatric Supports and Treatment (CPST), Psychosocial Rehabilitation Services (PRS), Family Peer Support (FPS) Services, and Youth Peer Advocacy and Training.

In 2022, approximately 6,800 children in foster care received services through CFTSS, which is half of the overall population of children in foster care. A majority of the services provided (over 60%) are through OLP for evaluation and counseling services and the next most utilized are CPST (22%) and PRS (13%). In addition, most voluntary foster care agencies are licensed as 29-I Health Facility providers so the children served by each are able to access up to five core limited health related services which include skill building, nursing services, Medicaid treatment planning, and discharge planning, clinical consultation, and Medicaid managed care liaison. In 2022, over 14,000 children were able to access these services. CFTSS services can be provided to children residing in their home or a foster home. Their services follow them regardless of their placement, which promotes stability and permanency. OCFS is assessing the effectiveness and accessibility of these services.

New York State Department of Health (DOH)

OCFS hosts a monthly Safe Sleep Workgroup with DOH to discuss ongoing safe sleep campaigns, keep open lines of communication, and collaborate on preventive work. One example is the collaboration to develop and disseminate safe sleep messages through outreach and education. In 2023, OCFS continued its initiative of distributing safe sleep kits for caregivers and various stakeholders throughout the state. OCFS distributed 5,545 safe sleep kits across New York State in 2023. The kits include a "Follow the ABCs of Safe Sleep" tote bag, door hanger, magnet, brochure, window cling, and a *Sleep Baby: Safe and Snug* board book, all of which contain information on safe sleep practices. The kit also includes a Halo Sleep Sack for a baby to discourage the use of blankets or other less safe alternatives.

In addition, OCFS operates the Statewide Child Fatality Review Team. This is a multidisciplinary team of high-level state, local, and private partners, including DOH, that examines trends in child death and works towards reducing them through statewide preventive projects.

Human Trafficking Training

In 2020, OCFS partnered with OTDA, DCJS, and OASAS to cross train professionals operating under different oversight agencies. Partnerships with other state agencies, including the Office of Victim Services (OVS), continued in 2022. An online training on human trafficking continues

to be mandatory for all LDSS and county child welfare employees; the training is accessible via the Human Services Learning Center and is titled “Human Trafficking/Commercially Sexually Exploited Children.

Office of Court Administration (OCA) Permanent Judicial Commission on Justice for Children Commission

The Commission is comprised of an executive director, the OCFS commissioner, judges, lawyers, advocates, physicians, legislators, and state and local officials. The Commission’s work focuses on the importance of engaging youth in their permanency hearings, promoting the use of data to improve outcomes for children, youth and families, addressing issues related to children and youth of incarcerated parents and the educational outcomes for children and youth involved with the courts, and reducing the use of confinement for girls in the juvenile justice system. OCFS works with the Commission to reduce the use of detention and placement for girls who have been arrested, and to seek supportive community-based responses that improve public safety. The Executive Director of the Commission is a Chair of the Partnership for Youth Justice and shares that title with a Deputy Commissioner from DCJS and an Associate Commissioner in OCFS.

Alignment leadership meetings with the commissioner of OCFS and other OCFS leadership, the Deputy Chief Administrative Judge for Courts Outside New York City, and the Deputy Chief Administrative Judge Office for Justice Initiatives began in 2017 and extended into 2022. The meetings included standing data discussions, including creating a workgroup tasked with brainstorming a direct and useful way to get data into the hands of individual judges to assist in informed decision making. Over the years the meetings covered topics such as OCFS’ LEAN project, reinforcement of kinship placements and efforts, shortening the length of stay in foster care, scaling the Child Welfare Court Improvement Project (CWCIP) statewide, re-entry into foster care, and efforts to resolve court backlogs. There were discussions about OCFS’ regulatory change, which expanded the definition of kin for approved foster boarding homes. This aligned with adjustments to section 1028 of the New York Family Court Act to expand the definition of kin to certain other non “relatives.”

New York State Division of Criminal Justice Services (DCJS)

OCFS continues to work with DCJS Office of Probation and Correctional Alternatives (OPCA) on reforms on status offender practice, which is shared across LDSSs and probation at the local level. This partnership has expanded further during collaborative work related to recent PINS reform legislation. It is anticipated that this collaboration with OPCA, and other offices at DCJS, will continue to be intentionally leveraged to promote best practices, as well as the successful implementation of other legislative and practice reforms.

DCJS is also leading a new state-level interdisciplinary team focused on missing youth, including youth who leave home or foster care placement without permission. This collaborative is focused on identifying best practices, recommending legislative reforms, and supporting a pilot intervention program while tracking outcomes. Due to the nature of this state-wide work, it is anticipated that it will certainly continue over the course of 2025-2029.

State Education Department (SED)

OCFS and SED entered a Memorandum of Understanding (MOU) in 2015, which enables data sharing of student educational information for foster care and juvenile justice youth. As part of the MOU, OCFS is able to obtain education data for children in foster care. This data is utilized for effective case management to arrive at better educational outcomes for children in foster care. In 2024, OCFS and SED updated their MOU regarding data sharing for students in foster care. The updates aim to improve data reliability by capturing the entire population of students who experienced foster care during the reporting period. Caseworkers can see if the child is on grade level, is in receipt of special education services, assessments, attendance, and grades in each class with teacher comments.

OCFS also collaborates with the SED to fund and develop Family Opportunity Centers (FOCs). These centers are located across the state and cater to the needs of at-risk families by enhancing protective factors and linking them with community partners. The services offered by FOC programs aim to prevent child abuse and neglect, promote permanency, and improve student mental health, school climate, and student attainment.



OCFS also collaborates with SED to promote educational stability for children and youth in foster care. In 2018, OCFS and SED produced the Students in Foster Care Tool Kit for Local Education Agencies and Local Social Services Agencies, which established a standard process for local social services districts, voluntary agencies, and local education agencies to coordinate their work to promote educational stability for students in foster care. The Tool Kit outlines the roles and responsibilities of local agencies, providing direction regarding school selection, best interest decision-making, transportation, and dispute resolution. OCFS and SED lend ongoing guidance to local education and child welfare agencies to support implementation of the policies outlined in the Tool Kit.

Conclusions and Continuous Quality Improvement Activities

Item 32 is rated as a **strength** as OCFS has a well-functioning system to ensure that services or benefits of other federal or federally assisted programs serving the same population are coordinated. This area was assessed as a strength in CFSR Round 3 and OCFS has continued to coordinate with agencies that serve similar populations.

G. Foster and Adoptive Parent Licensing, Recruitment, and Retention

New York assessed the state's performance on this systemic factor using the state's performance on Items 33-36. New York believes the state ***is in substantial conformity*** with the systemic factor of foster and adoptive parent licensing, recruitment, and retention as ***all items*** are assessed to be strengths.

Item 33: Standards Applied Equally

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or childcare institutions receiving title IV-B or IV-E funds?

Summary of Performance

NYS assesses Item 33 is rated as a **strength** as OCFS does have a well-functioning system to ensure state standards are applied to all licensed or approved foster family homes or childcare institutions receiving title IV-B or IV-E funds. This area was an area needing improvement in the CFSR R3 as information from the statewide assessment, and confirmed through stakeholder interviews, showed that because of insufficient monitoring, New York was not adequately ensuring that state standards were adequately applied to all licensed or approved foster family homes. Since then, NYS incorporated into the R3 program improvement plan, strategies to strengthen the practice of certifying and approving foster/adoptive foster homes through the release of several policies and enhancement to the Foster and Adoptive Home Development (FAD) module in CONNECTIONS, and increased monitoring of certified and approved foster homes to promote consistency in meeting regulations.

Analysis

As a state-supervised, locally administered child welfare system, recruitment, licensing, and direct oversight of foster and adoptive homes is the responsibility of LDSSs and VAs. OCFS provides the regulations and policies to which LDSSs and VAs must adhere. OCFS provides oversight of LDSS and VA practice and supports them with guidance and technical assistance as needed.

Foster and Adoptive Homes – Certification or Approval State Standards

NYS regulations 18 NYCRR 421.16(b) and 18 NYCRR 443.2 (c)(1)(i) establish the standards for licensing or approving foster and adoptive homes and OCFS policies outline the procedures and requirements that must be followed to meet the regulations. NYS continually updates standards and guidance to remain in compliance with Federal Regulations.

- After the 2019 release of the Children's Bureau final National Model Family Foster Home Standards (Model Standards), OCFS released the revised 19-OCFS-ADM-07-RI: FFPSA Model Licensing Standards and Updated forms for the Certification or Approval of Foster/Adoptive Homes.

To ensure standards are applied equally, and in line with federal standards, initial foster home certification or approval requires completion of the following by all foster, adoptive, and kinship applicants[19]

- A Foster/Adoptive Parent Application (OCFS-5183B)
- The Foster/Adoptive Applicant Medical Report (OCFS-5183D)—an attestation on the health of the family, including a complete physical examination of the applicant that is filled out by a physician, physician's assistant, nurse practitioner, or other licensed and qualified health care practitioner.
- The Safety Review Form (OCFS-5183E)—completed by the LDSS or VA during an initial inspection of the applicant's physical residence.
- Criminal history background check (CBC) and NY Statewide Clearance Register of Child Abuse and Maltreatment (SCR) clearance (see item 34)
- A training program approved by OCFS (see item 28)
- A home study—allows the LDSS or VA to evaluate the applicant's ability to provide a safe, nurturing home that promotes children's health and well-being.
- The Final Assessment and Determination Form (OCFS-5183K)—designed to assist caseworkers in assessing and summarizing all the information regarding applicants and their households.

Foster home certification or approval must be renewed each year. LDSS/VA practice procedure for annual renewal of a foster home's certificate or letter of approval must include the following per 18 NYCRR 443.10:

- A written evaluation of the home and family that uses the same criteria as were used for the initial certification or approval under 18 NYCRR Part 443
- A written evaluation of the care provided children in the home and the working relationship of the foster parents or relatives with the LDSS or VA
- A written statement from a physician about the foster family's or relative family's health, if it has been two years since the date of the last medical exam.
- An oral review of the evaluation with the foster parent or relative foster parent before the certificate or approval is renewed.
- The completion of criminal history record checks for each person over the age of 18 who is currently residing in the foster home, if that person has not previously had a criminal history record check completed (e.g., a person who entered the home since the preceding certification or approval or a person who reached age 18 during that period)

Since CFSR R3, to improve oversight of this process, OCFS made improvements to the CONNECTIONS system in the FAD module. OCFS requires the LDSS and VA to record the completion date of each requirement into FAD prior to the approval or certification or reauthorization of a foster home.

OCFS monitors the FAD module in CONNECTIONS to verify the completion of all certification requirements by way of an annual desk audit. Missing information in active emergency or active foster/adoptive homes are tracked and shared with the respective regional office, which is

[19] Foster Care Practice Guide for Caseworkers and Supervisors, Chapter 7; 18-OCFS-ADM-07

responsible for working with the LDSS/VA to address the missing information. Those homes remain in the tracking system and are monitored until the issues have been mitigated or the home has closed. OCFS will continue to conduct these desk audits and provide findings, via regional office staff, to LDSSs and VAs for mitigation and correction. The most common finding is the missing fingerprint information of household members that have turned 18 since the initial certification of the foster home. OCFS continues to assess this process to proactively address areas of recurring concern.

OCFS verifies that standards are met in foster and adoptive home certification and reauthorizations during Voluntary Agency Reviews (VARs). OCFS conducts an onsite review of each VA every three years to assess compliance with state regulations and policies. An OCFS review tool is utilized to evaluate compliance with licensing standards and quality of assessments.

To assist home finders in understanding the requirements of certifying or approving a foster/adoptive home, OCFS developed a Home Finding Practice Guide in March 2020.

A few of the topics in the practice guide include:

- Responding to inquires
- Conducting initial interview or orientation
- Assisting with self-assessment
- Obtaining background and clearance checks
- Providing training and preparation
- Conducting initial home study
- Completing final assessment and determination

OCFS oversees practice in adoption programs through an annual review of each agency. This review includes a full case review of three to five child and foster home records depending on the size of the program. An OCFS review tool, similar to the one used in the VAR, is utilized to evaluate compliance with licensing standards and quality of assessments. Adoption reviews provide programs with areas identified as strengths and areas needing improvement. Program improvement plans (PIPs) are required to address areas needing improvement and are approved and monitored for effectiveness by OCFS. Common PIP strategies include the development of internal controls to monitor adherence to regulations and quality assessments.

OCFS provides various opportunities for technical assistance and guidance to promote the standard application of foster care standards:

- OCFS sponsors an annual statewide Homefinding Summit for the sharing of information and best practices. These three-day conferences feature speakers and focus groups to support and enhance practice.
- OCFS Regional Office staff hold quarterly regional, specialized meetings with LDSS and VA home finders, foster care supervisors, and joint planning meetings with directors of services from LDSS and VA executive directors to provide training, technical assistance, policy changes, and an opportunity for shared learning.
- Regional office staff conduct quarterly site visits to every foster care agency to provide oversight and technical assistance.
- OCFS Regional Office Permanency Specialists meet quarterly and informally discuss reviews, findings, and concerns with compliance with licensing standards. These meetings provide an opportunity to identify and address statewide concerns.

Emergency Certification of Foster and Adoptive Homes

A potential foster home or relative home may be approved or certified on an emergency basis for up to 90 days. A relative is defined as: (a) an adult who is related to the parent(s) or stepparent(s) of a child through blood, marriage or adoption to any degree of kinship; (b) an adult with a positive relationship to the child or child's family including but not limited to a child's godparent, neighbor, family friend; or (c) an unrelated person where placement with such person allows half-siblings to remain together in an approved foster home, and the parents or stepparents of one of the half-siblings is a relative of such person.

Full approval is required within 90 days of the child's placement, though the LDSS or VA can extend the emergency certification period if the agency is waiting for the results of the SCR clearance or criminal background check[20]. If the emergency foster parents fail to meet other requirements, it is expected that the foster home be closed and if the child(ren) is to remain in foster care, they be moved to a suitable certified or approved home.

Emergency certifications are tracked in the FAD module. In 2022, there were 3,650 emergency certifications in 2,248 homes. Within 90 days of emergency certification, 91% were either closed or became certified foster homes. By 93 days of emergency certification, 99% were closed or certified.

2022 Foster Home Emergency Certifications
Source: CONNECTIONS

	# of emergency certifications	# Closed or certified within 90 days	% Closed or certified within 90 days	# Closed or certified within 93 days	% Closed or certified within 95 days
Emergency Certifications in 2022	3,650	3,314	91%	3,650	99%

Waivers of Regulatory Requirements and Exceptions

A LDSS or VA may request an exemption or waiver from and non-safety, non-statutory requirement applicable to the approval of foster homes as set forth in state regulations. A waiver of non-statutory requirements may be granted when it is necessary to allow the child to be placed in the home, it is in the child's best interests to be placed in the home, and it is consistent with the health, safety, and welfare of the child. A waiver may be executed between the foster parents and authorizing agency and is subject to review and approval by the LDSS with legal custody of the child[21]. All waivers must be requested using the Exception/Waiver Request Form in the FAD module, by the authorized agency.

When the proposed waiver is approved, the LDSS must document how the granting of the request relates to the best interests of the child. Should it be determined that the waiver is not necessary or in the best interests of the child, upon notice to the agency, the LDSS with legal

[20] 18 NYCRR 443.7(h)(2)
[21] 18 NYCRR 443.3(b)(16)

custody of the foster child must disapprove the proposed arrangement. A home may also be granted an exception to capacity and other licensing standards under certain circumstances, when they are consistent with the health, safety, and well-being of children in care. These exceptions are not waivers. Rather, they are specific allowable conditions and circumstances as alternatives to the general standards[22].

2022 Foster Home Exceptions/Waivers Source: CONNECTIONS			
	Exceptions/ Waivers	No Exceptions/ Waivers	Total
New Certifications	12 (.3%)	4,108	4,120
Recertifications	60 (.4%)	14,180	14,240

In 2022, exceptions and waivers were granted in 0.3% of all new foster home certifications and 0.4% of recertifications. A waiver may be requested during emergency approval or at any time during the authorization period of a fully approved foster home. Each time an exception or waiver is approved, the home finder must document whether the exception or waiver is still necessary at each subsequent annual reauthorization. Exceptions and waivers are tracked in the FAD module and reviewed with every foster home reauthorization.

A focus group with Tribal Leaders and a survey of Directors of Services both revealed that certification requirements can be a barrier to placing children with relatives. The process was described to be cumbersome, complicated, and at times challenging for relatives to meet deadlines. A recent federal rule change allows states to establish separate, more flexible standards for kinship foster homes (relative or fictive kin). In response, OCFS is exploring creating home study standards that better meet the needs of kin and the children in their care, while ensuring safety.

Childcare Agencies – Licensing State Standard

OCFS licenses all congregate foster care facilities. In addition to 18 NYCRR Part 441, NYS established the following regulatory standards applicable to each category of congregate care programs licensed, regulated, and supervised by NYS:

- 18 NYCRR Part 442 Institutions
- 18 NYCRR Part 447 Agency Boarding Homes
- 18 NYCRR Part 448 Group Homes
- 18 NYCRR Part 449 Supervised Settings

The voluntary agency licensing process is outlined at the following website: **Voluntary Agency Licensing Foster Care.** Each application is reviewed and approved by OCFS staff, with regional office staff providing guidance and technical assistance to promote ongoing compliance with the regulations. The standards are consistent for each type of congregate care facility.

Staff from Home and Regional Offices provide support to the VAs during licensing and amendments to licenses. Meetings are held with leadership from the VAs on a quarterly basis to discuss issues and explore solutions. OCFS also works closely with the Council on Family and Child Caring Agencies (COFCCA) to address systemic issues faced by congregate care agencies, such as workforce and quality services for children and their families.

[22] 18 NYCRR 443.3(a)(4), 18 NYCRR 443.3(a)(5), 18 NYCRR 443.3(a)(14), 18 NYCRR 443.3(b)(4), 18 NYCRR 443.1(i), and 18 NYCRR 443.6

OCFS conducts an onsite review of each VA every three years to assess compliance with state regulations and policies. Prior to the onsite visit, a desk audit is conducted that includes a review of youth related data (safety, permanency, and well-being), patterns and trends of any institutional abuse reports, serious incident reports, and quarterly site visit reports. The case review, known as a VAR, includes both children in the residential program and in foster boarding homes licensed or approved by the VA.

In 2022, 34 of 103 voluntary agencies had a VAR. Reviews assessed practice in institutions, group homes, supervised independent living programs, agency operated boarding homes, and foster boarding home programs. PIPs were required for 32 (94%) of the agencies.

Common areas needing practice improvement include engagement with and provision of services to fathers, documentation of case activities, assessing the appropriateness of the placement, identifying relatives as placement resources, involving youth in the development of transition planning, updating visitation plans as necessary, updating the child's permanency goal, and achieving permanency in a timely manner. Several agencies were required to address identified safety concerns such as a lack of safety intervention/response to protect a child, not documenting a safety assessment of an employee hired with a criminal background check, and not fingerprinting youth placed in a in a foster home who turned 18 years old. For all identified concerns, strategies have been implemented. In the case of safety-related issues, there is a particular focus on enhancing staff training, improving oversight and supervision, and strengthening tracking protocols.

OCFS regional office staff review and approve PIPs, and the strategies detailed within each PIP are discussed at quarterly meetings held with the agency. Training and technical assistance is provided by regional office staff on an on-going basis.

In addition to quarterly site visits and VARs, regional office Fire Safety Representatives conduct physical plant inspections at least annually, but often twice per year (one announced visit and one unannounced visit). Violations of regulation are cited, and corrective action plans are required and monitored. Many of the items are corrected during the fire and safety inspection, such as missing outlet plugs, broken light bulbs, kitchen uncleanliness, and expired food items. The fire safety staff conduct follow-up visits to verify corrections are completed.

In 2022, 117 fire and safety inspections were completed, with 72% (84) noting at least one violation. Examples of concerns include doors being obstructed, outdated boiler inspections, missing exit signs, missing carbon monoxide alarm, missing outlet covers, balusters missing from the handrailing, use of extension cords. *100% of violations were corrected and verified by the fire safety inspectors within the designed timeframe.*

Conclusions and Continuous Quality Improvement Activities

Item 33 is rated as a ***strength*** as OCFS does have a well-functioning system to ensure state standards are applied to all licensed or approved foster family homes or childcare institutions receiving title IV-B or IV-E funds.

OCFS acknowledges a disparity in the scrutiny applied to the quality of assessments conducted by LDSS and VAs when certifying and approving foster homes. Records of VA home finding cases are reviewed during VARs using a tool developed by OCFS. This provides an opportunity for both oversight and technical assistance to Voluntary Agencies. LDSS practice reviews,

conducted in the form of a PQI review, do not include a review of home finding records. OCFS is exploring strategies to incorporate the strengths of the VAR process into LDSS reviews.

Item 34: Requirements for Criminal Background Checks

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

Summary of Performance

New York State assesses Item 34 as a **strength** as there is a well-functioning system that ensures compliance with federal requirements for criminal background clearances for licensing or approving foster care and adoptive placements. Additionally, the case planning process includes provisions for addressing the safety of foster care and adoptive placements for children. This was an area of strength in the CFSR R3.

Analysis

NYS law[23] and OCFS regulations[24] governing criminal background checks for foster and adoptive placements comply with federal standards. There are processes in place to ensure both foster and adoptive parents, as well as employees in congregate care settings, have a criminal background check as part of the foster home certification or hiring process.

Foster and Adoptive Parent Certification

OCFS has issued several administrative directives to LDSSs and VAs describing the background clearance process[25]. Applicants for certification or approval, and any person over the age of 18 residing in the home of prospective foster or adoptive parents, must submit to a national and state criminal history record check. Additionally, they must be cleared against the SCR and the central register of any other state where they have lived in the five years prior to applying for certification or approval.

New York exceeds federal requirements by requiring criminal history record checks at the time of renewal of foster home certification or approval of adults who enter a foster home after the previous certification or approval.

OCFS requires LDSSs and agencies to provide a Notice Regarding Fingerprinting Requirements[26] to prospective foster and adoptive parents and set up tracking controls to be certain that each person in the household over the age of 18 has been fingerprinted.
The FAD module within our CONNECTIONS system of record is used by LDSSs and VAs to track compliance with licensing requirements for foster and adoptive homes. To support compliance with the CBC requirement, OCFS implemented system edits in CONNECTIONS requiring the entry of SCR clearance and CBC dates prior to certifying or approving a foster or adoptive home.

[23] Social Services Law §378-a(2)
[24] 18 NYCRR 421.27(f) and 18 NYCRR 443.8(g)
[25] 16-OCFS-ADM-20 Fingerprinting and Criminal History Record Checks for Foster and Adoptive Parents
[26] Form OCFS-2660

During quarterly site visits to VAs and LDSSs, OCFS regional office staff provide technical assistance related to the FAD module and provide resources to LDSSs and VAs that include the Home Finders Guide and other resources that can be found on the OCFS website. OCFS also provides local/statewide instruction and technical assistance throughout the year via local meetings, webinars, and statewide conferences.

When a CBC reveals a charge or conviction of any crime, the LDSS or VA must perform a safety assessment of the conditions in the household[27]. This safety assessment is documented in the FAD module in CONNECTIONS.

State law and regulation requires the safety assessment to include:

- whether the subject of the charge or conviction lives in the household,
- the extent to which that individual may have contact with the child in foster care or other children living in the household, and
- the status, date, and nature of the criminal charge or conviction.

The state's process for monitoring ongoing safety of children includes placing the fingerprints of foster or adoptive parents on "search and retain" with DCJS. This enables OCFS to notify the LDSS or VA of any future arrest for a crime in NY, as long as the foster or adoptive home remains open. Whenever OCFS provides such an arrest notice, the LDSS or VA must perform a safety assessment of the conditions in the household and document this assessment in the CONNECTIONS system.

NYS does allow a child to be placed in a relative foster home before the required background checks are completed. When a relative has been identified as a resource willing to foster a specific child entering care or already in care, the LDSS or VA may initiate the emergency approval process. The emergency approval is in effect for 90 days, during which time the relative or eligible nonrelative completes the requirement for full approval as a foster home, including the SCR clearance and CBC. An expedited home study assesses the relative's home to ensure that there is no apparent risk to the health and safety of the child. During the period of emergency approval, Title IV-E funding is not claimed.

After the initial certification or approval of a foster or adoptive home, any child living in the home who turns 18 years old and anyone who moves into the home who is over the age of 18 must be fingerprinted. To monitor compliance and control for this, OCFS conducts an annual desk audit of certified foster homes and approved adoptive homes to assess statewide consistency of licensing standards. This includes a review of the SCR clearance and CBC results, safety assessments, and use of the required of LDSS/VA template for emergency homes and foster or adoptive home certification or approval. Findings from these desk audits are sent directly to the corresponding regional office staff who work directly with the LDSSs and VAs to address and correct any issues. As noted in Item 33, OCFS provides various opportunities for technical assistance and guidance to promote the standard application of foster care standards, which includes CBCs.

[27] 18 CRR-NY 421.27(f) and 18 NYCRR 443.8(g)

OCFS demonstrates a high compliance rate with foster and adoptive home CBCs.

Event During 2022	Number of Adults Living in the Home	Number of Adults with CBC Entered	Percentage of Adults with CBC Entered
Foster or Adoptive Home Certification or Approval	6,998	6,521	93%
Annual Foster Home Reauthorization	16,299	15,887	98%

Event During 2022	Number of Adults Requiring a Safety Plan	Number of Adults with a Safety Plan	Percentage of Adults with a Safety Plan
Foster or Adoptive Home Certification or Approval	370	366	99%
Annual Foster Home Reauthorization	974	969	99%

Congregate Care Employees

OCFS[28] requires that all persons seeking employment with a LDSS or a contractor of a LDSS who have the potential for regular and substantial contact with children must have a New York child abuse and maltreatment check and must execute a sworn statement whether such person has ever been convicted of a crime in New York or any other jurisdiction as a condition of employment. Should such staff also work in an OCFS licensed congregate care program, they would be subject to both a national and New York State criminal history record check per section 378-a(1) of the Social Services Law.

On November 19, 2019, OCFS issued an administrative directive to inform VAs of the expanded background requirements for persons working in congregate programs described in the federal Family First Preventions Services Act (FFPSA) and Part I of Chapter 56 of the NY Laws of 2019 (Chapter 56). This directive[29] contained updated guidance related to background checks. All adults employed in congregate care programs licensed or certified by OCFS receive a national and state criminal history check, an SCR clearance, and an out-of-state child abuse register inquiry for personnel who have resided in another state with the last five years. A justification is required if a person is hired having a criminal history, such as the incident is not related to their ability to care for a child. Agencies do not hire individuals whose criminal history would require a safety plan.

To assess statewide consistency of licensing standards, which includes a review of SCR clearances and CBCs, and safety assessments of congregate care staff, OCFS conducts personnel record checks as a part of Voluntary Agency Reviews (VARs). In 2022, a total of 34 of the 103 voluntary agencies underwent a review of personnel records as part of this OCFS monitoring of compliance. The 34 voluntary agencies represent agencies from across the state.

[28] 18 NYCRR 402.2(e)(iv) and 18 NYCRR 402.2(3)
[29] 19-OCFS-ADM-21 – Expansion of Background Checks for Congregate Care Staff Under the Family First Preventions Services Act

OCFS demonstrates a high compliance rate with congregate care staff CBCs.

Clearance Type	Number Required	Number Completed	Percent Completed
Criminal Background Check	323	319	98.2%
SCR Clearance	468	463	99%
Other State Register	20	19	95%

Process to Address the Safety of Foster Care and Adoptive Placements

Each child placed in foster care has a Family Assessment and Service Plan (FASP) and as part of that plan caseworkers are required to complete the section titled “Adjustment and Functioning.” In this section, caseworkers address the safety of the child by identifying and describing protective factors that keep the child safe in their placement, and if there are any, they describe the plan or plans that provides for the child’s safety. This section of the child’s service plan is reviewed when OCFS conducts case reviews of foster care cases.

LDSS and VA home finding staff assess the overall safety of children placed in a foster home during each annual foster home reauthorization. This process requires an annual assessment (OCFS-5183L) to be completed and approved in CONNECTIONS prior to the authorization end date. LDSS and VA staff analyze the impact of any critical event and CPS investigation since the last annual review on future foster parenting roles and expectations. The physical safety of the home is assessed with the completion of the Safety Review Form (OCFS-5183E), which is required as part of the reauthorization process.

Child safety in foster care placements is monitored by LDSSs and VAs when conducting casework contacts. During the first 30 days of placement, casework contacts are to be held with the child as often as is necessary to implement the services tasks in the family and children’s services plan but must occur at least twice. At least one of the two contacts must be held at the child’s placement location. The focus of the initial contacts with the child must include, but need not be limited to, determining the child’s reaction to the separation and his/her adjustment to the out-of-home placement and arranging for services necessary to meet his/her needs. After the first 30 days of placement, casework contacts are to be held with the child at a minimum of once a month. At least two of the monthly contacts every 90 days must be at the child's placement location.

Measure	Number	Description
1. Children in Foster Care	18,053	Count of children who were in foster care for at least one entire month during the 2023 Federal Fiscal Year
2. Visit Months (Contact Months)	149,088	Total months children in foster care were visited
3. In Care Months	154, 449	Total months children were in care
4. Visit Months at Child's Residence	140,592	Subset of three, visit is at the child's residence.
Measure	**Percent**	**Description**
5. In Care Months in which the child was contacted	96.5%	Visit Months (2)/In Care Months (3)
6. Visit Months that occurred in the residence of the child	94.3%	Visits months at child's residence (4)/Visit Months (2)

OCFS continues to monitor the frequency and timeliness of the foster care contacts made by LDSS and VA staff through Data Warehouse reports. Feedback regarding compliance with casework contact requirements is provided to LDSSs and VAs through case record reviews. Data submitted as part of the state's annual casework contact report for FFY 2023 indicates that the percentage of in care months in which the child was contacted at least one time was 96.5%, with 94.3% of the visits occurring the residence of the child.

OCFS monitors the safety of children in foster and adoptive placements through assessment of Item 3 from the ORSI during PQI reviews.

OSRI Item 3 – Risk and Safety Assessment Management – Foster Care

OSRI Item	Item Description	PQI Reviews in 2023 (PUR Start Date 2022)
Item 3A	The agency conducted an initial assessment that accurately assessed all risk and safety concerns.	100% (12/12)
Item 3B	The agency conducted ongoing assessments that accurately assessed all risk and safety concerns	94% (104/111)
Item 3F	There were no concerns for the target child's safety in the foster home or placement facility that were not adequately or appropriately addressed by the agency.	98% (109/111)

Data from the 2023 PQI record reviews shows that in 98% of 109 applicable cases reviewed, there were no concerns identified that were not appropriately or adequately addressed by the agency. Initial safety and risk assessments were documented in 100% of the cases and in 94% of applicable cases ongoing risk and safety was assessed.

Foster Home 3+ Project

When a foster home is associated with a CPS investigation, and it is the third or more CPS investigations the home has had, the new investigation is flagged by OCFS, and additional oversight of the foster home is required by the LDSS and overseen by the OCFS regional office. Checks of prior CPS history are completed to identify potential commonalities of allegations by different children in the foster home, and recommendations are made by the LDSS about the ongoing certification of the foster home. OCFS provides guidance to the LDSS about their responsibility to communicate concerns to the VA that certifies the foster home[30].

Region	# of Foster Homes
Albany Region	37
Buffalo Region	28
NYC Region	153
Rochester Region	20
Syracuse Region	62
Westchester Region	59
Total	359

In 2022, 359 foster homes, across all regions, had enhanced monitoring through this project. As a result of this increased oversight, 10% of the homes had all the children in the foster home removed and placed with another resource, and 7% of the homes had some children removed. Thirty (30) of the 359 homes (8%) were recommended by the LDSS for closure.

Conclusions and Continuous Quality Improvement Activities

New York continues to rate this item as a strength as NYS has provided LDSSs and VAs with the regulations and policies related to compliance with the federal and state mandates to perform criminal background checks. OCFS monitors compliance through desk audits, case record reviews, and personnel record reviews. As noted above, the data from case reviews and desk audits shows that LDSS and VAs are performing criminal background checks related to foster and adoptive homes as well as direct care staff. OCFS will continue to work with LDSSs and VAs to strive for 100% compliance in conducting criminal background checks.

OCFS is currently piloting software that will guide foster and adoptive parent applicants through the entire certification and approval process. The system promotes practice consistency and will aid LDSSs, VAs, and OCFS with oversight through the creation of reports to monitor areas such as the completion of criminal background checks among others. It will also provide more direct access for OCFS staff to fingerprint results, safety plans, and other homefinding documents regarding the safety of foster homes.

[30] 16-OCFS-ADM-13 Requirements Relating to CPS Reports Involving Foster Parents

Item 35: Diligent Recruitment of Foster and Adoptive Homes

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

Summary of Performance

NYS assesses Item 35 as a **strength**. This item was an area needing improvement the CFSR R3 as stakeholders expressed concerns that the state does not have an adequate pool of homes to meet the needs of children in care. Data were not provided to indicate how successful recruitment efforts have been, and some stakeholders noted concerns about accessing relevant data to support recruitment efforts.

Since CFSR R3, as outlined below, New York has:

- Modified the foster home recruitment and retention plan template for LDSSs and VAs to reflect a data driven planning process.
- Increased access and availability of foster home data which directly supports LDSS and VA recruitment and retention efforts.
- Increased support to LDSSs and VAs with child specific recruitment efforts.

Analysis

OCFS is committed to ensuring the certified foster parents in the state reflect the race and ethnicity of the children coming into care. In New York, foster parents are recruited and certified by VAs and LDSSs, which are licensed and monitored by the state. OCFS uses multiple data reports, as outlined below, to both support foster parent recruitment efforts, and monitor the effectiveness of those efforts. OCFS requires the use of this, and locally produced relevant data, in the development of a Foster and Adoptive Recruitment and Retention Plan, outlined below.

Individual Foster Parents Certified in 2022 Compared to Child Admissions in 2022[31]

Race/Ethnicity	Foster Parents	Children
White	47.3%	32.2%
Black	28.1%	38.2%
Hispanic	19.5%	26.4%
Native American /Alaskan Native	0.4%	0.5%
Asian/Pacific Islander	1.4%	1.9%
Other[32]	2.3%	0.8%
Total	100.0%	100.0%

[31] Sources: Foster Parents – CONNECTIONS FAD Module, Children – DMR Dashboard 2022

[32] Other includes missing, declined, or multiple.

To the right is a look at the racial and ethnic breakdown of both the children who came into care in 2022, and the parents that were certified as foster parents in 2022. The data represents all individual foster parents that were certified for the first time in 2022.

Key Observations:

- The percent of foster parents identifying as Native American /Alaskan Native and Asian/Pacific Islander matches the children admitted in 2022.
- A higher percentage of foster parents were white compared the children that entered foster care.
- Recruitment of foster parents identifying as Black and Hispanic continues to be an area of need.

Foster and Adoptive Recruitment and Retention Plan

The federal Multi-Ethnic Placement Act (MEPA), as amended, requires states to develop plans for the recruitment of foster and adoptive families that reflect the ethnic and racial diversity of children for whom families are needed. The purpose of this requirement is to encourage child welfare agencies to have a "pool" of foster/adoptive homes that reflect the ethnic and racial characteristics of children coming into foster care.

Data limitations – Though data collection and distribution has improved, there are limitations. OCFS collects the race and ethnicity data of every person certified as a foster parent. When identifying a person's race/ethnicity, if the person chooses more than one race, OCFS uses a predefined hierarchy to assign one race/ethnicity to the person. In homes where there are two or more certified foster parents, the adults are coded as foster parent one and foster parent two. If there is a third certified person in the home, the race and ethnicity of that person is not captured in the data. To best represent the race/ethnicity of the pool of certified foster parents, the data above represents the total foster parents, not foster homes.

NYS has a vastly diverse population across the state and its seven different geographical regions. For this reason, OCFS gives authority to each of its LDSSs and VAs to develop their own process for the recruitment and retention of foster parents specific to that region. As such, OCFS requires each LDSS and VA that certifies foster homes to develop a local Foster and Adoptive Parent Recruitment and Retention Plan once every four years, with a two-year progress update. It is expected that each LDSS and VA will use data, as detailed below, to inform their recruitment and retention efforts. The Foster and Adoptive Parent Recruitment and Retention Plan template (Appendix H) is made available by OCFS through a web-based system and is designed to assist LDSSs and VAs in the development of a foster and adoptive parent recruitment and retention plan that is compliant with the MEPA, in line with the FFPSA, and NYS regulations. The purpose of the planning template is to guide each LDSS and VA to collect and analyze OCFS-provided and local data to illuminate both strengths and gaps in its current foster home recruitment and retention as it relates to the race and ethnicity of foster parents. Once needs are determined, LDSSs and VAs must set a two-year and a four-year improvement target and may capitalize on existing strengths to develop a plan to address any challenges.

OCFS provides LDSSs and VAs with strategies and resources that assist with the planning and implementation of recruitment and retention plans. These strategies are available on the following website: NY Fostercare Recruitment.

Once submitted, the Local Foster and Adoptive Parent Recruitment and Retention Plan is approved by OCFS, based on a review of the data provided in the plan and knowledge of the LDSS/VA. OCFS monitors the implementation and effectiveness of the strategies in the plans during quarterly site visits (see item 33 for details). If an LDSS/VA has not met their

improvement targets as outlined in their plan, OCFS regional office staff provide technical assistance and support to assist with the identification of different recruitment strategies.

New York Produced Foster Home Data Reports

In 2018, OCFS began a contract with the Chapin Hall Center for Children at the University of Chicago, a research and development center, to develop and maintain a longitudinal data file of foster home data, accessible to authorized state, LDSS, and VA users, through a web-based tool. In 2019, this file was completed, and New York developed and distributed the first annual Foster Home Data Packets to support LDSS and VA efforts to analyze the current foster boarding home population and inform foster home recruitment and retention activities.

OCFS introduced the data packet and the longitudinal data file to LDSSs and VAs as a tool to assist with understanding the demographics and use of foster homes to inform recruitment efforts through a series of webinars, joint planning meeting presentations, and individualized data meetings.

Foster Home Data Supports to LDSSs and VAs

- 308 people attended the Foster Home Data Packet Webinar.
- Five Regional LDSS/VA Joint Planning Meetings were facilitated by OCFS.
- 32 LDSSs and VAs participated in one-to-one data meetings.

Two foster home data packets are produced and distributed annually:

- **LDSS Foster Home Data Packet**: Created for every LDSS, this packet includes all foster homes associated with the LDSS and unless overridden, are located within the county boundaries. The foster homes in this packet are certified and supported by various agencies and serve both children in the district or children from other districts. The data includes demographic and utilization metrics including the race and ethnicity of the foster parents, the median length of service of the home, number of child transfers from the home, and percent of homes that have fostered a teen.

- **Parent Agency Foster home Data Packet**[33]: Created for every LDSS and VA that has at least 10 open foster homes on the last day of the year. The foster homes in this packet are certified by the LDSS or VA and can be geographically located anywhere. The data includes demographic and utilization metrics including the race and ethnicity of the foster parents, time to first placement, active within the previous six months, and other data which can help an agency understand their current recruitment and retention practices.
    - In addition to this packet, the raw data file with the underlying data is available to the parent agency for additional analysis. In 2023, 101 parent agency packets were distributed and 32 of the LDSSs and VAs

Based on a survey of LDSS directors of services, 84% of the respondents agreed, strongly agreed or were neutral when asked if they have the data they need to target foster and adoptive parent recruitment efforts to match the race/ethnicity of children that come into care.

[33] See Appendix J

requested and received the underlying data for further analysis (32%).

Monitoring and Assessment Profiles (MAPS)[34]: MAPS are data packages that provide information on the major child welfare services provided by LDSS, and are produced and published for each LDSS, Rest of State (excluding NYC), and Statewide on an annual basis. Program data on Child Protective Services, Foster Care, and Adoption are taken from the CONNECTIONS Activity Module and in most instances, numbers are converted into rates or percentages to highlight important aspects of the child welfare service programs. Specific to foster home recruitment, the MAPS data includes foster care admissions, discharges, and in care populations by race and ethnicity, placement in foster boarding homes and adoptive homes by race/ethnic code, and the number of those children placed in a foster or adoptive home with a foster parent of the same race/ethnic code.

FOSTER CARE CHARACTERISTICS
2022

PLACEMENT IN FOSTER BOARDING AND ADOPTIVE HOMES:

Child's Race	Total with Race/ Ethnic Code	# Same as Foster/ Adoptive Parent	% Same as Foster/ Adoptive Parent
Total	6,130	3,662	59.7
White	1,932	1,604	83.0
African American	2,342	1,450	61.9
Latino	1,735	599	34.5
Native American/Alaska Native	12	3	25.0
Asian	109	6	5.5

Key Observations:

- Statewide, at the end of 2022, 59.7% of children placed in foster homes were placed in homes with foster parents of the same race/ethnicity.
- Though a disproportionate number of African American children were in care, 61.9% of them were placed in homes with parents of the same race.

Support of Child Specific Recruitment Efforts

Since CFSR R3, New York has seen a significant increase in LDSS and VA child specific foster home recruitment efforts. OCFS has established a target of 50% of children in foster care to be placed in kinship foster homes, and supports permanency efforts such as Permanency Round Tables, Wendy's Wonderful Kids, and Virtual Adoption Exchanges (see item 36 for more details). Each of these efforts reflect the commitment of OCFS to placing children with relatives or kinship caregivers first, and when that is not possible, making diligent efforts to find permanency resources for children to support their individual cultural, medical, and emotional needs.

Kinship Placements

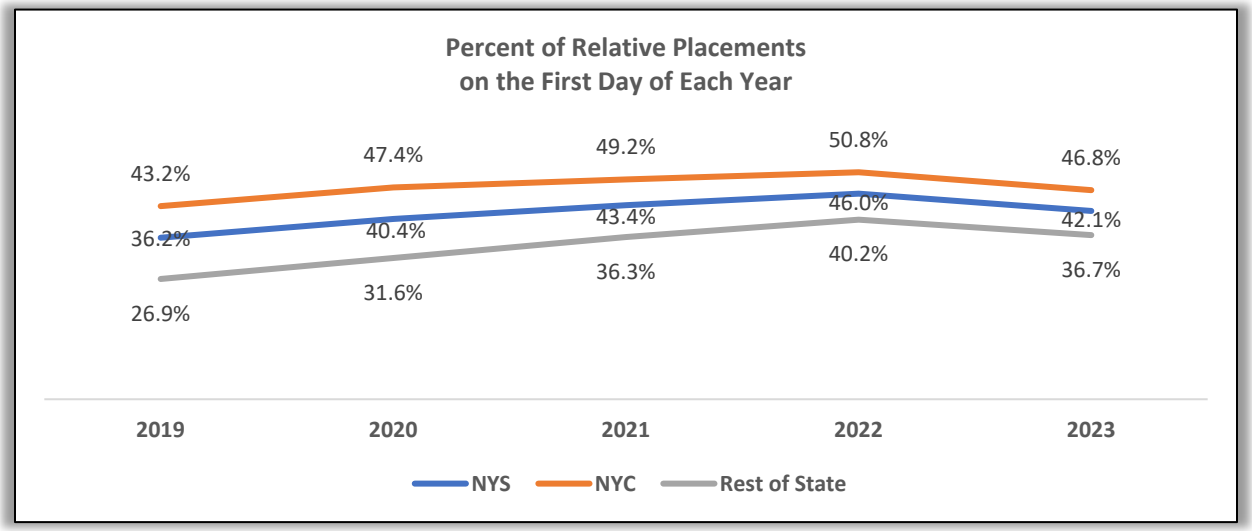
To promote kinship placements, OCFS requires LDSSs to have a Kin-First Firewall policy[35]. This practice is intended to increase safe and appropriate kinship placements by requiring a higher level of review to verify that all viable relatives and adults with a positive relationship to the child have been explored to achieve a kinship placement before making a non-kinship placement.

Additionally, OCFS developed a Kinship Champion[36] Training to cultivate dedicated "Kinship Champions" within LDSSs who search for, engage, notify, and assess potential kin caregivers and provide support to those families. Kinship Champions are the repository of information about the options, processes, and supports necessary to place children with kinship caregivers

[34] See Appendix K
[35] 20-OCFS-ADM-18 Kin-First Firewall Practice
[36] 21-OCFS-ADM-15 Kinship Champion

and safely sustain those placements. Kinship Champions serve as advocates within the LDSS to maximize kin placements and are liaisons to the community to continue to expand awareness of the need for kin resources to support children who are removed into foster care.

These efforts support the state reaching the goal of 50% of all children in care residing with kin. Below is CONNECTIONS data that show the percent of all children in care on the first day of the year by placement type. Both New York City and the Rest of State have steadily increased the percentage of children in care with Kinship caregivers, with a small decline in 2023.



Conclusions and Continuous Quality Improvement Activities

New York assess Item 35 as ***strength*** as OCFS has a system to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide.

NYS recognizes the need to continuously work to improve the way families experience the child welfare system and has the following data quality efforts underway:

- A better understanding and alignment of the parameters used to develop the longitudinal foster home data file maintained by Chapin Hall, with parameters used in OCFS data, could produce a more accurate picture of the foster home recruitment and retention system and lead to increased used of the tool for data analysis and CQI efforts. Since the two sources are not currently in alignment, data quality is brought into question.
- Annual review of the metrics used in the foster home data packet, with input from stakeholders, is an ongoing activity to provide the best information to understand the functioning of the system.
- Monitoring of the effectiveness of the local foster and adoptive recruitment and retention plans through quarterly site visits continues to occur statewide to identify and address local strengths and areas of need.

Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

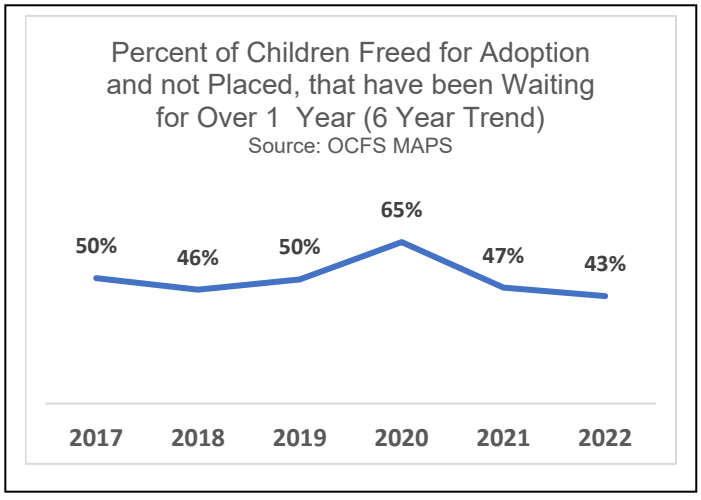
Summary of Performance

Item 36 is rated as a **strength**. OCFS has a well-functioning system statewide for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide as demonstrated below. This area was identified as an area needing improvement in the CFSR R3 as information demonstrating the effectiveness of efforts to facilitate timely adoptive or permanent placements for waiting children was not provided. In the analysis below, New York believes evidence of a well-functioning system is provided.

Analysis

OCFS produces a Monitoring and Assessment Profile data package (MAPs) each year for each LDSS and Statewide that includes an adoption section with the following metrics[37]: Milestones, Waiting Population on Last Day of the Year, Time to Achieve Milestones, Characteristics, and Adoption Trend Data.

This package is accessible through the OCFS website and can be used by LDSSs and OCFS leadership for tracking, monitoring, and planning around child adoption metrics. Though OCFS does not track usage of data package, it is referenced often in discussions with LDSSs. Some highlights from the 2022 Statewide MAPs package:



Of all children with a goal of adoption on December 31, 2022, 9% (318/3,345) were freed and had been waiting for a placement over a year. As the breakdown below shows, this has been improving over the last six years.

Statewide on December 31, 2022:

- Of the 13,636 children in foster care, 3,345 (25%) had a goal of adoption.
- Of the 3,345 with a goal of adoption, 1,628 (49%) were free for adoption.
- Of the 1,628 free for adoption, 736 (45%) were not placed.

[37] New York State.pdf (ny.gov)

- Of the 736, 318 (43%) of these children had been waiting for longer than 1 year. This percentage has improved since 2017 (See trend graph to the right)

Timeliness of adoptions:

- Of the 1214 children adopted in 2022,
    - 48% were adopted within 2 years of their goal set to adoption.
    - 10% were adopted within 2-3 years of their goal set to adoption.
    - 33% were adopted more than 3 years of their goal set to adoption.

New York utilizes many resources both within the state and with other states to identify permanent resources for, and facilitate timely adoptive or permanent placements for, waiting children in foster care.

Intra-Jurisdictional Recruitment

The cross-jurisdictional tools and resources used to facilitate timely adoptive or permanent placements within the state for waiting children are detailed below.

The Adoption Album

The Adoption Album is the OCFS electronic database which includes both child photo listing and the family adoption registry. LDSSs are mandated to photo list children freed for adoption, who are not adoptively placed, in the NYS Adoption Album unless a waiver has been granted. NYS caseworkers can run a statewide search of registered families that may be a potential match for their photo listed children.

- In 2022, there were 190 children on the list, and 71 children were placed with adoptive resources.
- In 2023, there were 173 children on the list, and 39 children were placed with adoptive resources.

AdoptUSKids

There are 20 LDSSs and VAs that utilize AdoptUSKids as an additional venue to showcase children who are freed without an adoptive resource.

Heart Gallery New York

Regional Heart Galleries support recruitment efforts for adoptive families for children who are freed for adoption. Heart Galleries use professional photos and generally feature those children who have been waiting the longest for an adoptive placement. OCFS provides annual funding of $20,000 to support the Heart Gallery New York, a website which features children from across the state.

- There are 56 children featured in the Heart Gallery New York as of December 4, 2023, and of those, 14 are visiting potential adoptive resources.

Virtual Adoption Exchanges

In November 2020, OCFS began holding bi-annual, cross jurisdictional, Virtual Adoption Exchanges. A virtual exchange presents children who are freed for adoption with no identified adoptive resource. The virtual exchange usually presents nine to 10 children from different LDSSs and VAs to an audience of individuals with an approved adoption home study. OCFS staff plan and organize the events and assist LDSSs, VAs, and adoption agency staff members (home finders, caseworkers, and supervisors) with the facilitation of exchanges and the presentation of each child's strengths and needs. Information presented includes a professional photo, a facilitated discussion of the child between the child's team and a five-minute video of the child talking about who they are and what characteristics they want in a prospective family. Each child's presentation is approximately 20 minutes in length. At the end of the exchanges, there are break-out room sessions for each of the children presented, where the approved adoptive parents can meet with the children's caseworkers and ask questions.

- Since OCFS began virtual adoption exchanges, 94 children have been featured; eight children included in the exchanges have been adopted and 11 others have been placed with an adoptive resource.

Wendy's Wonderful Kids (WWK)

The partnership with the Dave Thomas Foundation for Adoption (DTFA), through the Wendy's Wonderful Kids (WWK) program began in July 2017. The OCFS contract with DTFA is for recruiters to work with children in foster care in counties outside of New York City. Through the OCFS contract, DTFA subcontracts with eight voluntary agencies who are responsible for hiring 21 adoption specialists (or recruiters). Recruiters are trained by DTFA in the WWK model of child focused recruitment. WWK recruiters employ effective, aggressive, and accountable child-focused recruitment activities. They directly engage youth to explore their attitudes towards adoption and seek their input on prospective adoptive resources. Recruiters conduct an exhaustive search for people with whom the child has had a bond or positive relationship. The expectation is recruiters will carry a caseload of 12-15 active cases.

LDSSs refer children to the WWK program who have been in care two or more years, children who are 9 years of age and are freed, youth 16 years of age who are freed with a goal of Another Planned Permanent Living Arrangement (APPLA), and children where the court will not agree to termination of parental rights until an adoptive resource is identified. WWK provides OCFS with monthly reports on pre-placements. Those reports are shared with the OCFS regional office permanency specialists who follow up with the LDSSs where a child has been in placement for six months but not finalized to determine if there are barriers to the permanency and what can be done to eliminate the barrier. WWK provides OCFS with quarterly reports that include quarterly and cumulative data, identifies the recruiters, the counties they serve and the number of active caseloads per recruiter.

In 2022 612 children 9 years and older were freed for adoption, in care 2 or more years but not adoptively placed. In 2023 there were 605 children nine years and older were freed for adoption, in care 2 or more years but not adoptively placed. These data reports do not include children

with waivers, therefore accurately identifying the total number of children eligible for adoption is not possible.

- In 2022, 44 children receiving WWK services were adopted, four attained permanency through legal guardianship and four were reunified with their family.
- In 2023, 34 children receiving WWK services were adopted, five attained permanency through legal guardianship and two were reunified with their family.
- As of December 2023, a total of 266 children have been adopted, 24 children attained permanency through legal guardianship and 23 children were reunified with family. Currently, there are 51 counties with Memorandums of Understanding with DTFA.

Kinship Guardianship Assistance Program (KinGAP)

NYS KinGAP is designed for a foster child to achieve permanent placement with a committed adult who had been the child's foster parent for at least six months. This program provides financial support and, in most cases, medical coverage for the child, beginning with the child's discharge from foster care to the guardian. The level of financial support is similar to the maintenance payments received while the child was in foster care.

- In 2022, 567 children achieved permanency through KinGAP; 343 children in New York City, and 224 from the rest of the state.
- Based on CONNECTIONS data, between January 1, 2023, and December 31, 2023, there were a total of 259 KinGAP applications received. Out of those applications, 144 were received by New York City and151 by counties (including the St. Regis Mohawk Tribe) in the Rest of State. In 2023, in addition to New York City, applications were received in 32 counties.

Data Warehouse Adoption Reports

In 2019, OCFS created child specific adoption reports for LDSSs to use to monitor and track adoption activities to promote the timely photo listing of children who were freed and not placed in an adoptive home and identify those children waiting an extended period for permanency. Each LDSS can run the reports as needed. OCFS regional permanency specialists also use the reports as part of their monitoring activities and in conjunction with their permanency round tables to identify those children who require additional recruitment activities.

Inter-Jurisdictional Recruitment

In addition to efforts to work within the state to facilitate timely adoptions, New York also works with other states, tribal and government entities in the following ways.

Interstate Compact on the Placement of Children (ICPC)

Recognizing the importance of an expedited and more efficient ICPC process, in August 2018, OCFS began operating in the National Electronic Interstate Compact Enterprise (NEICE). NEICE was developed to increase administrative efficiency of the ICPC process, improve service delivery for children, and reduce barriers for children to access interstate placement. All LDSSs and VAs processing ICPC cases must do so using NEICE.

When OCFS ICPC receives an ICPC request from a LDSS or VA in New York, the documents submitted within NEICE are reviewed for accuracy and then forwarded to the corresponding state for review and assignment. When applications are complete, this review and assignment can be completed within one business day. When OCFS ICPC receives a home study request from another state in NEICE, it is transmitted to the LDSS or VA that same day in NEICE. OCFS uses the NEICE case management system for all child welfare ICPC cases.

Since employing NEICE, NYS ICPC does not have any backlog of ICPC requests. All requests are addressed within one business day. The use of NEICE as a communication and case management system has proven effective as evidenced by the high percentage of Safe and Timely Requests that are completed within the 60-day timeframe.

- In 2022, of the 120 incoming safe and timely home study requests received, OCFS completed 96% of the requests within the 60-day timeframe.
- Conversely, of the 124 outgoing safe and timely home study requests made by NYS in 2022, 85% were completed by the receiving state within the 60-day timeframe.
- As of 9/30/2023, of the 221 incoming safe and timely home study requests received, NYS completed 90% of the requests within the 60-day timeframe.
- Conversely, of the 207 outgoing safe and timely home study requests made by NYS in 2023, 90% were completed by the receiving state within the 60-day timeframe.

ICPC Border Agreement

In November of 2020, a border agreement was executed between OCFS, the New York City Administration for Children's Services, and the New Jersey Department of Children and Families. The agreement applies to temporary, emergency placements of children between the five counties of New York City and five New Jersey counties pending completion of a full home study under the ICPC. If the temporary placement is approved per provisions of the Border Agreement, the ICPC request must be submitted within 10 business days from the date the child is placed. These types of ICPC requests are used for foster care placements and when appropriate, progress to adoptive placements. If placed per the Border Agreement provisions, the child remains in the home, under supervision, throughout the foster certification period.

- In 2022, the Border Agreement was invoked for 37 NY children placed with NJ relatives and 14 NJ children placed with NY family members. Of those requests, placements were expedited for a total of 32 children for the year. The remaining 19 requests were deferred, not resubmitted, or approved as ICPC requests.
- In 2023, the Border Agreement was invoked for 35 NY children placed with NJ relatives and 12 NJ children placed with NY family members. Of those requests, placement was expedited for a total of 30 children for the year. The remaining 17 requests were deferred, not resubmitted or approved as ICPC requests.

Interstate Compact on Adoption and Medical Assistance (ICAMA)

OCFS supports the provision of Medical Assistance (MA and MA COBRA) for children with a fully executed adoption subsidy agreement whose families move across state lines through the administration of the Interstate Compact on Adoption and Medical Assistance (ICAMA). In 2022, significant changes were made to the OCFS ICAMA process that increased its efficiency. An Administrative Directive (ADM) was written and distributed to all LDSSs and VAs. This ADM required LDSSs and VAs to use a new electronic process for making and processing ICAMA

requests. The ADM also required LDSSs and VAs to use a new set of ICAMA forms that are completed electronically. ICAMA requests are now filed and stored electronically.

- OCFS processed 619 new ICAMA requests and 481 ICAMA change requests in 2022. Requests are processed generally within less than two weeks.
- OCFS processed 524 new ICAMA requests and 693 ICAMA change requests in 2023.

Conclusions and Continuous Quality Improvement Activities

Since CFSR Round 3, NYS has increased its avenues to connect adoptive families and children awaiting permanency, reduced the length of time to process ICPC requests, and increased the access to data to improve LDSS and VA monitoring.

- OCFS continues to face challenges with securing Medicaid or health insurance for non-IV-E children under cross-jurisdictional placements. OCFS is open to recommendations from the Children's Bureau.
- OCFS experiences challenges with other states/governments timely completion of home studies and placement recommendations for outgoing ICPC requests. OCFS is open to recommendations from the Children's Bureau.
- OCFS continues to consider whether use of the AAICAMA national database meets NYS security requirements. Similar to NEICE, we anticipate use of this national database would expedite the ICAMA process.

SECTION V - APPENDICES

The state data profile and other appendices can be requested from the state or the Children's Bureau.